HANDBOOK FOR FACULTY
AND
OTHER UNCLASSIFIED STAFF*

Adopted by the Faculty on 10/24/2005

OFFICE OF ACADEMIC AFFAIRS
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*This handbook does not cover employees categorized as "Unclassified Health Care Employees"
October 24, 2005

Dear Colleagues:

This document constitutes the Handbook for Faculty and Other Unclassified Staff. This handbook is intended to be used as a policy manual, not simply as an informational text. As you are aware, legislation, charters, guidelines, rules and regulations increasingly affect our professional activities. For that reason, we have included in the Handbook policies, regulations and other information that we believe you will find useful. All of the policies and procedures included in the Handbook have received appropriate review and approval. All appointments to the faculty and unclassified staff are governed by these policies and procedures, in addition to other applicable policies and procedures, rules and regulations of the University and the Kansas Board of Regents.

In order to address significant changes in our administrative structure and changes in both internal and external policies, a series of faculty and staff committees have reviewed the handbook and developed this updated Handbook for Faculty and Unclassified Staff which reflects these changes as of October, 2005. This handbook revision was submitted to the Faculty Assembly Steering Committee in the fall of 2005 and was approved by vote of the full faculty on October 24, 2005 and is now in force as of that date.

The most current version of the handbook may always be found on-line at:


Please direct any questions or suggestions to the Vice Chancellor for Academic Affairs. We want this Handbook to be as useful and helpful as possible.

Respectfully,

Robert Hemenway                  Barbara Atkinson
Chancellor                      Executive Vice Chancellor
University of Kansas           University of Kansas Medical Center
REVIEWERS AND CONTRIBUTORS
For
THE HANDBOOK FOR FACULTY AND UNCLASSIFIED STAFF
OCTOBER, 2005 Edition

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Allen Rawitch, PhD
Vice Chancellor for Academic Affairs

*School of Allied Health changed to School of Health Professions (updated 10/2011)

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7. Handbook Section II. University Governance
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8. All Sections for legal review
   • Office of General Council

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PREFACE

This handbook is intended as a convenient reference text for policies and information concerning employment and professional activities at the University of Kansas Medical Center (KUMC), Kansas City and Wichita. As such, it includes policies for faculty and other unclassified staff. Many of these approved policies are published in full in a variety of other sources, including the following:

- Kansas Board of Regents Policies and Procedures

- The University of Kansas Senate Code

- KUMC Faculty Assembly Bylaws
  [http://www2.kumc.edu/aa/fa/fac_assembly.htm](http://www2.kumc.edu/aa/fa/fac_assembly.htm)

- KUMC Equal Opportunity Handbook
  [http://www.kumc.edu/eoo/](http://www.kumc.edu/eoo/)

- Personnel Policies and Procedures Affecting Unclassified Health Care Employees

- KUMC Medical Staff Bylaws
  [http://www.kumc.edu/som/facgov/bylawsofthemedfaculty.pdf](http://www.kumc.edu/som/facgov/bylawsofthemedfaculty.pdf)

  [http://www.kumc.edu/guides/policyguide.html](http://www.kumc.edu/guides/policyguide.html)

Faculty and unclassified staff are encouraged to review the above-listed governing documents.

The University reserves the right to expand upon, alter, amend, or delete any provisions contained herein as may be deemed necessary or appropriate by the administration. Accordingly, the policies described in this handbook are not intended to create a contract between the University of Kansas and its employees. The online version will be updated by the Vice Chancellor for Academic Affairs as policy changes are approved and will be considered the official version at any given time.
Revisions in this handbook are coordinated by the Vice Chancellor for Academic Affairs, with the assistance of the Faculty Assembly Steering Committee, vicechancellors, deans, University General Counsel, faculty, and others. Recommendations for changes or additions to this handbook may be communicated to the Vice Chancellor for Academic Affairs or the KUMC Faculty Assembly Steering Committee chairperson.

When a major reorganization of this handbook is contemplated, a committee including representatives of all areas of the Kansas City and Wichita campuses shall be convened by the Vice Chancellor for Academic Affairs. Comments and recommendations for changes shall be invited from all interested parties. All proposed changes, additions, and deletions shall be reviewed by the Faculty Assembly Steering Committee and by the appropriate administrative offices. Such changes in policies and procedures shall be made only after their adoption through appropriate channels, such as the Kansas Board of Regents, the University Faculty Organization, and the Executive Vice Chancellor and/or the Chancellor.

Changes in policies and procedures that are adopted after the publication of any edition of this handbook are effective upon adoption and will be included in the next revision. The most current information on changes or policy can be found on KUMC’s homepage at www.kumc.edu. The official version of this handbook will be online at http://www2.kumc.edu/aa/fa/. Hard copies of the official handbook will be available in Dykes Library and the Offices of the Executive Vice Chancellor, Legal Counsel, and Academic Affairs.

Allen B. Rawitch, Ph.D.

Vice Chancellor for Academic Affairs
A. The Board of Regents

The University of Kansas is one of six state universities of higher education governed by the Kansas Board of Regents. Established in 1925 by the Kansas Legislature, the board consists of nine members who are appointed by the Governor with the advice and consent of the Kansas Senate. State law requires that no more than five members shall be identified with the same political party. Members of the board serve for overlapping terms of four years each.

The board is assisted by a professional staff, which enables Regents to address questions of general policy. Normally, neither the board nor its staff enters into the internal administration or operation of the University. However, administrative procedures prescribed by the agencies of the State of Kansas apply to the University, and much of the procedural detail that governs the operation of the University of Kansas is defined by state law or by regulations issued by the Kansas Department of Administration.

In its consideration of policies, the board is generally guided by recommendations from the chief executive officers of the six Regents institutions. At the Kansas City campus, copies of the minutes of board meetings are deposited with the Offices of the Chancellor, Vice Chancellor for Academic Affairs, Legal Counsel, Executive Vice Chancellor, Business Affairs, and Hospital Administration. These documents are freely available for review.

B. The University

The chief executive officer is the Chancellor, who is named by and serves at the pleasure of the Board of Regents. As chief executive officer, the Chancellor serves as head of the state agency units that comprise the University of Kansas.

In the actual administration of the University and the maintenance of relationships with the Board of Regents, the Legislature, and state agencies and offices, the Chancellor is assisted by a staff that includes the Provost/Executive Vice Chancellor for the Lawrence campus, the Executive Vice Chancellor for the Medical Center campus, the Vice Chancellor for Administration, the University General Counsel, and the Assistant to the Chancellor.
C. University of Kansas Medical Center

The primary administrative officer for the University of Kansas Medical Center is the Executive Vice Chancellor, who is appointed by and serves at the pleasure of the Chancellor. The Executive Vice Chancellor is assisted in the administration of the University of Kansas Medical Center by the Senior Vice Chancellor for Academic and Student Affairs, the Vice Chancellor for Administration, the Vice Chancellor for Research, and the Vice Chancellor for Academic Affairs. The Executive Vice Chancellor consults with the KU Hospital CEO on matters pertaining to that organization.

The Executive Vice Chancellor is responsible for the direction, coordination, and supervision of the academic programs and activities of the University of Kansas Medical Center. The organizations that comprise the University of Kansas Medical Center are the School of Medicine (Kansas City and Wichita campuses), Schools of Nursing and Health Professions*, and the Office of Academic Affairs, including the Division of Graduate Studies) (modified 11/2012). Each entity is administered by respective deans. The Dean of Graduate Studies and Vice Chancellor for Student Services both report to the Senior Vice Chancellor for Academic and Student Affairs (modification of title 10/2011). All other deans report directly to the Executive Vice Chancellor. Each academic dean is responsible for student affairs, admissions, academic performance, and counseling in their respective schools.

KU Hospital is a public authority, and its CEO oversees operation of the hospital and all of its activities and departments. The CEO of the KU Hospital reports to the KU Hospital Authority Board. The Executive Vice Chancellor of KUMC and the CEO of the KU Hospital consult with each other on matters that involve academic programs.

The Vice Chancellor for Administration reports to the Executive Vice Chancellor and provides staff support to the Executive Vice Chancellor for development and management of facilities, information processing, and other activities as assigned.

The Vice Chancellor for Academic Affairs and Dean of Graduate Studies, a combined title, supports all academic affairs development and management, represents Graduate Studies and postdoctoral fellows (modified 10/2011) on the KUMC campus, maintains faculty records, and represents the Medical Center on the Council of Chief Academic Officers at Kansas Board of Regents meetings.
The Vice Chancellor for Research is designated as the KUMC official responsible for research administration. The Vice Chancellor for Research also serves as President of the University of Kansas Medical Center Research Institute.

The Associate Vice Chancellor for Academic Resources has oversight of Dykes Library and information resources and technology and functions as the chief information officer for the campus.

Several service entities at the University of Kansas Medical Center contribute to the achievement of institutional goals. These include the Student Union Corporation; the Medical, Health Professions*, and Nursing Alumni organizations; and the KU Endowment Association.

D. Organization and Administration of the Schools

The chief administrator of each school is a dean, who is appointed by and serves with the consent of the Executive Vice Chancellor and the Chancellor [see Section III for selection procedures]. The Schools of Medicine, Nursing, and Health Professions* are compartmentalized either by departments, sections, or programs. The heads of those units are appointed by and serve at the pleasure of the appropriate dean with the concurrence of the Executive Vice Chancellor, and where appropriate, the KU Hospital CEO [see Section II for appointment procedures].

Subject to the controls of law and administrative review, the faculty of each school may establish admission standards, curricula, academic standards, and degree requirements. Post-graduate medical education programs within the clinical departments of the School of Medicine will be established and supervised by the department chairs with concurrence by the Executive Dean of the School; such programs are subject to review by the Accreditation Council for Graduate Medical Education. Certificate-granting programs may be established in each school by the appropriate department chair and/or program director with concurrence from the appropriate dean and Executive Vice Chancellor (or designee); proposed certificate-granting programs will be submitted to the Chancellor and reported to the Board of Regents. Graduate degrees and certificates proposed by the Schools of Health Professions*, Medicine, and Nursing must be submitted for approval by the Vice Chancellor for Academic Affairs and Dean of Graduate Studies and the KUMC Graduate Council prior to transmittal to the Graduate School in Lawrence for approval and transmittal to the Board of Regents.
The Office of Academic Affairs is divided administratively into five divisions: Graduate Studies, Faculty Affairs, Postdoctoral Affairs, International Programs, and the Interdisciplinary Graduate Program in Basic Sciences. The Division of Graduate Studies represents Graduate Studies on the Kansas City campus. The Vice Chancellor for Academic Affairs and Dean of Graduate Studies is responsible for the graduate curriculum and graduate programs located on the campus of the University of Kansas Medical Center, along with reviewing the performance of the schools in meeting their delegated responsibility for admission, advising, supervision, and retention of students, the approval of course changes, and the general monitoring of graduate programs. The Dean of Graduate Studies also is responsible to the Dean of the Graduate School at the Lawrence campus for obtaining appropriate approval and review by the University Graduate Council on issues of relevance [see Section VIII]. The Office of Faculty Affairs coordinates faculty appointments, promotions, tenure, sabbaticals, and emeritus appointments as well as maintenance of faculty records.

The chief administrative officer of the Department of Student Services is the Vice Chancellor for Student Services. The office is administratively divided into seven divisions: the Office of the Dean of Student Services; the Office of the Registrar; Student Counseling and Educational Support Services; Student Financial Aid; Student Health Services; Student Resources, Wellness, and Diversity; and the Kirmayer Fitness Center.

Academic matters that affect more than one school in the University are subject to the rules and regulations of the University of Kansas Medical Center Faculty Assembly. New majors and degree programs must be submitted to the Vice Chancellor for Academic Affairs and Dean of Graduate Studies and the Executive Vice Chancellor prior to forwarding to the Board of Regents for approval.

II. UNIVERSITY GOVERNANCE

A. Charter of the Governmental Bodies of the University

The structure of faculty and student participation in University government is based upon the following charter, which was granted on March 20, 1969, by the Board of Regents:

WHEREAS, for many years there has been in operation a validly created Senate of the University of Kansas composed of members of the faculties and staff of the University and a validly created All Student Council composed of representatives of the student body of the University; and,
WHEREAS, it now seems desirable that the faculties, staff and students of the University form a coordinated governmental structure;

NOW, THEREFORE, the Board of Regents of the State of Kansas hereby (1) approves the UNIVERSITY OF KANSAS SENATE CODE duly adopted by the appropriate constituencies of the University and recommended to it by the Chancellor; (2) charters the various governmental bodies provided for in said Code as it may be amended from time to time with the approval of the Chancellor; and (3) decrees that this charter supersedes the Charter of the Senate of the University of Kansas of March 21, 1968.

(Printed copies of the Senate Code may be obtained at the Office of the Chancellor.)

B. Governmental Organization

The Faculty Assembly is a joint body consisting of faculty (salaried 50 percent time or greater) from the University of Kansas Medical Center. The assembly is concerned with the definition of educational goals, objectives, programs and policies of the Medical Center, as well as the planning and development of faculty and support for research. The group shall provide advice to the administration on these matters.

The Faculty Assembly is composed of the following subdivisions: the medical faculty including the Wichita campus, the nursing faculty, the health professions* faculty, and the faculty of the Department of Pharmacy Practice. Each school has its own faculty organization with appropriate standing committees. The Faculty Assembly meets at least twice each year, and the presiding officer for the Faculty Assembly will be the chair of the Faculty Assembly Steering Committee.

Other standing committees for the Faculty Assembly include the election, research, inter-campus liaison, resource planning and new programs, library, faculty concerns and policies, appeals, and informatics committees.

Faculty and staff working in the hospital or clinics are also governed by the Medical Staff Bylaws, Patient's Bill of Rights and the Hospital Ethics Handbook, which are available in the Office of the Chief of Staff of the University of Kansas Hospital, and by the Human Resources Policy and Procedures Handbook, which is available in the Hospital Authority Human Resources Office.
The rules contained in Roberts Rules of Order (revised) will govern the Faculty Assembly in all applicable cases, not inconsistent with the Assembly Bylaws.

With regard to hospital privileges, these medical staff regulations must be adhered to and any interpretation of faculty rights are not intended to supersede the Medical Staff Bylaws, the Hospital Ethics Handbook (Fourth Edition) and the Patients' Rights brochure.

C. Bylaws of the Faculty Assembly

1. Article I – Name
   The Faculty Assembly of the University of Kansas Medical Center is established subject to the bylaws that follow and to the Charter of the Senate of the University of Kansas. Hereinafter, assembly shall mean Faculty Assembly.

2. Article II – Object
   The assembly shall be concerned with the definition of educational goals, objectives, programs and policies of the Medical Center and the planning and development of facilities and support for research. The assembly shall provide advice to the administration on these matters.
   The Medical Center is defined as all educational programs and facilities under the academic control of the various faculties as defined in Article III. Purely academic matters are reserved to the respective faculties. Implementation of faculty policies is a function of the administration. The assembly shall not be concerned with hospital functions or with purely intradepartmental affairs.

3. Article III – Membership
   a) Section 1. Assembly Membership
      i. The assembly shall be constituted of all 50 percent time or greater salaried faculty members of the Medical Center, including its branches, whose professional activities are restricted to the Medical Center.
      ii. Each member of the assembly is entitled to one vote in actions of the assembly.
      iii. Members of the faculty who are less than 50 percent time or are non-salaried are encouraged to participate in meetings of the assembly and to function on assembly committees. These include adjunct and visiting faculty, teaching associates, and faculty who are degree candidates.
within the Medical Center. They may be granted the privilege of debate, but they shall be ineligible to vote or to chair any committee.

b) Section 2. Subdivisions of the Faculty and the Assembly
   i. The assembly shall be composed of the following subdivisions:
      a) The medical faculty shall be composed of assembly members whose appointments indicate a role in the programs leading to the medical degree or in post-M.D. education.
      b) The nursing faculty shall be composed of assembly members whose appointments indicate a role in programs leading to a baccalaureate and/or advanced degrees in nursing.
      c) The health professions* faculty shall be composed of assembly members whose appointments indicate a role in programs leading to a baccalaureate and/or advanced degree in an health professions* science.
      d) The faculty of the Department of Pharmacy Practice of the School of Pharmacy are assembly members as defined under Assembly Membership above.
   ii. If members of the assembly hold appointments in more than one of the constituent faculties, those members must indicate their primary appointment for purposes of the committee appointments and elections of the assembly.
   iii. The graduate faculty in the Medical Center are appointed by, and act by authority of, the Graduate School of the University of Kansas. Its members are also members of one or more of the faculties listed in Subdivisions of the Faculty and the Assembly. Since it trains all post-baccalaureate degree candidates in the college except M.D.’s, graduate faculty participation on assembly committees should be ensured.

c) Section 3. List of Assembly Members
   A list of the official assembly members by school or library shall be compiled by September 1st annually by the administration.
4. Article IV – Meetings

a) Section 1. Regular Meetings of the Assembly

The assembly shall meet in September of each year to hear plans for the coming school year and to conduct business. The assembly shall meet in the last week of May or the first week of June to hear results of the elections, committee reports, and to conduct business. The date and time for these meetings shall be determined by the Steering Committee.

b) Section 2. Special Meetings of the Assembly

i. Special meetings of the assembly may be called by the Steering Committee or at the request of the chief administrator of the Medical Center.

ii. The Steering Committee shall call a meeting of the assembly within 30 days upon receipt of a written petition signed by ten members of the assembly.

c) Section 3. Notice of Assembly Meetings

i. Notice of the time and places of meetings of the assembly shall be sent to all members at least one week in advance of the meetings. The agenda shall be included with the notice of the meeting.

ii. When in the opinion of the Steering Committee an emergency exists, a meeting may be called on two days' notice. In this case, notification of the department chair for distribution to the individual members shall be considered sufficient.

d) Section 4. Agenda for Assembly Meetings

i. The preparation of the agenda for assembly meetings is the responsibility of the Steering Committee.

ii. Assembly members may recommend to the Steering Committee the inclusion in the agenda of certain items of business.

iii. A member of the assembly, at any meeting, may move for discussion of certain business and, if this motion is passed by the group, the Steering Committee must include this business as an agenda item for the next regular or special meeting of the assembly.

e) Section 5. Presiding Office Assembly Meetings

The chair of the Steering Committee, or a designate, shall preside at meetings of the assembly.
f) Section 6. Minutes of Assembly Meetings
   i. Minutes shall be kept of all assembly meetings and copies of same shall be forwarded to all members within one week after the meeting.
   ii. Suggested corrections to the minutes should be communicated to the Steering Committee for incorporation into the agenda of the next meeting of the assembly.

g) Section 7. Quorum and Decisions
   i. One-fifth of the assembly membership shall constitute a quorum to conduct business.
   ii. Business decisions shall be the will of the majority attending a regular or special meeting of the assembly, provided proper notice of the meetings was given [Article IV, Section 3] and a quorum is present, unless a provision for a mail ballot has been made.

h) Section 8. Mail Balloting on Assembly Decisions
   i. A mail or electronic mail (e-mail) ballot on a decision shall be required if 10 percent of the total assembly membership so demands at any meeting or if it is initiated by the Steering Committee.
   ii. The procedure for a mail or e-mail ballot shall be as follows:
      a) The question shall be submitted by the Steering Committee to the assembly by mail or e-mail ballot by the 10th day following the meeting.
      b) The returned mail or e-mail ballots shall be counted on the 10th day following the distribution of the ballots.
      c) The plurality shall decide. If less than one-fourth of the assembly members return their ballots, there is no vote and no decision of the question.
   iii. The question shall be announced to the assembly by mail or e-mail and shall be in effect following the ballot count.

5. Article V – Standing Committees
   a) Section 1. General Rules
      i. All elected committee members shall be elected by the assembly for three-year terms beginning July 1, unless otherwise specified. Approximately one-third of the members shall be elected each year.
ii. All committees shall have at least one elected member from each of the three schools. On all committees, at least one member shall also be a regular member of the graduate faculty.

iii. Vacancies on the committees that arise after the annual election shall be filled with an appointment by the Steering Committee upon advice from the Election Committee. The term of such appointment shall expire the following June 30.

iv. Students shall be members of all standing committees except the Election Committee and the Appeals Committee on faculty promotions. They shall have up to 20 percent of the total membership on each of the above-designated committees. They shall be elected to the committees from and by the student membership from all of the schools of the University of Kansas Medical Center. All students in good academic standing shall be eligible.

v. Each committee shall elect a chair from its membership and shall establish rules for the conduct of its affairs. These rules together with its minutes and annual reports shall constitute the permanent records of the committee and shall be open to the assembly membership at all times.

vi. The chair shall be a member of the assembly, shall preside at the committee meetings, and shall be responsible for calling meetings and for communicating with the assembly and other committees as necessary.

vii. Committees that become inactive may be reactivated by the Steering Committee.

b) Section 2. Election Committee and Elections

i. The Election Committee shall consist of six members of the assembly elected for a term of three years, with at least two new members being elected each year. The members shall not serve consecutive terms.

ii. The committee shall obtain, examine, and certify the annual assembly membership roster by school or library as prepared by the administration. The committee shall make this roster available to any member of the assembly. The committee shall designate at the fall meeting the number necessary for a quorum.

iii. The committee shall issue a call for nominations for all necessary committee positions by February 1 of each year. Self-nomination is encouraged and ensures a position on the ballot. However, if there are
more than two self-nominations for a position, the committee may select from these and add up to two others (total of four per slate). No nomination shall be accepted after March 1.

iv. Nominees shall not be included on the ballot without their consent. The committee may add nominees when necessary to ensure two nominees for each position and shall provide a means for including write-in candidates. The committee shall encourage participation from the School of Medicine, Wichita.

v. Elections shall be conducted by mail or by secure electronic means. Ballots shall be distributed to the assembly members by April 1. Ballots returned after May 1 shall not be counted.

vi. The committee shall be responsible for counting and recording the number of votes for each candidate. A plurality vote shall elect to each position. Should two or more equivalent vacancies occur in a committee, all nominees shall be candidates for these positions; and the candidates with the largest number of votes shall be elected.

vii. Should a tie vote occur, the Steering Committee shall cast the deciding vote, the decision being made by ballot.

viii. The results of the election shall be reported to the assembly by mail prior to June 1.

c) Section 3. Committees

i. Steering Committee. This committee shall be composed of 10 members. The committee will consist of the chairperson of the Faculty Council of the School of Medicine, the chairpersons of the Steering Committees of the School of Nursing and the School of Health Professions*, three elected tenured members of the Faculty Assembly (one from each school), and the chairpersons of the Research, Information Resources, Faculty Concerns and Elections Committees. The Executive Vice Chancellor or designee will be an ex officio member (non-voting). A chair and chair-elect will be selected by the committee; the chair will serve for one year and the chair-elect will serve as chair in the following term.

The Steering Committee shall have the duty and power to call and conduct meetings of the assembly; to prepare the agenda for such meetings; to appoint ad hoc committees; to fill vacancies on committees; to recommend the abolition or addition of standing committees; and to maintain the records of the assembly. This body should serve as a means...
by which faculty can present issues of common interest to the assembly for discussion and as a means to forward faculty concerns and recommendations to the administration. The chair will represent the faculty of the KUMC campus at the Board of Regents meeting and will participate with the statewide Council of University Faculty Senate Presidents.

ii. Research. This committee shall be composed of seven members, including the four chairpersons of the Research Committees of the School of Health Professions*, the School of Medicine (Kansas City and Wichita), and the School of Nursing, and three elected tenured members of the assembly. The chairperson of the Research Advisory Council will be an ex officio member of the committee.

The Research Committee shall be concerned with the facilitation and promotion of research and shall be the coordinating body for the functions related to resources and facilities for research. As such, it shall review the policies for management of institutional research funds (e.g. Faculty Travel Awards and Shared Biomedical Equipment Funds RI policies and procedures) (modified 05/2010) and for certain related service facilities, which are not under other direction. The committee shall elect a chair each year, as well as a chair-elect to support the chair and serve as chair the following year. The chair of the committee shall serve on the Research Advisory Council and attend their meetings, bringing relevant information back to the committee for their review and approval. The FARC shall also plan and carry out the Faculty Research Day once per year, highlighting the research of current faculty and awarding major research awards for KUMC. (modified 05/2010)

iii. Information Resources. This committee shall be comprised of nine members elected from the assembly, of whom at least four are tenured. The Associate Vice Chancellor for Information Resources, the director of the library, and the chief information officer of the hospital will be ex officio members (nonvoting).

The Information Resources Committee shall be concerned with the development of policies for the use of information resources facilities and for the growth of information resources and its various information resource functions. It shall establish priorities to guide the use of available funds for the purchase of educational material. The committee shall recommend policy concerning the development, acquisition and use of information
resources \textit{(modified 5/2010)} pertaining to the research and educational missions of the faculty. It shall maintain a website for faculty governance.

iv. \textit{Faculty Concerns}. The committee shall be comprised of nine elected members: two tenured members from each of the Schools of Medicine, Nursing and Health Professions*, and three members of the faculty-at-large, including one from Wichita. The Vice Chancellor for Academic Affairs and the Vice Chancellor for Administration will be ex officio (non-voting) members. The committee shall consider requests for assistance relating to any faculty concern, except those of promotion and tenure issues. The Committee for Faculty Concerns shall assist the Steering Committee in resolution of concerns applying to members of the faculty. The Steering Committee may appoint additional ad hoc members based on specific expertise.

v. \textit{Faculty Promotions}.

a) Each school, including the Wichita branch, shall elect a committee in accordance with the bylaws of the school. Each school committee shall review the qualifications of individuals being proposed for promotion and shall make recommendations to the dean. The dean shall make his or her recommendations to the Vice Chancellor for Academic Affairs who shall report the findings of the committee to the Executive Vice Chancellor of the University of Kansas Medical Center, who in turn shall submit a list of his or her recommendations to the Chancellor of the University of Kansas.

b) Specific guidelines for promotion shall be established within each school. These guidelines shall consider service, teaching, and scholarly activity as the major criteria for promotion.

c) An Appeals Committee shall exist to consider individuals for promotion who have been denied recommendation by the school promotions committee. The individual seeking promotion shall provide the Appeals Committee with relevant documents. The Appeals Committee shall submit its recommendation to the Vice Chancellor for Academic Affairs regarding procedural issues in the process of promotion of the individual at the department and school level. The Appeals Committee shall consist of seven voting members and the Executive Vice Chancellor (or designee)
who chairs the committee. Faculty members serving on this committee must be tenured and hold the highest professional rank in their respective schools. The Faculty Assembly Steering Committee shall appoint faculty members who have been (but are not currently) members of the four Promotion and Tenure Committees of the three schools (one from each of the committees) plus three additional faculty members, one from each of the three schools.

d) Tenure and the rank of any newly appointed faculty member at the level of associate professor or above shall be reviewed by the school Promotion Committee. Appointments at the level of teaching associate, instructor and assistant professor shall be reviewed by the Promotion Committee at the option of the dean of the school or in accordance with the bylaws of the specific school.

e) For the purpose of library faculty promotions, procedures equivalent to those specified for each school (V.3.I.1. through V.3.I.4.) shall be established by the library faculty, in consultation with the director of the library and the administration of the Medical Center.

6. Article VI – Parliamentary Authority

The rules contained in Robert's Rules of Order (revised) shall govern the assembly in all cases to which they are applicable and in which they are not inconsistent with these bylaws.

7. Article VII – Methods of Amending These Bylaws

a) Section 1. Proposals to Amend

i. Amendments to these bylaws may be proposed by the Steering Committee.

ii. Ten percent of the assembly may petition through the Steering Committee to amend these bylaws. The proposed amendment shall be submitted in writing with affixed signatures. The proposal must be presented to the assembly at the next meeting.
b) Section 2. Consideration of Amendments

Amendments may be considered at any meeting of the assembly, provided the members receive the proposed amendment in writing one week before the scheduled meeting.

c) Section 3. Adoption of Amendments

i. Amendments may be adopted at the next regular meeting of the assembly by two-thirds of the votes cast, a quorum being present.

ii. Amendments may also be adopted by a two-thirds vote of those members returning mail or e-mail ballots, provided one-fourth of the membership returns their ballots.

III. PERSONNEL

Part 1. Recruitment, Selection, and Appointment of Faculty and Administrators

A. General Guidelines for Recruitment and Selection

Faculty recruitment and selection is initiated by the chair of the involved department or the hiring authority in a school with the initial approval of the dean of that school. Differences between schools and/or departments may require more specific approaches than are described herein. However, hiring authorities and search committees in each hiring process are responsible for complying with the University's Recruitment and Selection Policy and Procedures (link modified 10/2011) operated through the Human Resources Department (HR) and the University's policies (link modified 10/2011) and recruitment and selection procedures (link modified 10/2011) for upholding Affirmative Action, Equal Opportunity and nondiscrimination during the hiring process. Furthermore, the process will avoid any conflict of interest; e.g., a candidate for any position shall not be a member of a search committee assembled to nominate candidates for that position. The Director of Equal Opportunity or designee shall act in an advisory capacity for each search committee. The University of Kansas Medical Center (KUMC) is an equal opportunity employer. Section III.1.B.2.b

B. Faculty Selection and Appointments

1. Selection

a) Process

Criteria and process for selection of each new faculty member will be established by the hiring authority involved and the search committee, and it
should be consistent with and supportive of the established mission and goals of the hiring unit and/or department, school and KUMC. Some differences in the process between schools, departments and/or units might be necessary, although each hiring authority and/or selection/search committee is responsible for complying with University’s policies and procedures as referenced in III.1.A above.

b) Non-Native Speakers of English Requesting Employment as a Faculty Member

To be eligible for employment as a faculty member at KUMC, the Board of Regents implemented the following guidelines as of 2005 (from which no waivers are allowed):

i. All prospective faculty with teaching responsibilities, except for visiting professors, shall have their spoken English competency assessed prior to employment though interviews with their departments chairs, deans of their respective schools and one other faculty member, and students.

ii. If there is some question about their English competency, they will be referred for testing to the ESL personnel in the Office of International Programs at KUMC. A minimum score of 50 on the Test of Spoken English (TSE) is required for eligibility for an appointment without conditions. Those scoring less than 50 on the TSE may be appointed to teach one year on the condition that they enroll in appropriate English language instruction. Attainment of a minimum score of 50 on the TSE shall be required as a condition of reappointment. The ESL level of the faculty member must be documented.

iii. Once spoken English competency is approved, a statement to that effect shall be placed in the individual faculty member’s file which documents those participating in the interview process.

2. Appointments

The University of Kansas, as a member of the Association of American Universities, adheres to the policy formulated by that group of universities, with the exception that the University of Kansas hires on an ongoing basis. At KUMC, full-time appointments are made for either nine- or 12-month periods.
a) Faculty Ranks

The principal titles granted by the University to academic faculty are these: professor, associate professor, assistant professor and instructor. These titles can be modified as appropriate to the faculty member’s primary relationship to KUMC by the prefix clinical, research, visiting, adjunct or courtesy added to the principal title; e.g., “research” indicates the primary relationship is the conduct of research or clinical investigation. These prefix-modified titles and the basic titles for term appointments are approved for up to one academic year at a time. A request for subsequent reappointment, if justified, must be initiated by the appropriate department chair and/or the dean of the school before action by the Executive Vice Chancellor (EVC) or the EVC’s designee. Faculty who volunteer their services will be provided with appropriate identification and be given faculty privileges to the KUMC libraries.

b) Summary Guidelines Chart

See accompanying chart summarizing the guidelines for appointment in Appendix A.

Appointments are finalized by the Vice Chancellor for Academic Affairs, as designated by the Executive Vice Chancellor.

c) Tenured Appointments

Tenured appointments will be renewed annually unless the faculty member is dismissed through proper actions and procedures.

d) Tenure-Track Appointments

A tenure-track appointment will be renewed unless timely notice is given.

e) Non-Tenure-Track Appointments

i. Clinical Scholars Track

The University of Kansas Medical Center may employ and appoint personnel with clinical responsibilities to full-time, non-tenure-track positions (at the rank of assistant professor or higher), as determined to be in the best interest of the Medical Center by the Chancellor. A component of the clinical appointment will include a commitment to clinical education and scholarship. Initial appointments may be one to three years. The combination of initial and subsequent term contracts cannot exceed a total of four years. At the discretion of the school, the initial or subsequent appointment may be a three-year rolling contract. Unless specifically terminated by the University, rolling contracts will
annually roll over to create a new three-year contract. Contracts may also be terminated by mutual agreement of the faculty member and the University. All contracts will be annualized to July 1st. The University may terminate a rolling contract by giving notice prior to June 30th of any year that the contract will terminate at the end of the then-current contract term. Faculty members may apply for a one-time, one-way transfer from the tenure track to the non-tenure track. Upon mutual agreement, transfers from tenure track to this non-tenure track can be made prior to but no later than the end of the fifth year of employment. Time and title in this non-tenure track does not count toward the probationary period to obtain tenure. Should a transfer occur to the tenure track, the guidelines for tenure apply. Any such appointments must be made in specific compliance with parameters approved by the Kansas Board of Regents. Clinical scholar appointments are only available for full-time faculty at the University of Kansas Medical Center and are subject to all other faculty policies and procedures in the handbook (BOR 12/15/95); (rev BOR 3/18/99); (rev BOR 10/16/03).

Web links:
Office of Faculty Affairs: General Characteristics of the Track
Office of Faculty Affairs: Specific Characteristics & Expectations for Promotion
See Summary Guidelines Chart in the Handbook for Faculty and Other Unclassified Staff, Section III.1.B.2.b.

ii. Affiliate Track
Participation in this track is available to individuals employed by the several research institutes in the metropolitan area as well as selected other institutions that have formal affiliation agreements with the University for the purposes of research and education as approved by the Chancellor. These are non-paid positions that do not accumulate credit towards tenure but require a significant commitment of the individual to the research and/or educational mission of the University.

Web links:
Office of Faculty Affairs: General Characteristics of the Track
Office of Faculty Affairs: Details, Including Promotion
See Summary Guidelines Chart in the Handbook for Faculty and Other Unclassified Staff, Section III.1.B.2.c.
iii. Joint Appointments

Web links:
Office of Faculty Affairs: Joint Appointment Policy
See Summary Guidelines Chart in the Handbook for Faculty and Other Unclassified Staff, Section III.1.B.2.b.

iv. Volunteer Appointments

See Summary Guidelines Chart in the Handbook for Faculty and Other Unclassified Staff, Section III.1.B.2.b.

3. Special Designations

  a) Emeritus

  The title of professor emeritus may be granted to any member of the faculty with a regular appointment at the full professorial rank who has been a full professor or has reached the highest rank of attainment in administration (library science or other fields) for a significant period of time (generally at least ten years) and has served the institution with distinction.

  Recommendations for such status normally should be initiated by the department chair and require the approval of the following: the dean, the Vice Chancellor for Academic Affairs, the Executive Vice Chancellor and the Chancellor. Emeritus status may be approved by the chief executive officer of the employing institution (rev. 10/23/97).

  A Certificate of Emeritus Status will be presented to the member of the faculty who will continue to be listed as a member of the faculty (non-voting) until such time as a request is made for removal from the rolls. Persons retiring from the University who do not receive the title of emeritus shall receive no title designation.

  In the event that a faculty member has attained the distinction of being named a University Distinguished Professor, they shall be entitled to retain the title of University Distinguished Professor Emeritus.

  Emeritus faculty status is granted as a continuous appointment and does not require renewal. Emeritus faculty are expected to continue to observe the same professional standards and behavior required of KUMC active faculty.
Privileges extended to persons obtaining emeritus status:

- Such faculty may take membership in the KU Alumni Association and participate in benefits extended.
- Faculty members will remain on University and departmental mailing lists.
- Tickets to athletic, theater and music events will be available on the same basis as for faculty members.
- Certain courtesy benefits are extended by the University Theater, School of Fine Arts, University libraries and parking services. Information on specific programs is available on request from these departments.
- Office and/or research space may be provided where it will benefit and not compromise the institution.

b) University Distinguished Professors

i. Procedures. Nominations will normally be initiated at the departmental level by an individual or group in the appropriate discipline or by an interdisciplinary group. The nomination and supporting materials should be forwarded to the Executive Vice Chancellor (or designee) through the department chair and/or dean for comments and recommendations at each level. Each department and/or school may opt to designate an advisory committee to review and comment on such nominations. A self-nomination may be submitted at the departmental level or directly to the appropriate dean. Such nominations will be sent to the department and/or school for review and comment. The Executive Vice Chancellor (or designee) shall, with appropriate faculty consultation, make the decision regarding the outcome of distinguished professor nominations (rev. 6/99).

It is the responsibility of the individual or group preparing the nomination to provide complete information and supporting materials. This information should include a list of persons from outside the University who have been asked to provide evaluations and all letters received from such persons.

ii. Criteria. The major criteria for selection of named and University distinguished professors are as follows:

(a) Nominees must be truly distinguished as scholars in appropriate fields. Although this criterion is highly dependent on the breadth of the area, a nominee should generally rank among the most
distinguished scholars in the field in this country and shall usually possess an international reputation.

(b) Nominees should have proven records of interest and concern with growth and success of their institutions, colleagues and students.

(c) Nominees should demonstrate some breadth of interest in activities of other fields and departments related to their own and in participation in University affairs generally.

(d) Nominees must expect to identify themselves with the community and the state, and their appointment should serve the needs of the community and state in special ways perhaps not generally accomplished with regular professional appointments.

(e) Nominees may be selected from the current University faculty or from other institutions, agencies, organizations or careers. In the former instance, it is particularly important that the same high standards be adhered to for selection as in the latter, and appointment must not be made merely as a reward for duration of service.

(f) For chairs restricted to a school, department or program, nominees must meet the same general standards set for all named and University professorships, and in addition those set by the school, department or program as appropriate to the field.

(g) All nominees should be considered without regard to age, race, creed, color, national origin or sex.

(h) Examples of items to be considered in preparing nominations for named and University Distinguished Professorships (it is expected that nominees will be truly distinguished in most of these areas):

(i) past honors and awards;
(ii) invited presentations;
(iii) publications;
(iv) colleague support;
(v) current and future activity and scholarly significance;
(vi) teaching ability;
(vii) establishment of a research or learned "center" for scholarly pursuit;
(viii) consulting experience;
(ix) editorial experience; and
demand for teaching and research from other scholarly institutions.

C. Administrator Selection and Appointments

1. The Administrative Responsibility

State law places the responsibility for the administration of the University on the Chancellor, who is the chief executive officer of the institution and who is enjoined to act in accordance with the policies established by the Board of Regents. Therefore, chairs, deans, vice chancellors and other administrative officers are legally accountable to the Chancellor and serve at his or her pleasure. In turn, the Chancellor has designated the Executive Vice Chancellor as the principal administrative and academic officer of the Kansas City and Wichita campuses of the University of Kansas Medical Center.

2. Selection and Appointment

At all organizational levels within KUMC, an administrator must be responsive, directly or indirectly, to other administrators, to faculty and to students. An administrative officer’s responsibilities frequently will extend to constituencies beyond the Medical Center. The selection and conditions of service of administrative officers must reflect these considerations.

a) Executive Vice Chancellor

The selection and appointment of the Executive Vice Chancellor of the University of Kansas Medical Center is the responsibility of the Chancellor of the University of Kansas and serves at his or her pleasure. A review process may be initiated at the discretion of the Chancellor to evaluate the administrative performance of the EVC.

b) Acting Chairs, Deans, and Vice Chancellors

If it is deemed necessary to appoint an individual to serve as a chair, dean or vice chancellor on an acting basis, the following protocol will be followed:

i. Acting department chairs will be named by the dean of the school, with the approval of the Executive Vice Chancellor. In the case of an acting clinical chair appointment, the CEO of the University of Kansas Hospital will be consulted.

ii. Acting deans will be named by the Executive Vice Chancellor, with the approval of the Chancellor.

iii. Acting vice chancellors will be named by the Executive Vice Chancellor and the Chancellor.
c) Associate or Assistant Chairs, Deans and Vice Chancellors

Associate and assistant administrators serve at the pleasure of their respective chief administrators and may be designated by them. It would be assumed, however, that the designee is acceptable to those with whom he or she will be dealing. Designation of associate and assistant chairs, deans and vice chancellors shall be approved by the dean of the school involved and the Executive Vice Chancellor.

3. Summary Guidelines for Selection of Administrator Vacancy

See chart summarizing the guidelines for appointments in Appendix B.

Part 2. Faculty Rights and Responsibilities

A. Rights
(The complete Faculty Code of Conduct is found at Section IX, A)

1. All Faculty

The following enumeration of rights shall not be construed to deny or disparage other rights retained by faculty members as members of the University community or as citizens of the community at large:

a) Freedom of inquiry, expression and assembly are guaranteed to all faculty members.

b) The right of faculty members to be secure in their persons, offices, laboratory, papers and effects against unlawful searches and seizures is guaranteed.

c) Faculty members are subject to disciplinary action for conduct proscribed in Article V of this code.

d) No disciplinary sanctions may be imposed upon a faculty member without notice of the charges against the member and an opportunity for a hearing before the Ad Hoc Investigating Committee. At any such hearing, the faculty member shall have all rights afforded under the Faculty Hearing or Grievance Procedures.

e) Faculty members, groups and organizations may invite and hear any persons of their own choosing subject only to the requirements for use of the Medical Center as defined in Section G.
f) Faculty members shall have the right to participate in the determination of school, department and University policies as stated in the Rules and Regulations of the Faculty Governance.

g) Subject to reasonable conditions imposed to regulate the timeliness of requests, to determine the appropriateness of the space and time of use requested, and to insure proper maintenance, Medical Center facilities shall be made available for assignment to faculty members, individually or in groups, even though not formally organized; preference will be given to instructional programs designed for audiences from the Medical Center community.

h) Faculty members, groups or organizations may distribute written material on campus without prior approval. The person or persons responsible for such material must be clearly indicated. Materials posted on bulletin boards must be approved by the Vice Chancellor for Administration. The use of campus mail or e-mail for political purposes is not permitted. The use of campus mail or e-mail for solicitation requires prior approval by the Office of the Executive Vice Chancellor.

2. Probationary (Non-Tenured) Faculty

During the probationary period, non-tenured faculty should have all the academic freedom that all other members of the faculty have. In its approach to the probationary period and to the award of continuous tenure, the University seeks to adhere to the policies enunciated by the American Association of University Professors (AAUP). The national office of the organization, in its Advisory Letter No. 13 (AAUP Bulletin, Spring 1964), thus explained its understanding of the probationary period:

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\text{. . . The beginning faculty member is serving a kind of internship or clerkship, and . . . he may not always be the best judge of his own effectiveness. An occasional word of caution, advice, or encouragement from experienced colleagues can therefore be very salutary. If the time comes that the department, division, and administration conclude that his connection with the institution should be severed, we would say that responsible officials of the institution should feel completely free to explain to him the basis of their decision. We could not agree, however, that if reasons are given for the non-reappointment the institution assumes a burden of demonstrating the validity of its reasons. To be sure, the faculty member may question whatever reasons are given him. But unlike the tenured teacher, he does not as a probationer have what can be}
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considered a claim to his position, and it would thus seem unreasonable to compel the institution to account for this exercise of its prerogative, much less to carry the burden of justifying its decision.

These remarks are made, I am sure you understand, on the assumption that the faculty member has had an appropriate evaluation by his colleagues and that he is not being given notice for reasons which violate his academic freedom . . . I think I must say further that our purpose is to permit the institution, within the limits of academic freedom, the utmost latitude in determining who will be retained for tenure appointments. Because the granting of tenure is tantamount to a lifetime commitment, we feel that the institution should be left without a reasonable doubt as to the faculty member’s qualifications for tenure before it reaches a favorable decision.

3. Tenured Faculty

After the expiration of a probationary period, teachers or instructors should have the right to seek permanent or continuous tenure, and upon the granting of tenure, their services should be terminated only for adequate cause, except in the case of a retirement program or unit discontinuance or under extraordinary circumstances because of financial exigency.

4. Appeal and Peer Review Process

Within guidelines set forth in the Appeals and Grievances section, faculty have certain rights to appeal and/or obtain a peer review of some decisions that may have a negative impact on them. The following is a list of the most obvious.

a) A faculty member is afforded access to peer review regarding his or her claim of infringement of academic freedom.

b) A faculty member is afforded access to peer review regarding denial of a promotion and/or the granting of tenure. The only basis for the appeal and review is that established procedures of the University were violated in reaching the decision to deny promotion or tenure.

c) A faculty member is afforded access to peer review regarding allegations of misconduct (scientific, scholarly or personal) or illegal discrimination.

d) A tenured faculty member who has been informed on the basis of an annual or periodic review that his or her overall performance is unacceptable and if continued may lead to dismissal may request a peer review by a faculty committee.
e) A faculty member may appeal a decision for his or her dismissal based on a variety of reasons, including 1) financial exigency; 2) discontinuance of a program; 3) a for-cause disciplinary sanction arising from misconduct, or illegal discrimination; and 4) sustained failure to meet responsibilities.

f) A faculty member released or relocated under financial exigency has the right for access to a committee review of his or her claim that his or her reinstatement rights were violated during Emergence from Financial Exigency.

5. Academic Freedom

The University of Kansas has a long tradition of dedication to the principles of academic freedom and has sought to implement these principles as they are embodied in the 1940 Statement of Principles on Academic Freedom and Tenure of the American Association of University Professors and the American Association of Colleges. The University's position on academic freedom is therefore fully reflected by the following paragraphs from the AAUP statement:

The teacher is entitled to full freedom in research and in the publication of the results, subject to the adequate performance of his other academic duties . . .

The teacher is entitled to freedom in the classroom in discussing his subject, but he should be careful not to introduce into his teaching controversial matter which has no relation to his subject.

The . . . university teacher is a citizen, a member of a learned profession, and an officer of an educational institution. When he speaks or writes as a citizen, he should be free from institutional censorship or discipline, but his special position in the community imposes special obligations. As a man of learning and an educational officer, he should remember that the public may judge his profession and his institution by his utterances. Hence he should at all times be accurate, should exercise appropriate restraint, should show respect for the opinions of others, and should make every effort to indicate that he is not an institutional spokesman.

The following regulation on academic freedom and campus disruption was adopted by the Board of Regents on June 19, 1970:
WHEREAS, the members of the State Board of Regents recognize that academic freedom is a necessary adjunct of higher education in the State of Kansas, and
WHEREAS, academic freedom includes not only the right of dissent, but also the freedom to pursue academic aims by all segments of our colleges and universities, and
WHEREAS, small numbers of the student bodies and/or employees of Kansas state colleges and universities are pursuing activities deliberately designed to, and which do, disrupt regularly scheduled activities of said institutions, and
WHEREAS, disciplinary boards organized to provide student and faculty review of disruptive action are, at times, harassed and delayed in conducting said reviews, and
WHEREAS, the interests of citizens and taxpayers of the State and of the majority of students and faculty are detrimentally affected.

NOW, THEREFORE, BE IT RESOLVED by the State Board of Regents that the chief administrative officer of each of the state universities and colleges be and are hereby directed to immediately suspend any employee, faculty member or student of said institution where said student, faculty member or employee is engaging in activities deliberately designed to, and which do, disrupt the normal ordinary process of education and training offered by said institutions, said suspension to remain in effect pending such procedural steps as may be required under the rules and regulations of the state institutions and the laws of the State of Kansas. The heads of the state institutions shall take action as is necessary to stop such activities.

BE IT FURTHER RESOLVED that this action not be considered as limiting any authority of said chief administrative officers in the performance of their duties.
B. Responsibilities

1. Teaching – Research – Service

a) Teaching

Faculty who teach are expected to teach courses in their department or school in accordance with the needs, requirements and expectations thereof and the general requirements concerning the conduct of classes specified in various University regulations. Good teaching requires continual application and effort. Faculty who teach are expected to keep abreast of new developments in their fields and must maintain credentials as scholars so that they are part of the creative process by which the frontiers of knowledge and culture are continually being expanded. A teacher should be engaged with his or her particular discipline and should be able to convey to the students the value of the subject.

Teaching duties of a professor include not only classroom activities but also such duties as preparing course syllabi, lectures and examinations; being available for consultation; supervising independent work undertaken by students; directing theses and dissertations; evaluating students; advising; and participating in curriculum planning. A professor is expected to treat students with courtesy and to respect their rights, including, but not limited to, academic freedom and those rights outlined in the Student Code of Rights and Responsibilities (KUMC Student Handbook).

Academic advising is a part of the responsibility of teaching faculty. In the case of non-teaching faculty, comparable professional responsibilities shall be those defined by their departments and the relevant standards of their disciplines.

b) Research

Research includes critical evaluation, artistic creation and performance, as well as discovery and interpretation. Research appropriate to one’s department and field is more specifically defined by each department or field in its criteria for promotion and tenure. [For general guidelines concerning research and scholarship, see Section VIII of this handbook.] Publication is the normal outlet for research in many areas other than the visual and performing arts. Scholarship that does not result in publication or public performance may be valuable for keeping one’s teaching current, but it does not subject one’s ideas
or performance to the critical scrutiny of peers necessary for expanding the frontiers of knowledge and culture.

c) Service

Service covers faculty activity in a number of different areas:

i. **Service to the Medical Center.** This may include patient care and treatment. For this health care faculty, the responsibility must be performed with the best interests of the patient in mind [see the Patient Bill of Rights].

ii. **Service to the academic unit.** It is essential that all members of the academic unit participate in the decision-making necessary for the working, and ultimately, the health of the academic unit. Ideally, each faculty member participates regularly and fully in the academic unit’s activities. Faculty members are typically expected to attend faculty and unit meetings; to serve on committees; to contribute to planning, development and scheduling activities of the academic unit; where appropriate, to review graduate students; and to refrain from activities that disrupt proper operations of the academic unit.

iii. **Service to the school and the University.** Faculty members are expected during the period of their employment at the University to bear their fair share of committee work at the school and University levels.

iv. **Service to the profession.** Faculty members are expected to be active in their professional fields. This includes belonging to and taking part in professional activities on the local, regional, national and international levels, although not all faculty will be active on all these levels.

v. **Service to the community, state, nation and world.** This use of one’s academic expertise to help community, state, nation and world is appropriate service, although the extent to which one contributes outside the University depends on one’s field, inclination, opportunity and other relevant factors.

2. Faculty Responsibilities

The responsibilities of the faculty as a whole are multiple and are not to be construed as narrowly limited to any specific list. The same is true of the responsibilities of individual faculty members. Nonetheless, the major responsibilities are traditionally divided into teaching or its professional equivalent; research, as well as service. These are the criteria used in awarding promotion and tenure, and they are also the
criteria used in faculty evaluations. Each faculty member shall be evaluated annually and shall receive from his or her department chair or dean a written statement evaluating the performance of the faculty member during the preceding year. Typically the faculty member will be evaluated on teaching or its professional equivalent, research, as well as service. Although each faculty member is expected to perform at least adequately in all three areas over time, outstanding effort or performance in any one area because of institutional needs or personal inclinations may, with the approval of the department chair or dean, offset less effort (but not below acceptable performance) in another area in any given year or approved period of time.

Of the many responsibilities of faculty members, the following are enumerated because of their importance to the maintenance of appropriate faculty-student relations:

a) Protection against Improper Disclosure

Information about student views, beliefs, and political association that professors acquire in the course of their work as instructors, advisors and counselors should be considered confidential. An improper disclosure is a serious professional offense. Judgments of student ability and character may be provided under appropriate circumstances, normally with the knowledge or consent of the student.

b) Privacy of Records

Faculty members shall accord respect to the essentially confidential relationship between the faculty/staff and the students by preserving to the maximum extent possible the privacy of all records relating to students.

(c) Academic Responsibilities

A member of the faculty is expected to meet classes at the regularly scheduled hour and to carry out his or her other academic responsibilities. If a faculty member considers it necessary, for sound academic reasons, to move a class to another time, advance notice must be given to the class and arrangements must be made to assure that the change does not work undue hardship on any member of the class. If prevented from meeting classes or carrying out other academic responsibilities, a faculty member must, if physically able to do so, make satisfactory advance arrangements and communicate, preferably in writing, the nature of these arrangements to his or her chair (or dean, if the
school in question is not organized departmentally). Such arrangements are subject to the approval of the appropriate chair or dean. Each department or school must define what arrangements are considered “satisfactory” in that unit and appropriately publicize its definition. Failure to comply with the procedures outlined in this paragraph may result in the placement of the faculty member on administratively determined leave without pay by the appropriate dean, with the approval of the Executive Vice Chancellor. When such leave without pay is imposed, the dean shall notify the faculty member of the action and provide the reasons for the action. In addition, the notice shall advise the faculty member that the leave without pay shall cease upon the faculty member’s notification to the dean that the faculty member has resumed his or her attendance or academic responsibilities or otherwise made satisfactory arrangements. Resumption or satisfactory arrangements shall be confirmed by either the chair or dean. Finally, the notice shall advise the faculty member that if he or she believes the leave without pay to have been improperly imposed, review may be sought by requesting a hearing before the Grievance Committee.

3. Reporting Conflicts of Time and Interest

(see also Section III, part B, B, 2)

The Board of Regents and the University of Kansas Medical Center policies for Conflict of Interest (COI) and Conflict of Time Commitment (COC) require disclosure of any potential COI or COC by all full- and part-time faculty. Accordingly, every employee must fill out a declaration form/disclosure form as part of his or her orientation or annual appointment/reappointment process. All responses will be kept confidential.

Responses should be sent to the Office of the Vice Chancellor for Research. If a potential conflict is identified, then the forms will be forwarded to the COI Committee. The committee will work to resolve the potential conflict with input from the employee. These forms will then be sent to Human Resources and the information will be considered part of an employee’s personnel file and thus not public information.

Faculty members who submit grant proposals must provide assurance that they, along with all faculty and unclassified personnel on the grant proposal, have complied with the institutional policy. If a potential conflict is identified, the grant may not be funded until the conflict is resolved.

Reporting of potential conflicts of time and/or interest should occur as follows:
a) Reporting Significant Ad Hoc Current or Prospective Conflicts as They Occur

Faculty and unclassified staff must disclose on the form approved by the Council of Presidents to the department chair, dean or supervisor on an ad hoc basis current or prospective situations that may raise questions of conflict of commitment or interest, as soon as such situations become known to the faculty.

b) Reporting of Consulting

The faculty member must inform the chief academic officer, through the department chair (or head) and the dean, of all external personal, professional activities. For all such activities, except those single-occasion activities specified below, the faculty member must report in writing the proposed arrangements and secure approval prior to engaging in the activities. Those personal, professional activities that occur within a single 24 hour period must be reported annually in writing as prescribed. For all activities concerned, the report should indicate the extent and nature of the activities, the amount of time to be spent in the activities, and the total amount of time spent or expected to be spent on all such outside activities during the current academic year.

4. Reporting Results with Potential Commercial Value

To comply with policies related to reporting results with potential commercial value, the following procedures are established:

a) Members of the Medical Center community shall report results (or anticipated results) of professional activity that they feel are of potential commercial value, or which they would like to see promoted, in advance of releasing the results or of entering into any contractual agreement for release or promotion of such results.

b) The report shall be forwarded to the Office of the Vice Chancellor for Research for evaluation.
Part 3. Faculty Conduct

A. Teaching – Academic – Scholarly

1. Types of Misconduct

   Misconduct falls into the following categories:

   a. Sustained overall failure to meet academic responsibilities may constitute willful failure of a faculty member to carry out their academic responsibilities. Cumulative absences or failures to perform in less grievous matters are more serious than occasional lapses over long periods of time.

   b. Violation of lawful published Medical Center regulations.

   c. Behavior in the discharge of duties that violates commonly accepted standards of professional ethics [see also the University of Kansas Policy on Consenting Relationships in this section.]

   d. Knowingly furnishing false information to the Medical Center by forging, altering or misusing documents or instruments of identification with intent to defraud.

   e. Behavior in the discharge of his or her duties that violates commonly accepted standards of professional ethics as defined, for example, in the statement of professional ethics adopted by the 52nd Annual Meeting of the AAUP, April 1966 [see also the University of Kansas policy on Consenting Relationships in this section]. Abusive or unprofessional treatment of students, faculty or other members of the University falls within this category. Repeated infractions of one’s responsibilities, whether informal or formal admonitions, warnings or reprimands have occurred, are more serious than initial infractions of the same type. Also proscribed is any form of sexual harassment or discrimination on the basis of sex, race, religion, age, national origin, disability or sexual orientation.

   f. Plagiarism, misrepresentation or fraud in classroom presentations, published works or published presentations.

   g. Committing an act that involves moral turpitude may render the faculty member unfit for his/her position. As used in this section, conduct involving moral turpitude means intentional conduct, which is gravely injurious to another person or to society and which constitutes a substantial deviation from the accepted standards of duty owed by a person to other people and society, or committing an act that involves such moral turpitude as to render the faculty member unfit for his or her position.
h. If another University tribunal or body exists that might properly entertain a claim or charge of conduct prescribed in Section III, Part 3 and / or Section IX, A, the processes of that body or tribunal normally must first be exhausted before the jurisdiction of the appropriate hearing or grievance committee can be invoked. However, in extraordinary circumstances, such committee may exercise original jurisdiction notwithstanding failure to exhaust remedies available in other University tribunals. Whether such extraordinary circumstances exist that warrant the exercise of original jurisdiction by the committee shall be determined by that committee.

2. Codes for Judging Misconduct

Many professional organizations have adopted codes by which unethical conduct can be judged. The American Association of University Professors (AAUP), at its 73rd Annual Meeting in 1987, endorsed the following “Statement on Professional Ethics.” It is a revision of a statement originally adopted in 1966.

a. Professors, guided by a deep conviction of the worth and dignity of the advancement of knowledge, recognize the special responsibilities placed upon him. His or her primary responsibility to his or her subject is to seek and to state the truth as he or she sees it. To this end he or she devotes his or her energies to developing and improving his or her scholarly competence. He or she accepts the obligation to exercise critical self-discipline and judgment in using, extending and transmitting knowledge. He or she practices intellectual honesty. Although he or she may follow subsidiary interests, these interests must never seriously hamper or compromise his or her freedom of inquiry.

b. As a teacher, the professor encourages the free pursuit of learning in his or her students. He or she holds before them the best scholarly standards of his or her discipline. He or she demonstrates respect for the student as an individual, and adheres to his or her proper role as intellectual guide and counselor. He or she makes every reasonable effort to foster honest academic conduct and to assure that his or her evaluation of students reflects their true merit. He or she respects the confidential nature of the relationship between professor and student. He or she avoids any exploitation of students for his or her private advantage and acknowledges significant assistance from them. He or she protects their academic freedom.
c. As a colleague, the professor has obligations that derive from common membership in the community of scholars. He or she respects and defends the free inquiry of his or her associates. In the exchange of criticism and ideas he or she shows due respect for the opinions of others. He or she acknowledges his or her academic debts and strives to be objective in his or her professional judgment of colleagues. He or she accepts his or her share of faculty responsibilities for the governance of his or her institution.

d. As a member of his or her institution, the professor seeks above all to be an effective teacher and scholar. Although he or she observes the stated regulations of the institution, provided they do not contravene academic freedom, he or she maintains his or her right to criticize and seek revision. He or she determines the amount and character of the work he or she does outside his or her institution with due regard to his or her paramount responsibilities within it. When considering the interruption or termination of his or her service, he or she recognizes the effect of his or her decision upon the program of the institution and gives due notice of his or her intentions.

e. As a member of his or her community, the professor has the rights and obligations of any citizen. He or she measures the urgency of these obligations in the light of his or her responsibilities to his or her subject, to his or her students, to his or her profession, and to his or her institution. When he or she speaks or acts as a private person he or she avoids creating the impression that he or she speaks or acts for his or her college or university. As a citizen engaged in a profession that depends upon freedom for its health and integrity, the professor has a particular obligation to promote conditions of free inquiry and to further public understanding of academic freedom.

3. Standards of Academic Conduct

a. Every instructor shall make clear, at the beginning of each course, his or her rules for the preparation of classroom assignments, collateral reading, notebooks or other outside work, in order that his or her students may not, through ignorance, subject themselves to the charge of academic misconduct.

Academic misconduct shall include grading student work by criteria other than academic performance or repeated and willful neglect in the discharge of duly assigned duties. The following sanctions may be imposed upon a faculty member: admonition, warning or censure. A faculty member may also be recommended for suspension or dismissal for academic misconduct.
Alleged instances of academic misconduct by a faculty member are initially directed to the department chair and then to the dean if necessary. In extraordinary cases, the matter may be taken to the Executive Vice Chancellor.

With regard to all cases of alleged academic misconduct, detailed procedures are published and may be obtained from the Office of the Dean of the appropriate school. In all alleged cases of academic misconduct, care must be exercised to preserve the requirements of due process.

b. In keeping with the accepted standards of professional ethics, faculty members are expected to avoid relationships that may lead to potential conflicts of interest in their role as teacher, advisor and evaluator of students. If such a relationship should develop after a professional one has been established, the instructor will remove himself or herself from the professional role. Such a relationship, whether between a student and a faculty member or a graduate student acting as an instructor, constitutes a potential conflict of interest, especially as perceived by other students and faculty members, and therefore should be scrupulously avoided. This is not intended to affect the normal and expected mentorship, which should include both personal and intellectual advising.

4. Guidelines for Conduct of Research and Publication

It is recognized that there is a tradition in scientific research to which investigators have long adhered. These guidelines are intended to incorporate this tradition for the benefit especially of those individuals who are beginning their careers in research. The concepts expressed here are best implemented by understanding the interactive nature of many scholarly activities. Science is best served by careful attention to accuracy and reproducibility of results within and between groups of investigators.

a. Graduate students, postdoctoral associates and other research trainees should be under the guidance of a faculty member who is responsible for supervision of the trainee’s research.

b. The ratio of trainees to faculty preceptors should be small enough to encourage close interaction in all aspects of the research, including concepts, design of experiments, techniques, data analysis and preparation of data for publication.

c. Interaction among trainees and faculty in the form of discussion and presentation of research in progress should not be limited to one faculty member and his or her trainees but should involve members of associated
research groups. Often this interaction will be along departmental lines, but interdepartmental interactions in research are also to be encouraged. Such interactions should be directed both to contribute to the research efforts of the groups and to provide informal peer review.

d. Custody of all original laboratory data must be retained by the unit in which they are generated. Copies may be made by the investigators in the unit for personal use. The time of retention of original data should be dictated on the basis of reasonable need for reference to the data.

e. The only criterion for authorship of a manuscript is that an individual has made a significant contribution to the research. Technical services are not sufficient reason for authorship unless there has been substantive scientific interaction between the individuals involved. When a trainee is preparing a manuscript, the faculty member responsible for the trainee should review the manuscript and give advice before approving the final draft. All authors should review and approve the final draft before submission for publication.

f. The number of publications to be reviewed at times of faculty appointment or promotion should be limited in order to encourage and reward bibliographies containing substantive publications rather than those including many insubstantial or fragmented reports. Faculty members should discourage trainees from preparing manuscripts without adequate tests of reproducibility or assessment of significance or from preparing multiple manuscripts differing only slightly in content.

g. Because each research unit addresses different scientific problems with different methods, each unit should develop its own specific guidelines to identify practices that seem most likely to enhance the quality of research conducted by its members. Those guidelines should be in written form and should be provided to the new investigator upon starting work.

h. For all research performed on the KUMC campus, faculty must conform with the compliance guidelines set forth by the Research Institute.

5. Standards of Conduct in the Clinical Setting

The unclassified clinical staff has a duty to conduct themselves in a manner that demonstrates competence, adherence to the ethical standards of their profession and the ability to work harmoniously with others in a manner that insures that patients will receive safe, high-quality medical care.

In addition to the Faculty Code of Conduct, medical or physician faculty engaged in the patient care setting are also governed by the Medical Staff Bylaws,
which are available in the Office of the Chief of Staff of the University of Kansas Hospital and the Hospital Ethics Handbook, as well as the Patients’ Bill of Rights brochure. With respect to hospital privileges, these regulations must be adhered to, and any interpretation of faculty rights is not intended to supersede the Medical Staff Bylaws Rules and Regulations, Hospital Ethics Handbook or the Patients’ Bill of Rights brochure. In all cases, the behavior and conduct of the unclassified clinical staff may not be lower than the stated behavioral standards of the hospital or the medical staff.

The University of Kansas Hospital is committed to respecting and protecting the rights of each patient. The Hospital Ethics Handbook, prepared by the Hospital/Medical Staff Ethics Committee, provides information regarding guidelines and policies that have been adopted by this institution in order to respond to ethical issues. The Patients’ Bill of Rights and the Hospital Ethics Handbook, available in the administration offices of the hospital, are guides to the various roles, relationships, duties and associated obligations required of a clinical staff member.

An important aspect of professional conduct in the clinical setting is the expectation that practitioners will identify and report deviations from standards that may impact on patient care so that problems are resolved, improvements are made, and patients are assured of high-quality health care. If a faculty member’s clinical privileges are removed, this would constitute grounds for removal of clinical teaching privileges in the university. The operational linkages among the quality improvement functions relating to patient care, the risk management functions, and institutional safety programs place specific reporting responsibilities on staff members. This information may be obtained from the Office of the Legal Counsel, and “Safety and Health Programs and Policies: An Overview” may be obtained from the Safety Office.

B. Potential Conflicting Relationships

1. Interpersonal Relationships

The University of Kansas has a tradition of commitment to providing an academic community environment that fosters intellectual, professional and personal growth without discrimination. Central to the preservation of this environment is the trust that should characterize all interactions among students, faculty, unclassified staff and unclassified staff, all working toward the common educational goal of the institution. This trust is put at risk when members of the University community engage in consenting romantic or sexual relationships that involve individuals of unequal power;
for example, administrator and faculty, faculty and student, supervisor and employee. Because the University of Kansas strongly disapproves of consenting relationships where a professional power differential exists, the following policy statement was developed:

a. A faculty member will always be treated as having such a power differential if the student is in an educational experience where the faculty member has authority to assign grades. The same holds true in other circumstances as well; for example, when a faculty member serves on thesis, dissertation or scholarship awards committees. These principles also apply to administrators and supervisors in their relationships with students, faculty, unclassified staff and classified personnel.

b. In the view of the University, romantic or sexual relationships between individuals of unequal power, even if consenting, are unwise and often contrary to professional ethics. Such a relationship tends to impair one’s ability to make an objective judgment of the performance of the student or employee. Those who choose to ignore these standards will stand responsible for their actions and risk the loss of support of the University community.

c. Decisions concerning grades, degrees, promotions, merit increases and awards must be made free from any trace of bias or favor. Such decisions come under a cloud when made by those who have an emotional relationship, beyond the purely professional or academic one, with those who benefit from those decisions. Even the mere appearance of bias may seriously disrupt the academic or work environment.

d. The individual in authority bears the primary responsibility for any negative consequences resulting from an even apparently consenting romantic or sexual relationship. It is the student or the employee, not the instructor or supervisor, who is most at risk in these relationships. In particular, the respect and trust accorded a professor by a student, as well as the legitimate power exercised by the professor in giving grades, criticism, praise, recommendations for further study, future employments, and the like greatly diminish the student's actual freedom of choice should sexual favors be added to the professor’s demands. Although it is proper for a student to decline any personal relationship of this kind, a student may feel that few options are available when a professor asks for a date. As a result, the degree of informed consent that exists within such a relationship is difficult to
establish. Should there be a charge of sexual harassment, a claim of mutual consent may be difficult to sustain.

e. Commonly accepted standards of professional behavior and ethics require that faculty members not hold evaluative power over any student with whom they have a romantic or sexual relationship. Thus, faculty members should not initiate or accept such a relationship with a student over whom they have an evaluative role. Should such a relationship exist between a faculty member and a student, the faculty member must remove himself or herself from the evaluation of the student’s work. Failure to do so will be a violation of the Faculty Code of Conduct.

Similar proscription applies to administrators and supervisors in their relationships with students and employees over whom they have an evaluative role. A supervisor who is in a romantic or sexual relationship with another individual over whom he or she has evaluative responsibility must remove himself or herself from personnel decisions concerning that individual, such as appointment, retention, promotion, discipline, tenure or salary. Failure to do so will be a conflict of interest.

2. Time, Interest, Consulting and Other Employment

(see also Section III, Part 2, B, 3)

a) Conflict of Interest – Board of Regents Policy

Preamble

The Board of Regents encourages the Regents institutions to interact with business, industry, public and private foundations, and government agencies in order to assure the relevance of their missions of teaching, research and service; to provide for and facilitate the professional development of their faculty and unclassified staff; and to promote the rapid expansion and application of knowledge, gained through research, to the needs of Kansas, the region and the nation. With particular reference to such interaction, the Board of Regents considers it of utmost importance that university employees conduct their affairs so as to avoid or minimize conflicts of time commitments and conflicts of interest, and that the Regents institutions must be prepared to respond appropriately when real or apparent conflicts arise.

To those ends, the purposes of this policy are to: (i) educate about situations that generate conflicts; (ii) provide means for faculty and unclassified staff and the university to manage real or apparent conflicts; (iii) promote the best
interests of students and others whose work depends on faculty direction; and (iv) describe situations that are prohibited. Every faculty member and member of the unclassified staff has an obligation to become familiar with, and abide by, the provisions of this policy. If a situation raising questions of real or apparent conflict of commitment or conflict of interest arises, affected faculty and/or unclassified staff must meet with their department chair, school dean or supervisor, report the conflict as described below, and eliminate the conflict or manage it in an acceptable manner.

A. General Principles

1) Conflict of Time Commitment

(a) Attempts to balance university responsibilities outlined in the preamble with external activities, such as, but not limited to consulting, public service or pro bono work, can result in real or apparent conflicts regarding commitment of time and effort. Whenever a faculty or staff member’s external activities exceed reasonable time limits, or whenever an unclassified staff or faculty member’s primary professional responsibility is not to the institution, a conflict of time commitment exists.

(b) Conflicts of commitment usually involve issues of time allocation. Faculty members and unclassified staff of Regents institutions owe their primary professional responsibility to their employing institutions, and their primary commitment of time and intellectual effort should be to the education, service, research and scholarship missions of said institutions. Faculty and unclassified staff should maintain a presence on campus commensurate with their appointments. The specific responsibilities, position requirements, employment obligations and professional activities that constitute an appropriate and primary commitment of time will differ across schools and departments, but said responsibilities, requirements, obligations and activities should be initially premised on a general understanding of full time commitment for full time faculty or unclassified staff of the institutions. Exceptions
must be justified and shown to enhance the institutional mission.

(2) Conflict of Interest

a) A conflict of interest occurs when there is a divergence between an individual's private, personal relationships or interests and his or her professional obligations to the university such that an independent observer might reasonably question whether the individual's professional actions or decisions are determined by considerations of personal benefit, gain or advantage.

b) A conflict of interest or the appearance of it depends on the situation, and not necessarily on the character of actions of the individual. The appearance of a conflict of interest can be as damaging or detrimental as an actual conflict. Thus, individuals are asked to report potential conflicts so that appearances can be separated from reality.

c) Potential conflicts of interest are not unusual in a modern university and must be addressed. For example, conflicts of interest can arise out of the fact that Regents institutions have as part of their mission the promotion of the public good by fostering the transfer of knowledge gained through university research and scholarship to the private sector. Two important means of accomplishing the institutional mission include consulting and the commercialization of technologies derived from research. It is appropriate that university personnel be rewarded for their participation in these activities through consulting fees and sharing in royalties resulting from the commercialization of their work. It is wrong, however, for an individual's actions or decisions made in the course of his or her university activities to be determined by considerations of personal financial gain. Such behavior calls into question the professional objectivity and ethics of the individual and it also reflects negativity on the employing university. Regents institutions are institutions of public trust; faculty and unclassified staff must respect that status and conduct their
affairs in ways that will not compromise the integrity of the university.

d) Except in a purely incidental way, university resources, including but not limited to facilities, materials, personnel, or equipment, may not be used in external activities unless written approval has been received in advance from the institution's chief executive officer or his or her designee. Such permission shall be granted only when the use of university resources is determined to further the mission of the institution. When such permission is granted, the faculty member or unclassified staff member will make arrangements for reimbursement of the university for customarily priceable institutional materials, facilities or services used in the external activity. Such use may never be authorized if it violates the Regents policy on Sales or Products and Services.

e) Proprietary or other information confidential to a Regents institution may never be used in external activities unless written approval has been received in advance.

f) Faculty or unclassified staff may not involve university students, classified staff, unclassified staff or faculty in their external activities if such involvement is in any way coerced or in any way conflicts with the involved participants' required commitment of time to their university. For example, a student's grades or progress towards a degree may not be conditioned on participation.

B. Consulting and Other Employment

(1) Consulting for Other State of Kansas Agencies
Consulting by faculty members and employees of institutions under the jurisdiction of the Board for another institution under the jurisdiction of the Board, as well as consultation for other state agencies, shall be approved in advance by the institution or agency seeking these services and approved by the employee's home institution. The home institution shall effect payment through the regular process and shall receive
reimbursement through the interfund transfer process (12-16-77; 11-19-82; 5-17-85).

(2) Consulting Outside the University
For members of the faculty, the Regents institution permits and, indeed encourages a limited amount of personal, professional activity outside the faculty member's reasonably construed total professional responsibilities of employment by and for the institution, provided such activity: (a) further develops the faculty member in a professional capacity; (b) does not interfere with the faculty member's teaching, research and service to the institution; and (c) is consistent with the objectives of the institution. Regular instructional service to other educational institutions is normally regarded as an inappropriate personal, professional activity. Without prior approval, faculty members on full time appointments must not have significant outside managerial responsibilities nor act as principal investigators on sponsored projects that could be conducted at their institution but instead are submitted and managed through another organization. Unless an exception is granted by the President, Chancellor or a designee, unclassified staff members may consult only on non-university time including vacations.

(3) Other Employment
The Regents expect faculty and unclassified staff employed by the Regents institutions to give full professional effort to their assignments. It is, therefore, considered inappropriate to engage in gainful employment outside the Regents institution that is incompatible with institutional commitments. It is inappropriate to transact business for personal gain unrelated to the institution from one's institutional office, or at times when it might interfere with commitments to the institution. Participation in academic conferences, workshops and seminars does not usually constitute
consulting or outside employment. However, organizing and operating such meetings for profit may be construed as consulting or outside employment as defined in this policy.

C. Reporting Requirements

(1) Annual Reporting
As part of the annual appointment process all faculty and unclassified staff with 100% time appointments must disclose to the university whether they or members of their immediate family (spouse and dependent children), personal household, or associate entities (e.g., corporation, partnerships or trusts) have consulting arrangements, significant financial or managerial interests, or employment in an outside entity whose financial or other interests would reasonably appear to be directly and significantly affected by their research or other university activities. For purposes of this policy, significant financial or other interests mean all holdings greater than $10,000 or more than 5% ownership in a company. Faculty and unclassified staff members who hold fractional appointments and who have potential or possible conflicts of time commitments or conflicts of interest, as defined above, are also required to make the disclosures. Failure to submit the required reporting form, as approved by the Council of Presidents, will result in denial of the opportunity to submit research proposals to external funding agencies until the form is submitted and may result in discipline in accordance with university procedures. When the institution judges that the information submitted indicates that a conflict of time, commitment or interest does exist, the institution may require that the faculty or unclassified staff member submit additional information and explanation regarding that conflict.

(2) Reporting Significant Ad Hoc Current or Prospective Conflicts As They Occur
Faculty and unclassified staff must disclose on the form approved by the Council of Presidents to the department Chair or Dean or supervisor on an ad hoc basis current or prospective situations that may raise questions of conflict of commitment or interest, as soon as such situations become known to the faculty or unclassified staff member.

(3) Reporting of Consulting
The faculty member must inform the chief academic officer, through the department Chair or head and the Dean, of all external personal, professional activities. For all such activities, except those single-occasion activities specified below, the faculty member must report in writing the proposed arrangements, and secure approval prior to engaging in the activities. Those personal, professional activities which occur within a single 24-hour period must be reported annually in writing as prescribed. For all activities concerned, the report should indicate the extent and nature of the activities, the amount of time to be spent in the activities, and the total amount of time spent or expected to be spent on all such outside activities during the current academic year.

(4) Disposition of Reports
All required reports shall be submitted in accordance with institutional requirements and shall be included in individual personnel files to be used for the determination of whether an individual is in compliance with this policy. Such reports will also be available to institutional research officers to permit certification and/or verification of compliance with federal regulations. Institutions must maintain these reports for a minimum of three years.
b) State Regulations on Conflict of Interest and Ethics

All employees of the University are subject to the provisions of state law on Conflict of Interest embodied in K.S.A. 46-215 et seq. These provisions proscribe certain kinds of conduct by state employees, require public disclosure of certain outside interests, circumscribe political activity if the person engaged in such activity is not registered as a lobbyist and regulate gifts, meals, entertainment, etc. Any questions concerning this law should be directed to the Office of the Legal Counsel.

3. Development of Products with Commercial Value

a) Employment- and Enrollment-Related Professional Activities

b) and Guidelines

The policies and procedures for employment- and enrollment-related professional activities do not apply to personal professional activities such as consulting and outside work activities. The Medical Center recognizes that professional activities by its employees in accomplishing teaching, research and service, and enrollment-related activity by its students, may lead to the creation of new knowledge, art forms, etc., which will benefit society.

It is also recognized that many such results of professional activity may be best disseminated through commercial channels. To assure that commercial interests do not subvert the objectives of the Medical Center, misuse public funds, or interfere with the proper activities of faculty, staff and students, it is necessary that everyone adhere to policies and procedures established by the Medical Center community to conserve the interests of all concerned with the results of professional activity, the originator(s), the Medical Center and others who provide support, and the public.

4. Political Activity and Lobbying

a) Political Activity

The Board of Regents has adopted the following statement of Policies and Procedures on Political Activity (February, 1994).

Faculty, administrators, and other unclassified personnel are eligible to accept any public or political party position which does not involve any conflict of interest and does not require substantial time away from assigned duties or in other respects infringe upon them. Such eligibility covers membership on city commissions, school boards, planning
groups, and county, state and national party committees, and like organizations, either by appointment or election.

The filing of a declaration of intent to become a candidate shall not affect the status or appointment of an unclassified member of a college or university staff; provided, however, such person at all times while a candidate shall properly and fully perform all of his or her assigned duties; provided further, however, that should such person while he or she is a candidate for office fail to perform all of his or her assigned duties, such person shall not receive any salary or benefits from the date of filing for office.

Leave without salary or other benefits will be granted to those elected or appointed to public office requiring full time or lengthy sustained periods away from assigned duties, such as Congress, the State Legislature, and state and county offices or appointments to office falling within this category; effective, as to a person elected or appointed to Congress or the State Legislature, from the date such person takes the Oath of Office or the first day of the Legislative session and continuing until the adjournment of Congress or to a date no sooner than the last adjournment in April or sine die adjournment, whichever occurs first, of each regular and special session of the State Legislature; effective, as to other state and county offices, during the entire time a person serves as such officer. Leave without salary or other benefits shall not be required for any person serving in the State Legislature or for service on any committee during a period when the Legislature is not in regular or special session, provided that such person shall decline to accept all legislative compensation for such service, but such person shall be entitled to mileage and other expense allowances as provided by statute and paid by the Legislature. In the interest of the fullest participation in public affairs, personnel are free to express opinions speaking or writing as an individual in signed advertisements, pamphlets and related material in support of or opposition to parties and causes. There will be the commensurate responsibility of making plain that each person so doing is acting for himself and not in behalf of an institution supported by tax funds drawn from citizens of varying political and economic views (12-19-66; 5-19-72; 2-15-85).
b) Lobbying Regulations

Recently enacted legislation considerably tightens state control over lobbying activities. Any faculty or unclassified staff efforts to support or oppose either legislation or regulatory action that ties the identity of the faculty member to the University should only be carried out after consultation with the Office of the General Counsel. All expenditures made to entertain, or otherwise influence, legislators or other state officials should be reported before the fact to the Executive Vice Chancellor's Office and the Chancellor's Office.

5. Use of University Name

The name of the Board of Regents, a Regents institution or the Regents System may never be used as an endorsement of a faculty member's or unclassified staff member's external activities without expressed and advance written approval of the University chief executive officer and/or the board's executive director, as appropriate. Faculty members or unclassified staff members may, without securing approval, list their institutional affiliation in professional books, articles and monographs they author or edit and in connection with professional workshops they conduct or presentations they make.

C. Alleged Misconduct

Information on the appeals and grievances process pertaining to personal and professional misconduct, as well as research or scientific misconduct, can be found in Section III, part B, of this handbook [see Proposed Faculty Appeal and Grievance Committees, Appendix C].

Part 4. Review and Evaluation of Faculty and Administrators

A. Faculty

As recommended by the Board of Regents in December of 1994, with additional recommendations in March of 1995, the University of Kansas Medical Center has adopted the following faculty review policy:

*Faculty are protected by tenure from discrimination based on protected-class status or from unfair, arbitrary or capricious dismissal. However, tenure does not shield faculty from the consequences of inadequate performance or non-performance of their duties.*
Every faculty member’s performance is subject to review to determine whether his or her duties have been fulfilled. Sustained failure of a faculty member to carry out his or her academic responsibilities at an acceptable level, despite the opportunities for University faculty development or other appropriate interventions, are grounds for consideration of dismissal from the University of Kansas by the procedures adopted by the Faculty Code of Conduct for such actions (Section III, part 6).

1. Evaluation
   a. Each faculty member’s academic performance shall be evaluated annually by the unit administrator according to criteria and methods established by that unit or school for teaching, scholarship and service.
   b. The administrator shall invite faculty to submit a portfolio of relevant information for the purposes of evaluation. Multiple sources of information must be used for evaluation. The portfolio may include peer evaluation of various aspects of teaching and shall include students’ ratings of instruction using a standardized and validated instrument for evaluation of teaching. Appropriate documentation of scholarly activities and service shall also be included in the portfolio. The evaluation shall be provided to the faculty member in writing prior to its final adoption and placement into the faculty member’s personnel file.
   c. If the evaluation reveals that a faculty member’s performance requires improvement in some area(s), the written evaluation shall be specific in identifying the area(s) and describe ways for improving performance in the area(s).
   d. The faculty member may provide a written response to his or her annual evaluation that will also be placed into his or her personnel file.
   e. During the annual evaluation, the unit administrator also will review the assignment of differential effort with the faculty member and will decide what changes are appropriate and practical.

2. Principles and Guidelines for Promotion and Tenure
   a) Principles

   The awarding of tenure to a faculty member is the most critical point in the process of selection and reward for achievement that maintains and improves the quality of the faculty. The review of candidates for tenured appointment, beginning at the department or unit level and moving through channels to the University level, must be careful, deliberate and
searching if the standard of excellence to which the University aspires is to be attained. The same considerations apply to recommendations for promotion in rank, especially those that normally lead to a tenured appointment.

i. The criteria for tenure and promotion traditionally have been and continue to be teaching, research, and service. The award of tenure must take into account any prior service credited but will be based largely on evidence of achievement since joining the faculty. Promotion to a new rank must be based principally upon evidence of achievement since the last promotion or, for a person's first promotion, since the initial appointment to the faculty.

ii. Teaching is a prime responsibility of the University. For promotion to a higher professorial rank, evidence of effective teaching must be furnished. This evidence may take several forms. Student evaluations and peer evaluations are highly desirable. Departments, or schools where departments do not exist, should provide a standard set of procedures to evaluate teaching to ensure an equitable and substantive review process. Individuals in the same field should be evaluated by the same means. However, no specific format or instrument is prescribed at the University level. Good teaching requires continual application and effort. The faculty member must keep abreast of new developments in his or her field and related fields and must maintain credentials as a scholar so that he or she is part of the creative process by which the frontiers of knowledge are continually being expanded. The faculty member should be enthusiastic about the particular discipline and should be able to communicate this enthusiasm to the students, thus stimulating both the faculty member and the students to greater achievement. The University prides itself on having exceptional faculty members whose merit and service to the University earn them a well-deserved place of honor and respect in the institution. However, this criterion alone, to the exclusion of consideration of the other criteria, does not serve as a basis for promotion or tenure.
iii. Research and scholarship have several purposes for the faculty member. Not only do research and scholarship help maintain the competence of the faculty member in the discipline, they also are a service to the profession and to society. A faculty member’s accomplishments and contributions as a scholar bring vital recognition to both the individual and the University. The University exists to create, preserve and transmit knowledge, and scholarly productivity is an integral and indispensable part of its role as an educational institution. Promotion in professorial rank is a testimony and recognition of professional competency and productivity. The standards for measuring scholarly and creative productivity cannot be applied uniformly throughout the University. In many areas, the evidence for competence is research conducted by the faculty member, the results of which are submitted for professional evaluation, review and criticism to peers through recognized media. In those areas, publication in refereed journals and in books is the most significant measure of scholarly productivity. Publication of inhouse media and non-refereed journals is also valued but does not carry as much weight. Competitive awards and grants from agencies of national standing are another useful index of an individual’s success in obtaining recognition for research. Scholarly production can also take the form of preparation of published reports, studies and other material for governmental agencies and non-governmental organizations concerned with the operation, evaluation or improvement of the discipline. Participation in symposia, conferences and professional meetings is another outlet for publicizing and testing the results of one’s research. The presentation of papers often lacks the formal review procedure and critical response provided by publications, and in those cases such activity is not sufficient in itself as evidence of scholarly productivity. Members of professional or practitioner-oriented disciplines share scholarly obligations with the rest of the faculty. However, in cases where administrative or clinical responsibilities involve a disproportionate amount of the candidate’s time, the required
extent of written scholarship may be modified. Some measure of scholarly productivity may be demonstrated by results of professional consulting or advice in the practice of the profession being taught, but these activities are insufficient of themselves.

iv. In terms of research, the award of tenure, promotion to assistant professor, or promotion to associate professor should be based on sufficient evidence of scholarly productivity to document a successfully developing career. For promotion to professor, evidence must be conclusive that this objective has been realized; consequently, the record of scholarly and creative productivity should be substantially greater than that expected at the lower ranks. Continuing productivity from the time of one's formal entry into a professional academic career is expected. As in the case of service and teaching, excellence in research alone is not sufficient to ensure promotion.

v. Service is of several kinds. Activities such as academic advising and continuing education are expected of every faculty member. Extramural activities in professional organizations and in public bodies are an important means of bringing prestige to the University. Such service is to be encouraged and recognized. It adds to the professional competence of the individual, provides contact with a larger circle of peers, and brings greater visibility to the University. Outreach activities are not necessarily restricted to service but may contribute to any of the areas of faculty endeavor. In the Medical Center, service also consists of patient care, direct and indirect. Faculty governance and committee participation are other forms of service. As with teaching and scholarship, service must be evaluated as to quality as well as quantity, with respect to its contribution to the University in the performance of its mission.

vi. Promotion up through the professorial ranks is a recognition of professional achievement. Administration is an essential part of our well-being; therefore, administrative service is another kind of contribution a faculty member may make to the University. Administrators, however, must meet the standards of academic
excellence. Neither service nor administrative duties alone may serve as the basis for promotion.

vii. There are no rigid standards for the length of time in grade between promotions. In most fields, it is normally expected that two to six years should elapse between appointment as instructor to promotion to assistant professor, five to six years between appointment as an assistant professor and promotion to associate professor, and five to six years from associate professor to full professor. Promotion at the end of these periods is based upon the candidate's meeting the criteria enumerated above. A recommendation for promotion earlier than customary must include evidence of truly exceptional merit. The word "exceptional" is not suggested lightly because it is presumed that a promotion at the end of a normal term of service in rank is based upon meeting the criteria in more than just a satisfactory manner, by some common standard of excellence. It is conceivable that an individual with a satisfactory record in one of the enumerated criteria but without a complimentary record in the other criteria will remain in grade longer than the norm, if not indefinitely.

viii. The criteria are expected to be defined in such a way that their fulfillment gives the higher ranks dignity and stature and will identify promotion as an acknowledgement of professional accomplishment in one's discipline. The added prestige and recognition that promotion and tenured status based upon such standards confers on an individual is highly beneficial, indeed essential to the morale and luster of our faculty and University. Promotion and tenure are never automatic for a faculty member. They must be earned.

ix. Non-tenure track and appointment track faculty will be evaluated according to the expectations defined in the guidelines for promotion and tenure of their respective school and appointment track.
b) Guidelines – Promotion

The following guidelines and criteria for promotion apply to all faculty at the University of Kansas Medical Center except those in the Department of Pharmacy Practice in the School of Pharmacy, who follow procedure for the award of tenure and promotion on the Lawrence Campus.

i. Promotion to assistant professor, associate professor or professor (modified or unmodified) is made on the basis of meritorious performance as described in guidelines provided by individual schools. The University of Kansas Medical Center, at all times, seeks to attract, retain and reward the faculty member who consistently performs effectively as a faculty member-scholar. In addition, KUMC seeks to recognize service that faculty members may contribute to the University, the community, the state or the nation through their clinical endeavors and research activities. Academic promotion is an important means of acknowledging such performance and service. It is awarded for achievement, not for mere length of service or as an incentive to greater effort.

ii. Recommendations for promotion normally originate in the departments and are forwarded to the promotions and tenure committees of the School of Medicine, the School of Nursing or the School of Health Professions*. These committees make their recommendations to their respective dean or their designate, whose recommendations are forwarded to the Vice Chancellor for Academic Affairs. The Vice Chancellor for Academic Affairs prepares the promotions list and forwards it to the Executive Vice Chancellor. The Executive Vice Chancellor's recommendations are then sent to the Chancellor for final action. [For faculty who wish to pursue an appeal, refer to Section III, Part 6, Appeals and Grievances.]

iii. Procedures for recommendations for promotion, award of tenure and notice of non-reappointment are detailed in guidelines that are available to each faculty member early in the academic year through the deans.

c) Guidelines – Tenure Policy

Faculty are protected by tenure from discrimination based on protected-class status or from unfair, arbitrary or capricious dismissal. However, tenure does
not shield faculty from the consequences of inadequate performance or non-performance of their duties. Every faculty member’s performance is subject to review to determine whether each faculty member has fulfilled her/his duties. Sustained failure of a faculty member to carry out his/her academic responsibilities at an acceptable level, despite the opportunities for University faculty development or other appropriate interventions, are grounds for consideration of dismissal from the University of Kansas by the procedures adopted by the Faculty Code of Conduct for such actions.

i. The University of Kansas subscribes to the 1940 AAUP statement on Academic freedom and tenure and subsequent AAUP amendments and revisions as adopted by the Kansas Board of Regents [see Section III, Part 2A5].

ii. For a faculty member with a tenure-track appointment, the probation period is seven years. For calculation of tenure eligibility, appointment at KUMC will be considered July 1 of the calendar year in which the tenure-track appointment begins (rev 6/99).

iii. Although promotion and tenure are separate decisions, a recommendation for promotion to the rank of associate professor will usually be considered also as a recommendation for the award of tenure, if the faculty member is not already tenured.

iv. By September of each year, the Office of the Vice Chancellor for Academic Affairs will distribute to the deans of schools a list of faculty members whose tenure status must be reviewed before the end of the current academic year.

v. For faculty members on the tenure track, a comprehensive review will be made by the department’s Promotion and Tenure Committee at mid-cycle of their tenure-track appointment (by June 30th of the third year) and at the time when formal application for tenure is made. For those faculty hired with prior credit towards tenure, the mid-cycle review shall provide the faculty member with a written assessment of progress towards obtaining tenure (rev 6/99).

vi. The committees and their procedures shall be established in accordance with the decision-making procedures of the department of school. All members of the faculty subject to review shall be informed of the review and shall be advised that they are entitled to submit supporting materials to substantiate qualifications. The recommendation of the departmental
committee concerning the faculty member will be communicated in
writing to the department chair (or comparable administrator). The chair
will also forward each recommendation to the dean, along with indication
of concurrence or non-concurrence and comments. The reasons for that
decision, to recommend or not to recommend for promotion or tenure,
shall also be officially communicated to the faculty member in a personal
interview or in writing by the department chair (or comparable
administrator) if requested by the faculty member.

d) Recommendations for Promotion and Award of Tenure

A notification from the dean's office will go to all members of the faculty early
each fall advising of deadlines for recommendations to reach the appropriate
dean's office. Each department and school shall make known to its faculty
its criteria for evaluation, including its policy of relative importance to be
assigned to each criterion. Written guidelines for the evaluation of faculty
shall be developed and approved by the department faculty, consistent with
the policy of the school. Unless the context otherwise requires, the word
“department” shall be read as “school” where a school has no departmental
organization (rev. 6/99).

i. In the fall of each year, the department chair shall be responsible for
reviewing the qualifications and performance of all members of the
department’s faculty. The department Promotion and Tenure Committee
shall review mid-cycle tenure-track faculty, all non-tenure-track, and
tenured faculty below the rank of professor who may be considered for
promotion and/or tenure (rev. 6/99).

ii. In schools having departmental structure, departmental
recommendations for promotion shall be forwarded by the department
chair to the dean of the school, who will forward them to the school
committee. With each recommendation, the chair also shall indicate
concurrence or nonconcurrence together with comments.

iii. A faculty member may self-nominate and send credentials to the dean,
who forwards the nomination to the school committee. Individual faculty
members shall be entitled to recommend themselves or others for
promotion by sending materials directly to the dean.
iv. School committee(s), and their procedures, shall be established in accordance with the decision-making procedures of the school. Recommendations from the school committee review shall be forwarded to the appropriate dean. The dean or his or her designate will forward his or her recommendation for promotion to the Vice Chancellor for Academic Affairs. The Executive Vice Chancellor and the Chancellor must then approve the recommendation. However, if the dean or his or her designate denies a promotion, he or she shall inform the faculty member of that decision in writing. Within a two-week period, the faculty member may appeal, on procedural grounds only (as defined in this handbook and the school and departmental promotion and tenure guidelines), by writing a letter to the Vice Chancellor for Academic Affairs, who shall forward the promotion file to the KUMC Appeals Committee for consideration [see Denial of Promotion and/or Tenure in this section]. The recommendation of both the school committee and the dean shall be forwarded to the Appeals Committee. The involved faculty member or others may add material to the file at any time prior to or during review by the Appeals Committee. The Appeals Committee shall make its recommendation to the Executive Vice Chancellor.

v. All promotions and/or tenure become effective with the faculty member's next regular appointment (i.e., academic or fiscal year).

e) Provision for Periodic Review of Tenured Faculty

The faculty of each unit, in collaboration with the unit administrator (department chair, unit coordinator, or dean if a school has no departments or other units), will develop and adopt a modification of the process of annual evaluation of individual faculty members.

i. The criteria to be used in the periodic review of tenured faculty will be approved by the department, dean and Vice Chancellor for Academic Affairs. A current copy of the criteria is kept on file with the Faculty Assembly Steering Committee and the Vice Chancellor for Academic Affairs.

ii. The process will include a statement of the overall acceptable level of performance that meets faculty academic responsibilities, a process for annual evaluation of faculty, a provision for faculty development, and a statement of faculty
members’ right to due process in the event any disagreement should arise in the course of the evaluation.

iii. After evaluation for consistency among units (departments, divisions, etc.) by the dean and Vice Chancellor for Academic Affairs, the approved policy shall be distributed to all faculty members of the unit to whom it applies.

iv. Each unit shall review its evaluation process at least once every three years. Any changes shall be adopted by the department and must be approved by the dean and Vice Chancellor for Academic Affairs. A current copy of each unit’s evaluation procedure shall be kept on file with the chair of the Faculty Assembly Steering Committee, as well as in the Office of the Vice Chancellor for Academic Affairs.

f) Individualized Goals/Expectations

Consistent with the Regents’ directive, the University of Kansas policy provides for differential allocations of effort among faculty in the areas of their academic responsibilities. The individual’s annual review is determined on the basis of individualized allocation of effort within the unit’s established responsibilities and mission.

g) Interventions

Appropriate interventions, including faculty development options, are as follows:

i. Faculty development is the term used for the University’s investment in its faculty. While primarily relied upon to promote development, it may be utilized for corrective action.

ii. If a faculty member’s performance requires improvement in any area, the unit administrator will develop a plan for improvement with the faculty member.

iii. If a unit administrator ascertains that a faculty member’s overall performance for that year is not meeting academic responsibilities at an acceptable level, the administrator and the faculty member shall develop a written plan of methods to improve the faculty member’s overall performance, which may include assigning a faculty mentor or other campus opportunities for continued renewal and
development. Other appropriate interventions might include counseling, medical leave, or a change in teaching assignments.

iv. A faculty member may reject any plan recommended to enhance performance, and this rejection would be included in his or her personnel file. The faculty member must understand that a sustained overall failure to meet academic responsibilities at an acceptable level is a basis for dismissal.

h) Determination That Academic Responsibilities Are Not Being Met

If a faculty member has been informed that his or her overall performance is unacceptable and that substantial improvement is necessary to avoid dismissal, the faculty member may request a review by a faculty committee. School specific guidelines and procedures apply to this review process. These can be accessed via the following links:

School of Health Professions*

School of Medicine

School of Nursing

The review committee will issue a non-binding recommendation of the appropriateness of this conclusion to the unit administrator and to the dean of the school. The administrator may change the evaluation after receiving the committee's recommendation. In any event, the report of the committee will become a permanent part of the faculty member's personnel file within the academic unit and shall be available to the faculty member. Unit administrators shall consult annually with the dean, and deans shall consult annually with the Vice Chancellor for Academic Affairs on the progress of any faculty member who falls within the category of overall failure to meet academic responsibilities.

i) Policy on Sustained Failure to Perform Academic Responsibilities

i. If, under the procedures for annual review of faculty, a faculty member has been judged by the unit administrator to fail to meet the acceptable level of performance for three successive years, the unit administrator or Dean may recommend that dismissal procedure be preferred against the faculty member. If such a recommendation is not forthcoming at this
time, the Vice Chancellor for Academic Affairs will require the unit administrator or Dean to explain why no action has been taken.

ii. The policy was implemented fully with the 1997-98 annual evaluation process. Each department or School will review its faculty evaluation system and develop statements defining the expected level of performance required to meet faculty academic responsibilities. Revised faculty evaluation plans containing these statements will be reviewed and approved by the Dean and the Vice Chancellor for Academic Affairs to ensure compliance with the policy statement regarding the evaluation process.

j) Financial Recognition for Promoted Faculty

Each school within the University of Kansas Medical Center has developed a policy and a formula to provide salary increases for faculty members who are promoted. These increases are generally prorated depending on rank.

k) Student Evaluations

The Student Evaluation of Faculty Instruction was developed to fulfill the Board of Regents mandate of assessment and to provide useful feedback to faculty and administrators, from the students’ perspective, concerning the quality of instruction at the Medical Center. The data from the student evaluations will be analyzed at the department, school, and institution levels to assess general student perceptions of the quality of instruction at the Medical Center and to identify problematic areas (BOR 2/27/98).

l) Recommendation for Dismissal

If there has been a sustained overall failure to meet academic responsibilities at an acceptable level, a dean or their designate may recommend to the Vice Chancellor for Academic Affairs that a tenured faculty member be dismissed. The dean or their designate shall consider in the evaluation:

i. the nature of the failure to meet academic responsibilities at an acceptable level;

ii. the reason or reasons for this failure;

iii. the number of years that the faculty member has failed to meet academic responsibilities at an overall acceptable level;
iv. the level of discernible improvement in the faculty member's performance after being notified of any failure in performance; and

v. the extent to which the faculty member has complied with the terms of any plan developed to improve the faculty member's overall performance.

The Vice Chancellor for Academic Affairs will review the case, and if he or she recommends dismissal and the Executive Vice Chancellor concurs, the EVC will, in writing, inform the faculty member of the recommendation for dismissal. If the faculty member appeals the recommendation for dismissal, an Ad Hoc Hearing Committee will be appointed as outlined in Appeals and Grievances [see Section III, Part 6 of this handbook] and dismissal complaint procedures will apply.

B. Administrators

1. Chairs

A review process may be initiated at the discretion of the dean to evaluate the administrative performance of the chair in accordance with the policy of each school. This review should be conducted at least every five years. In the instance of such a review, representative faculty input should be sought and considered.

a. The dean shall develop a procedure to be followed in review of chairs within that school. The dean shall appoint the committee and designate the chair. Membership on the committee shall include faculty and students primarily from the school. Input from faculty, staff and students should be solicited. Consultations from individuals outside of the institution also should be sought.

b. The reports of the review committees shall be based on, but not necessarily limited to, information solicited from students, staff and faculty in the department; other chairs in the school; and where appropriate, the professional constituency of the department. The review committee will take particular care to learn the will of the department faculty as to whether it wishes the chair to continue in office.

c. The chair of each department shall submit an annual report to the dean of the school involved. The report shall review departmental budgets; research and teaching awards to faculty; publications by faculty; and service by faculty
on departmental, school or Medical Center-wide committees. The report shall also identify perceived areas of strength and weakness within the department's operations. The dean will make these annual reports available to the departmental chair review committee.

d. The review committee shall submit its report to the dean, or the dean’s designate (whenever a dean holds dual appointments of Dean and EVC, the committee’s report shall go to the dean’s designate) who will forward a copy, with comments and recommendations, to the Executive Vice Chancellor. Where appropriate, the dean may share the report or portions of the report with the Vice Chancellor for Academic Affairs and Dean of Graduate Studies. A copy of the report also shall be submitted to the appropriate department chair.

e. The decision to continue the appointment will be made following the submission of the report of the review committee. The dean's decision will follow consultations with the Executive Vice Chancellor, and, as appropriate, the Senior Vice Chancellor for Academic and Student Affairs, and the Vice Chancellor for Academic Affairs.

2. Deans

A review process may be initiated at the discretion of the Executive Vice Chancellor to evaluate the administrative performance of a dean. In the instance of such a review, representative faculty input should be sought and considered. (Whenever a dean holds dual appointments of Dean and EVC, the review of the Dean shall be by the Chancellor)

a. The deans shall be reviewed comprehensively at the discretion of the Executive Vice Chancellor and the Chancellor. This review should be conducted at least every five years, by the completion of the fifth year. The Executive Vice Chancellor shall appoint the review committee, assign its charge and designate its chair.

b. Generally, the review committee will be composed of six members. These members will include the chair of the school’s faculty governance group, one faculty member from within the school, one external member (preferably a current dean from the same discipline) and faculty members from each of the schools outside the dean’s school. The appropriate faculty-elected Steering Committee shall be consulted on the faculty appointments.

   i. In fulfilling their obligations, the committee is expected to review the dean’s record and performance over the period under consideration.
in both academic and administrative matters. Strengths and weaknesses in the following areas will be examined:

a) Leadership  
b) Provision of a climate that encourages scholarship, teaching and research  
c) Medium- and long-range planning  
d) Setting and achieving academic and budgetary priorities  
e) Promotion of diversity initiatives  
f) Interactions with faculty, staff, senior administration, students, other schools and faculties and outside constituencies  
g) Business management  
h) Response to findings of earlier review (if applicable)  
i) Representation of unit and institutional perspectives to internal and external constituencies  
j) Any other relevant areas  

ii. In addition to faculty, students and administrators, the committee may wish to survey professionals in the field, alumni and other special groups. The committee should encourage frank and open comments from those it consults. Signed questionnaires and letters are preferable, but respondents may wish to remain anonymous and should be given that option.

iii. It would be appropriate for the full committee or individual members to interview selected members of the constituencies and any individual who wishes to be heard. Careful notes should be taken of all interviews and should form part of the committee’s permanent record.

iv. All documentation and interviews must be held in strict confidence, and all documents will be forwarded to the Office of Academic Affairs at the conclusion of the review.

v. The process of reviewing deans shall be as follows:  
a) A current job description and a curriculum vitae of the dean should be provided to the committee.  
b) The dean should provide the committee with a self-study that should (i) provide a brief overview of the dean’s administration, including the duties and responsibilities he or she was asked to undertake by the senior administration, and should include
information about management “style,” successes, weaknesses, and disappointments; (ii) address the concerns he or she has about the unit; (iii) enumerate the goals he or she has set for the next five years and the means by which those goals will be reached; and (iv) comment on any concerns raised during the previous performance review (if applicable).

c) A faculty survey focusing on the performance of the dean will be developed in concert with faculty governance of the specific school. An outside consultant will evaluate the survey for objectivity. The survey will be distributed to faculty and, when appropriate, to recent alumni as well. The survey instrument will be returned to the Office of Faculty Affairs and Institutional Research for tabulation. These results will be shared exclusively with the review committee.

d) The complete process should be completed within 120 days.

e) The report of the review committee shall derive mainly from information solicited from faculty, students, administration and others as deemed necessary and appropriate by the committee. The committee's report will be submitted to the Executive Vice Chancellor. Continuing appointment of the dean will be contingent upon the results of the review and accompanying recommendations (rev. 2/27/98).

3. Vice Chancellors

A review process may be initiated at the discretion of the Executive Vice Chancellor to evaluate the administrative performance of each vice chancellor. In the instance of such a review, representative faculty input should be sought and considered.

4. Executive Vice Chancellor

The Executive Vice Chancellor of the University of Kansas Medical Center serves at the pleasure of the Chancellor of the University of Kansas. A review process may be initiated at the discretion of the Chancellor to evaluate the administrative performance of the Executive Vice Chancellor.
C. Directors

Review of directors will follow the guidelines for review of chairs, with modifications as needed. The appropriate vice chancellor or dean is responsible for implementing these guidelines as they relate to the directors under his or her sphere of responsibility. This review should be conducted at least every five years.

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**Part 5. End of Appointment**

A. Resignation

The University of Kansas shares the views expressed in the Statement on Recruitment and Resignation of Faculty Members endorsed by the American Association of University Professors (AAUP) in April 1961. This statement includes the following sections on resignations:

*Mobility of faculty members among colleges and universities is rightly recognized as desirable in American higher education. Yet the departure of a faculty member always requires changes within his institution, and may entail major adjustments on the part of his colleagues, the administration, and students in his field. Ordinarily a temporary or permanent successor must be found and appointed to either his position or the position of a colleague who is promoted to replace him.*

. . . It is desirable that, when feasible, the faculty member who has been approached with regard to another position inform the appropriate officers of his institution when such negotiations are in progress. The conclusion of a binding agreement for the faculty member to accept an appointment elsewhere should always be followed by prompt notice in his institution.

. . . Except by agreement with his institution, a faculty member should not leave or be solicited to leave his position during an academic year for which he holds an appointment.

Resignations from the faculty should always be submitted in writing to the department chair (or the dean of the school if no departmental organization exists). Such letters will be forwarded through the dean of the school to the Vice Chancellor for Academic Affairs (or designee). For purposes of the orderly transaction of business, a resignation should normally identify the faculty member's future location.

The effective date of a faculty member's resignation shall be the termination date of the faculty member's current appointment, unless an earlier date is specified and is agreed to by the faculty member and the dean. If a resigning faculty member holds
research grants or contracts from outside agencies, the Vice Chancellor for Administration and the Associate Vice Chancellor for Research Administration must be consulted in order that proper arrangements may be made for the liquidation or transfer of the grant and the disposition of any equipment secured under the grant or contract.

**B. Retirement**

For more information, see Section IV, Part G, of this handbook. Information pertaining to full retirement, phased retirement, benefits after retirement, and employment after retirement also can be found at the KUMC Human Resources Department website (link modified 10/2011).

**C. Dismissal**

1. **Discontinuance of an Academic Program**
   
   For information on discontinuance of an academic program, see Section X, Part D, of this handbook.

2. **Financial Exigency**
   
   For detailed information on financial exigency, see Section X, Part B, of this handbook.

3. **Adequate Cause**
   
   A faculty member may be dismissed for conduct or performance detrimental to the University's mission, including but not limited to the following causes:
   
   a) **Scientific and Other Scholarly Misconduct**
      
      See Section IX, E, of this handbook [see also the Proposed Faculty Appeal and Grievance Committees Chart in Appendix C].
   
   b) **Clinical Misconduct**
      
      See Section III, Part 3, A, 5 and Section IX, B of this handbook.
   
   c) **Personal Misconduct**
      
      See Section III, Part 3, of this handbook.
   
   d) **Sustained Failure to Perform Academic and/or Clinical Responsibilities**
      
      See Section III, Parts 4 and 5 of this handbook.

4. **Appeal of Dismissal**
   
   For detailed information, see Section III, Part 6, of this handbook.
D. Non-Reappointment

1. Tenure-Track Faculty

a. Notice of non-reappointment may be given to a faculty member on the tenure track at any time prior to the mandatory date for a tenure decision. A faculty member on the tenure track is considered to be serving a probationary period; therefore, non-reappointment may be justified, in addition to reasons related to the faculty member's performance as a faculty member, scholar and member of the University community, by criteria based upon departmental or school plans for future faculty development, by budgetary considerations, or by a departmental or school decision that its needs should be filled with a different individual. These statements shall apply even during periods of declared financial exigency, unless impossible, in which case notice shall be provided as early as feasible.

b. Non-reappointment decisions originate at the departmental level (or, where no departmental organization exists, at the school level). If a department decides to recommend non-reappointment, written notice shall be sent by the departmental chair (or the dean) to the faculty member on or before the date on which that recommendation is forwarded to the next review level.

c. The procedure for forwarding recommendations for non-reappointment shall be from the chair of the department, to the dean of the school, to the Vice Chancellor for Academic Affairs, to the Executive Vice Chancellor. At each level, the appropriate administrator shall indicate his or her concurrence or non-concurrence.

d. The legally effective notice of non-reappointment will be issued in writing by the Executive Vice Chancellor and shall be sent not later than the appropriate deadline date listed below. The notice shall include a statement that the reasons for the decision will be made available in writing at the request of the faculty member.

e. The Board of Regents has adopted the AAUP statement of 1964, which stipulates the time of notices of non-reappointment for faculty on the tenure track. This timeline shall apply even during periods of declared financial exigency.

   i. Not later than March 1 of the first year of service, if the appointment expires at the end of that academic year; or, if a one-year appointment terminates during an academic year, at least three months in advance of its termination.

   ii. Not later than December 15 of the second year of service, if the appointment expires at the end of that academic year; or, if the
appointment for a second year of service terminates during an academic year, at least six months in advance of its termination.

iii. At least 12 months before the expiration of an appointment after two or more years of service in the institution. This places the notification deadline on the last day of the academic year for faculty members on nine-month appointments and on June 30 for those on 12-month appointments.

f. No appeal exists in cases of non-reappointment.

2. Non-Tenure Track Faculty

Faculty members who are not on the tenure track may serve under 12- or nine-month appointments, which expire at the end of each fiscal year; or may serve under the clinical scholar contract, each of which are renewable only upon mutual agreement at the end of the then-current contract term. Provisions provided for non-reappointment of tenure-track faculty or unclassified professional staff do not apply to non-tenure-track faculty. No appeal exists in cases of non-reappointment.

3. Faculty Administrators

Chairs, deans, vice chancellors and other administrative officers are accountable to the Chancellor and serve at his or her pleasure. Associate or assistant chairs, deans, vice chancellors serve at the pleasure of their respective chief administrators. An administrative appointment held by faculty is distinct and separate from a faculty appointment.

E. Expiration of Appointment

1. Annual Appointments

Non-tenure track annual appointments may begin at any time during the fiscal year but always expire at the end of the fiscal year on June 30th. Annual appointments are renewable upon mutual agreement. No appeal exists in cases of expiration of an annual appointment.

2. Limited Term Appointment

Limited term appointments are for less than one year in length and start and end on the specified dates which define the term of the appointment. No appeal exists in cases of expiration of a limited term appointment.
Part 6. Appeals and Grievances

A. Introduction

The University of Kansas Medical Center is a large and complex community, and disputes will inevitably occur. In most instances, every attempt should be made to resolve disputes informally. Informal resolution implies that both sides of the dispute agree with the final resolution. In general, when a dispute is resolved informally, there are no permanent records or files kept on the matter.

Formal resolution of disputes involves established procedures for inquiry, investigation and adjudication. KUMC provides several mechanisms for faculty to address specific types of complaints or to appeal certain administrative decisions.

Issues for which a complaint procedure is available include: academic freedom, illegal discrimination, personal misconduct, and research or scientific misconduct.

Administrative decisions that may be appealed include tenure/promotion (if procedural violations are suspected) suspension without pay and dismissal. The procedures are designed to afford due process, ensure that complaints and appeals are addressed in a timely and consistent manner by appropriate offices or objective peer review bodies, and to provide clear guidelines for all participants.

B. Definitions

The following general terms are used throughout the succeeding procedures. Where applicable, additional issue-specific terms are defined within each procedure.

1) Academic Freedom. The AAUP's definition of academic freedom is best reflected in its 1940 Statement of Principles of Academic Freedom and Tenure. According to that statement, academic freedom means that: Teachers are entitled to full freedom in research and in the publication of the results, subject to the adequate performance of their other academic duties . . . Teachers are entitled to freedom in the classroom in discussing their subject, but they should be careful not to introduce into their teaching controversial material that has no relation to their subject . . . College and university teachers are citizens, members of a learned profession, and officers of an educational institution. When they speak or write as citizens, they should be free from institutional censorship or discipline, but their special position in the community imposes special obligations. As scholars and educational officers, they should remember that the public may judge their profession and their institution by their
utterances. Hence they should at all times be accurate, should exercise appropriate restraint, should show respect for the opinions of others, and should make every effort to indicate that they are not speaking for the institution.

2) **Administrative Review.** The process of evaluation of an allegation or allegations by a designated University official who holds issue-specific expertise. Administrative review may be required when legal or technical assessment is required to develop a finding or recommend a course of action.

3) **Aggrieved party.** The person who is appealing, as authorized by this handbook, a recommendation; also referred to as "complainant" or "appellant."

4) **Allegation.** A written or oral statement that misconduct or prohibited actions have occurred, which is made in good faith to a designated University official in accordance with University complaint procedures.

5) **Appeal.** A written or oral request for further review of an administrative decision involving dismissal or tenure/promotion made to a designated University official that precedes or initiates a University appeal procedure.

6) **Appellant.** An individual who requests review of an administrative decision as authorized by this handbook, or otherwise initiates a University appeal procedure.

7) **Burden of Proof.** Burden of proof means the burden of persuasion. The person who has the burden of proof must persuade the decision-maker that, by a preponderance of the evidence, his/her claim is more probably true than not true.

8) **Complainant.** The person, entity or group filing an allegation of misconduct, discrimination or academic freedom infringement with a duly authorized University official.

9) **Conflict of Interest.** The real or apparent interference of a person's or entity's interests with the interests of another person or entity, which may inhibit or prevent unbiased evaluation of facts and appropriate decisions.

10) **Deciding Official.** The KUMC official who issues a final administrative response to findings of misconduct, discrimination or academic freedom infringement.

11) **Evidence.** Oral testimony, written accounts, data, pictures, graphs or other materials that are used to substantiate or refute allegations.

12) **Fabrication.** Making up data or results, and recording or reporting them.

13) **Falsification.** Manipulating research materials, equipment, or processes, or changing or omitting data or results such that the research is not accurately represented in the research record.
14) **Finding.** The determination made by a duly appointed administrative official or a duly constituted peer review panel regarding the outcome of a hearing or investigation.

15) **Good Faith Allegation.** An allegation made with the honest belief that misconduct or prohibited actions may have occurred. An allegation is not in good faith if made with reckless disregard for, or willful ignorance of, facts that would disprove the allegation.

16) **Grievance.** A written statement by an individual or group setting forth a complaint that has not been resolved by other methods or processes.

17) **Inquiry.** A process of gathering information and initial fact-finding to determine whether an allegation or apparent instance of misconduct warrants an investigation.

18) **Investigation.** The formal examination and evaluation of all relevant facts to determine if there exists a reasonable basis for the allegation or complaint and, if so, to determine the responsible person, the seriousness of the misconduct and the appropriate administrative response.

19) **ORI.** The Office of Research Integrity in the U.S. Department of Health and Human Services (DHHS). ORI is responsible for the scientific misconduct and research integrity activities of the U.S. Public Health Services (PHS).

20) **Peer Review.** The process of evaluating allegations or appeals through a panel of peers rather than through a designated University official. Peer review committees may be required when academic or discipline-specific assessment is required to develop a finding or recommend a course of action.

21) **Personal or Professional Misconduct.** Broadly defined as conduct that fails to meet KUMC’s expectation that its faculty (1) act professionally in their interactions with students, faculty and staff; (2) fulfill their teaching responsibilities; and (3) conduct themselves in a manner that by normal societal standards would be considered as morally and/or professionally acceptable conduct.

22) **Plagiarism.** The appropriation of another person’s ideas, processes, results or words without giving appropriate credit.

23) **Preponderance of Evidence.** The standard used by a deciding official or peer review panel to establish a finding that the weight of evidence, including when fairly considered, is more credible and convincing to the mind. Weight of evidence is not be determined by the number of witnesses or documents. Preponderance of evidence exists when such evidence has, when considered and compared with that opposed to it, produces the conclusion that something is more likely true than not true.
24) **Recommendation.** A suggestion made by a peer review panel or a duly appointed University official regarding the appropriate administrative response to a complaint or appeal procedure.

25) **Research.** All basic, applied and demonstration research in all fields of science, engineering and mathematics. This includes, but is not limited to, research in education, medicine, basic sciences and research involving human or animal subjects.

26) **Research Integrity Officer.** The institutional official responsible for making an inquiry into allegations of research or scientific misconduct and determining when such allegations warrant an investigation.

27) **Research Record.** The record of data or results that embody the facts resulting from scientific inquiry. The research record includes, but is not limited to, research proposals, laboratory records (both physical and electronic), grant or contract applications, progress reports, abstracts, theses, oral presentations, correspondence, internal reports and journal articles. Research records may be in the form of documents, videos, photographs and slides, x-rays, biologic materials, equipment use logs, laboratory procurement records, animal facility records, human and animal subject protocols, consent forms, medical charts, case report forms, computer files, computer diskettes, and non-written accounts or objects that reasonably may be expected to provide evidence or information regarding the proposed, conducted and/or reported research.

28) **Respondent.** The person, group or entity against whom an allegation is directed or whose actions are the subject of an inquiry or investigation. There can be more than one respondent in any inquiry or investigation.

29) **Retaliation.** Any unwarranted adverse action taken by a person, entity or group against a complainant, witness, peer review member or institutional official that can be linked to their initiation of or participation in a complaint or appeal procedure.

30) **Research or other Scientific Misconduct.** Research misconduct is broadly defined as any conduct that violates requirements of KUMC’s research protection program or funding source regulations. Reportable research misconduct as defined by the federal government includes fabrication, falsification, or plagiarism in proposing, performing or reviewing research, or in reporting research results. Research misconduct does not include honest error, scholarly or political disagreements, and differences of opinion in interpretations or judgments of data. Other practices that seriously deviate from ethical standards for proposing, conducting or reporting research may constitute research or scientific misconduct. A finding of research
misconduct requires that (a) there be a significant departure from accepted practices of the relevant research community; (b) the misconduct be committed intentionally, knowingly, or recklessly; and, (c) the allegation be proven by a preponderance of evidence. (see 23 above)

31) **Witness.** An individual who provides written or oral evidence in conjunction with an appeal or complaint procedure.

**C. General Provisions**

The following general provisions apply to all complaint and appeal procedures.

1. **Due Process**

   The “due process” accorded faculty shall include the following elements:
   
   a. The aggrieved party and respondent to a proceeding may represent himself or herself or be advised by an advisor or counselor of his or her choice.
   
   b. The respondent shall have the right to a written statement of the complaint or grievance against him or her, which statement shall set forth with particularity the facts upon which the complaint or grievance is based and shall indicate the provision or provisions of the University Rules and Regulations alleged to have been violated, or the acts of established University bodies or officials alleged to have been unlawful, arbitrary, or capricious.
   
   c. The respondent shall have the privilege of remaining silent and may refuse to give evidence, and he or she shall be informed of this privilege at the beginning of the proceedings.
   
   d. The aggrieved party and respondent to a proceeding shall be entitled to a full examination of the evidence presented by the respective parties, including the opportunity to cross-examine witnesses.
   
   e. The hearing body shall base its recommendations solely on the evidence received at the hearing.
   
   f. The aggrieved party and respondent to a proceeding shall be entitled to prompt, written notice of the decision of the committee and the facts on which the committee based its decision.
2. Confidentiality

Complainants, respondents, witnesses and others involved shall refrain from disclosing information about complaint or appeal cases to anyone who does not have legitimate need or right to know. Violations of confidentiality may result in charges of unprofessional conduct.

3. Filing a False Complaint or Retaliating Against Participants in the Complaint Process

KUMC protects the rights and reputations of all parties involved, including individuals who report perceived misconduct in good faith. Complainants or appellants who make an allegation in good faith may not be retaliated against for making the allegation. Filing a false complaint in the absence of good faith is considered to be serious misconduct which is subject to sanction, including disciplinary action.

D. Peer Review Committees

Peer review at the University of Kansas Medical Center is conducted by two faculty committees: the Ad Hoc Hearing Committee and the Medical Center Hearing Committee on Promotion and Tenure.

1. The Ad Hoc Hearing Committee

a) Role of the Committee

The Ad Hoc Hearing Committee considers complaints alleging academic freedom infringement or misconduct and/or dismissal appeals.

b) Composition of the Committee

The committee will be comprised of one member chosen by the aggrieved party, one member chosen by the respondent, and four persons selected by the Faculty Assembly Steering Committee. These individuals will be selected by the Faculty Assembly Steering Committee with approval of the Vice Chancellor for Academic Affairs. At least one of the four shall be from a School not represented by either the aggrieved party or the respondent.

c) Committee Chair

One of the four members selected from the Faculty Assembly Steering Committee shall serve as a non-voting chair; that individual may not have the same school or departmental affiliation as the aggrieved party or respondent.
d) Conflict of Interest Restriction

No member of the committee may have an apparent or real conflict of interest regarding the issues or participants for a given appeal or complaint.

e) Procedural Guidelines

The following guidelines will be followed by the committee in conducting their hearings and investigations.

i. The Vice Chancellor for Academic Affairs may extend any time tables provided that all parties involved are notified (rev. 6/99).

ii. A list of witnesses shall be provided to all parties five working days prior to the hearing (rev. 6/99).

iii. Both the aggrieved party and respondent may submit supporting materials and introduce supporting witnesses.

iv. The aggrieved party and respondent shall be entitled to full examination and hearing of the evidence, including the right to question witnesses.

v. The aggrieved party and respondent shall have the right to call witnesses and introduce documentary or other physical evidence, provided that reasonable advance notice of such witnesses and evidence shall be given to the other party.

vi. The aggrieved party and respondent may be self-represented or may be represented by an adviser of his or her own choice.

vii. Relevant statements and/or information obtained in any previous hearing or mediation process or in the course of a previous administrative proceeding may be obtained at the discretion of the committee, but all information obtained in this manner must be relevant in order to be entered into evidence. For appeals related to proposed dismissal on the grounds of sustained failure to meet academic responsibilities, the committee shall receive the reports of the review committee(s), the annual written evaluation(s) of the unit administrator concerning the faculty member, and the pertinent written response(s) by the faculty member to the evaluations and charges.

viii. The respondent shall have the privilege of remaining silent and may refuse to give evidence. He or she shall be informed of this privilege during the initial stage of the proceedings.

ix. Recommendations of the Hearing Committee shall be based solely on evidence received during the hearing.
x. The hearing of evidence by the committee shall be completed within 16 weeks from the date on which the Ad Hoc Hearing Committee was established.

xi. The Hearing Committee shall render its recommendations to the Vice Chancellor for Academic Affairs within two weeks from the date on which the hearing of evidence has been completed. The committee's recommendation shall be forwarded by the Vice Chancellor for Academic Affairs to the Executive Vice Chancellor as well as to the aggrieved party.

xii. The Executive Vice Chancellor shall report his or her decision regarding the matter within two weeks to the chair of the Steering Committee and the Vice Chancellor for Academic Affairs. The Vice Chancellor for Academic Affairs will report the Executive Vice Chancellor’s decision to the aggrieved party(s) and his or her supervisor(s).

f) Changes and Amendments to these Guidelines

Procedural changes and amendments to these guidelines shall be made jointly by the Faculty Assembly Steering Committee, the Vice Chancellor for Academic Affairs, and the Executive Vice Chancellor.

2. The Medical Center Hearing Committee on Promotion and Tenure

a) Role of the Committee

The Medical Center Hearing Committee on Promotion and Tenure considers promotion and/or tenure appeals from individuals who have been denied recommendation by the Dean. The committee shall only consider procedural issues.

b) Composition of the Committee

The committee shall consist of seven voting faculty members (including at least one from the Wichita Campus) and the Vice Chancellor for Academic Affairs (or designee). Faculty members serving on this committee must be tenured and, when possible, should hold the highest professorial rank in their school. The Faculty Assembly Steering Committee shall appoint four faculty members who have been (but are not currently) members of the Promotion and Tenure Committees of the three schools (one from School of Health Professions*, one from School of Nursing and two from the School of Medicine, one from the Wichita campus) plus three additional faculty members, one from each of the three schools.
c) Committee Chair

The Vice Chancellor for Academic Affairs or designee shall chair the committee and be entitled to vote in case of a tie.

d) Conflict of Interest Restriction

No member of the committee may have an apparent or real conflict of interest regarding the issues or participants for a given appeal or complaint.

e) Procedural Guidelines

The purpose of these guidelines is to provide faculty a fair and equitable mechanism to address procedural issues resulting from the academic review process. The principal charge of this committee is to review procedural issues at the department and school level to determine if the faculty member was afforded full opportunity for academic review and that there was no arbitrary or capricious action on the part of any component of the school's review process.

This procedure is staffed by the Office of the Vice Chancellor for Academic Affairs from which all correspondence and materials relevant to the appeal will be developed and filed. Members of the committee will be notified in writing of the time and agenda. Information for each appellant (which will include the CV, a letter from the member appealing, a letter from the dean of the school, written guidelines from the school, and a copy of letters and written guidelines from the department) will be sent to the committee members. In addition, a written summary of the deliberations of the school committee's action shall be made available to the committee members. Any other materials available to the school committee will be available in the Office of the Vice Chancellor for Academic Affairs for examination by the committee.

i. The appellant will be notified in writing by the committee chair in advance of the meeting that the principal charge of the committee is to review procedural issues and that this will be the basis upon which a decision will be rendered. Therefore, the appellant should, in his or her letter and in his or her oral presentation to the group, direct the appeal to the committee on procedural grounds.

ii. The appellant will be allowed to make an oral presentation to the committee, after which time the committee will be allowed time for questions. Upon completion of this process, the appellant will be excused. The committee may then seek the advice of legal
counsel concerning procedural issues and may request testimony on those issues from additional persons.

iii. The findings and recommendation of the committee will constitute the minutes of the hearing.

iv. The committee shall make its recommendations to the Executive Vice Chancellor.

v. Official notification of action regarding promotion and/or tenure is made by the Executive Vice Chancellor (or designee).

f) Changes and Amendments to These Guidelines

Recommendations for changes in these guidelines will be forwarded to the Executive Vice Chancellor following consideration, consensus and recommendations from the Faculty Assembly Steering Committee.

E. Personal and Professional Misconduct Complaint Procedure

1. General Principles

Faculty responsibilities with regard to personal and professional conduct are detailed in Section III, Part 3. The following procedure provides a mechanism for handling complaints about faculty misconduct involving personal, professional, academic and clinical expectations, excluding research or scientific misconduct, which is addressed in Section III, Part 6F, and illegal discrimination which is addressed in Section III, Part 6G.

2. Purpose and Jurisdiction of the Procedure

This procedure shall be invoked for alleged misconduct as outlined in Section III, Part 3, of this handbook. It shall be used to receive and process formal allegations of faculty misconduct, except when the misconduct is covered by policies and procedures governing research and scientific misconduct, or illegal discrimination.

3. Resolution Strategies

All complaints regarding faculty conduct shall be reported at the first and most informal level. Generally, this will be the department chair, center director, or dean of the faculty member whose conduct is being questioned. Should informal resolution attempts fail, the following procedure shall be used.

4. Responsibility for Implementation

The Executive Vice Chancellor is responsible for assuring compliance with federal, state and University policies and procedures governing the responsible and ethical conduct of research. The Executive Vice Chancellor delegates responsibility for
responding to allegations of faculty misconduct to the Vice Chancellor for Academic Affairs.

5. Timelines

The Vice Chancellor for Academic Affairs shall respond immediately to an allegation or other evidence of possible misconduct. An inquiry or investigation must be completed within 60 calendar days of its initiation unless circumstances clearly warrant a longer period. If the procedure takes longer than 60 days to complete, the record shall include documentation of the reasons for exceeding the 60-day period. Timelines may be extended by the Vice Chancellor for Academic Affairs at his or her discretion or upon written request from the complainant or respondent to the Vice Chancellor for Academic Affairs. The Vice Chancellor for Academic Affairs or designee shall inform all parties when timeline extensions are made.

6. Filing

Anyone having reason to believe that a faculty or staff member has violated KUMC’s faculty code of conduct shall report the matter to the Vice Chancellor for Academic Affairs. This report is assumed to be a “good faith allegation.” An inquiry may also be initiated by the Vice Chancellor for Academic Affairs in response to notifications from school deans, department chairs, or center directors; direct observations of conduct; or any information that is sufficiently credible to justify such action.

7. Complaint Procedure

The procedural steps are outlined in a flow chart at the end of Section III, Part 6. Upon receipt of written allegations, the Vice Chancellor for Academic Affairs or designee shall initiate an inquiry into the allegations in order to determine whether the allegation has substance and if an investigation is warranted.

a) Inquiry Procedure

i. The respondent will be informed that an inquiry has been initiated within five working days after the inquiry has begun.

ii. The Vice Chancellor for Academic Affairs or designee shall conduct the inquiry. The services of other individuals and entities may be utilized in order to make a complete inquiry as to whether evidence exists which would warrant an investigation. The inquiry must be completed within 60 calendar days of its initiation, unless circumstances clearly warrant a longer period.

iii. The Vice Chancellor for Academic Affairs or designee shall prepare a written report stating what evidence was reviewed,
summarizing relevant interviews, and including any conclusions reached as a result of the inquiry. The respondent shall be given a copy of the inquiry report. If the respondent chooses to comment on the report, he or she must submit a written response to the Vice Chancellor for Academic Affairs within five working days after receiving the report in order for it to be made a part of the record. If it is determined that an investigation is needed, the Vice Chancellor for Academic Affairs shall notify the Steering Committee of the Faculty Assembly, the Executive Vice Chancellor, the appropriate dean, and the appropriate department chair or center director before proceeding to the investigation procedure.

b) Investigation Procedure

i. The Vice Chancellor for Academic Affairs or designee shall notify the respondent in writing that an investigation is being commenced. The notice shall indicate upon what grounds the determination was made and will include a copy of any applicable policies or procedures. Investigations shall be initiated within 30 calendar days after completion of the inquiry report.

ii. The investigation shall be conducted by an Ad Hoc Hearing Committee and shall conform to procedural guidelines stated in Section III, Part 6D.

iii. The investigation normally will include examination of all relevant documentation. Whenever possible, interviews will be conducted of all individuals involved either in making the allegation or who might have information regarding key aspects of the allegations.

iv. All witness interviews shall be recorded during the course of the investigation, and transcripts of recorded testimony shall be made when deemed appropriate by the Ad Hoc Hearing Committee.

c) Sanctions

The sanctions listed here are formal sanctions and are steps taken beyond informal complaints about one's performance; i.e., verbal admonitions to improve or change one's behavior, or negative comments concerning one's performance as stated in the annual evaluations. One or more of the following sanctions, listed in order of increasing severity, may be imposed for proscribed conduct by a faculty member. Although listed in order of severity, the
sanctions need not be applied serially, and a more serious sanction may be applied without a less serious one having been previously applied. Sanctions i, ii, iii and iv below are considered corrective and not subject to appeal. Sanctions under v below are considered punitive and subject to appeal.

i. Warning. Notice in writing that continuation or repetition of conduct found wrongful, within a period of time stated in the warning, may be cause for more severe disciplinary action.

ii. Restitution. Reimbursement for damage to or misappropriation of property. This may take the form of appropriate service or other compensation.

iii. Recommendation of Censure. Recommendation to the Executive Vice Chancellor and Chancellor that a faculty member be formally reprimanded.

iv. Recommendation of Suspension. Recommendation to the Executive Vice Chancellor and Chancellor that a faculty member be excluded from teaching and other specified privileges or activities for a definite period not in excess of two years.

v. Recommendation of Suspension without pay or Dismissal. Recommendation to the Executive Vice Chancellor and Chancellor that a faculty member be suspended without pay or dismissed.

d) Appeal and Adjudication of Corrective Actions and Non-Punitive Measures

If the administrative response results only in the imposition of corrective actions or non-punitive measures, the decision of the EVC or designee shall be final.

e) Adjudication Procedure

If the administrative response results in a punitive sanction such as termination or other adverse change in the respondent’s terms and conditions of employment, the respondent may appeal the decision through the appropriate procedure contained in Section III, Part 6J, of this handbook.

f) Records Management

The Vice Chancellor for Academic Affairs and the Ad Hoc Hearing Committee are delegated responsibility for preparing and maintaining all documentation gathered or generated during the inquiry and investigation. Documentation of an inquiry that was not followed by an investigation shall be sufficiently detailed.
to permit a later assessment of the reasons for determining that an investigation was not warranted. All records shall be maintained in a secure manner for a period of at least three years after termination of the inquiry.

g) Changes and Amendments to Policy and Procedures

Policy changes governing faculty misconduct shall be made by the Executive Vice Chancellor in consultation with the Vice Chancellor for Academic Affairs, Deans of the respective schools, and the Faculty Assembly.

F. Complaint Procedure Governing Research or Scientific Misconduct

1. General Principles

In conjunction with federal requirements and institutional policy, certain conduct in research and other scholarly activities is prohibited at KUMC. While federal agencies have ultimate oversight authority for federally funded research, KUMC bears primary responsibility for preventing and detecting research or scientific misconduct, and for the inquiry, investigation and adjudication of alleged misconduct.

2. Purpose and Jurisdiction of the Procedure

This procedure shall be used to receive and process allegations of research or scientific misconduct, as defined in Section IX, Part E, of this handbook.

3. Resolution Strategies

A response to an allegation of research or scientific misconduct consists of three phases:

a) Inquiry

An assessment of whether the allegation has substance and if an investigation is warranted.

b) Investigation

The formal development of a factual record and the examination of that record leading to dismissal of the case or to a recommendation for a finding of research misconduct or other appropriate remedies.

c) Adjudication

Stage during which recommendations are reviewed and appropriate corrective actions determined.

4. Responsibility for Implementation

The Executive Vice Chancellor is responsible for assuring compliance with federal, state and University policies and procedures governing the responsible and ethical conduct of research. The Executive Vice Chancellor delegates
responsibility for responding to allegations of research or scientific misconduct to the Research Integrity Officer, who shall be responsible for the following:

a. Securing the necessary and appropriate level of expertise to carry out a thorough and authoritative evaluation of the relevant evidence in any inquiry or investigation.

b. Taking precautions to ensure impartiality of those involved in the inquiry or investigation.

c. Defining the scope of the investigation in accordance with the terms of this regulation, any applicable KUMC rules, and any applicable state or federal laws.

d. Preparing and maintaining all documentation gathered or generated during the inquiry and investigation.

e. In the case of research conducted with outside funds, taking timely and appropriate interim administrative actions to protect the funds and ensure that the purpose of the funding is carried out.

f. Notifying sponsors about the status of investigations in accordance with the applicable rules and regulations of the funding entity.

g. When required, notifying the appropriate outside entities of the outcome of an inquiry or investigation.

5. Timelines

KUMC shall respond immediately to an allegation or other evidence of possible misconduct. An inquiry must be completed within 60 calendar days of its initiation unless circumstances clearly warrant a longer period. If the inquiry takes longer than 60 days to complete, the record of the inquiry shall include documentation of the reasons for exceeding the 60-day period. Timelines for the inquiry stage of this procedure may be extended by the EVC at his or her discretion, or upon written request from the complainant or respondent to the Research Integrity Officer. The Research Integrity Officer or designee shall inform all parties when timeline extensions are made in the inquiry procedure.

An investigation shall normally be completed within 90 calendar days of its initiation. This includes conducting the investigation, preparing the report of findings, making the report available for comment by the respondent, imposing recommended sanctions, and submitting the report to funding agencies as required by regulation or statute. Extensions of investigative timelines must be authorized by the funding agency; when no funding agency is involved, timelines may be extended by the EVC at his or her discretion, or upon written request from the complainant or respondent to
the Research Integrity Officer. The Research Integrity Officer or designee shall inform all parties when timeline extensions are made in the investigation procedure.

6. Filing

Anyone having reason to believe that a faculty or staff member has violated KUMC's policy governing research or scientific misconduct should immediately report the matter to the Research Integrity Officer or the KUMC Compliance Hotline. This report is assumed to be a "good faith allegation." An inquiry may also be initiated by the Research Integrity Officer in response to the following: Compliance Committee proceedings; notifications from school deans, department chairs or center directors; direct observations of the research record in which potential research or scientific misconduct is identified; or any information which is sufficiently credible to justify such action.

7. Complaint Procedure

The procedural steps are outlined in a flow chart at end of Section III, Part 6.

a) Assessment of Allegations

Upon receipt of an allegation, the Research Integrity Officer shall immediately assess the allegations in order to determine whether there is sufficient evidence to warrant an inquiry, whether U.S. Public Health Service (PHS) support or applications for funding are involved, and whether the allegation falls under the PHS definition of scientific misconduct.

b) Sequestration of Records

After determining that an allegation falls within the definition of misconduct in science and involves PHS funding, the Research Integrity Officer must ensure that all original research records and materials relevant to the allegation are immediately secured. The Research Integrity Officer may consult with the Office of Research Integrity (ORI) in the U.S. Department of Health and Human Services for advice and assistance in this regard.

c) Whistleblower Protection

Institutional representatives who receive or learn of an allegation of scientific misconduct will treat the whistleblower with fairness and respect, and when the allegation has been made in good faith, will take reasonable steps to protect the position and reputation of the whistleblower and other individuals who cooperate with the institution against retaliation. Employees will immediately report any alleged or apparent retaliation to the Research Integrity Officer.

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d) **Respondent Protection**

Institutional employees who receive or learn of an allegation of scientific misconduct will treat the respondent with fairness and respect and will take reasonable steps to ensure that the safeguards in 42 CFR Part 50, Subpart A, and these procedures are followed. Employees will report significant deviations from these instructions to the Research Integrity Officer. The Research Integrity Officer will report any allegation not made in good faith to the Deciding Official for appropriate action.

e) **Inquiry Process**

i. The respondent will be informed that an inquiry has been initiated within five working days after the inquiry has begun.

ii. The Research Integrity Officer or a duly appointed designee shall conduct the inquiry. The services of other individuals and entities may be utilized in order to make a complete inquiry as to whether evidence exists that would warrant an investigation. The inquiry must be completed within 60 calendar days of its initiation unless circumstances clearly warrant a longer period.

iii. The Research Integrity Officer or designee shall prepare a written report stating what evidence was reviewed, summarizing relevant interviews, and including any conclusions reached as a result of the inquiry. The respondent shall be given a copy of the inquiry report. If the respondent chooses to comment on the report, he or she must submit a written response to the Research Integrity Officer within five working days after receiving the report in order for it to be made a part of the record. If it is determined that an investigation is needed, the Research Integrity Officer shall notify the Executive Vice Chancellor, appropriate funding agencies, KUMC Legal Counsel, and the appropriate dean and department chair or center director before proceeding to the investigation procedure.

f) **Investigation**

i. **Notification of Investigation.** The EVC or designee shall notify the respondent in writing that an investigation is being commenced. The notice shall indicate upon what grounds the determination was made and will include a copy of any applicable policies or procedures. Investigations will be initiated within 30 calendar days after completion of the inquiry report.
ii. **Investigation Process.** The investigation shall be conducted by the Research Integrity Officer or duly appointed designee. The Research Integrity Office may convene a committee to assist in the investigative process, depending on the nature of the issue and the expertise base required to capably evaluate the allegations.

iii. **Investigative Committee.** Should an investigative committee be convened, it shall have no less than three members, at least one of whom is a faculty member in the same discipline as the respondent (in the case of faculty members), a staff member whose discipline and job responsibilities are substantially similar to those of the respondent (in the case of staff members), or a student or resident (in the case of students or residents). Committee members shall be selected for their expertise, their ability to ensure fairness throughout all phases of the investigation, and a lack of unresolved conflicts of interest. All individuals involved in conducting the investigation shall ensure fairness and protect the rights of all parties to the greatest extent possible.

iv. **Examination of Documentation.** The investigation normally will include examination of all documentation, including but not necessarily limited to relevant research data and proposals, publications, correspondence, and memoranda of telephone calls. Whenever possible, interviews will be conducted of all individuals involved either in making the allegation or against whom the allegation is made, as well as other individuals who might have information regarding key aspects of the allegations.

v. **Witness Interviews.** All witness interviews shall be recorded during the course of the investigation, and transcripts of recorded testimony shall be made when deemed appropriate by the Research Integrity Officer.

vi. **Representation.** The respondent may be accompanied by advisor of his or her own choosing. That person may advise the respondent but may not question witnesses or otherwise take part in the proceedings. The respondent may submit questions to the Research Integrity Officer.

vii. **Testimony.** As far as reasonably possible, witnesses shall be allowed to give narrative testimony but shall answer specific questions from the Research Integrity Officer, designee, or committee member.

viii. **Written Report.** Upon completion of the investigation, the Research Integrity Officer or designee shall prepare a written report stating what evidence was reviewed, summarizing relevant interviews, and including...
any conclusions reached as a result of the investigation. A finding of
federally reportable misconduct in research or scholarship requires that
(a) there be a significant departure from accepted practices of the
relevant research community; (b) the misconduct be committed
intentionally, knowingly or recklessly; and (c) the allegation be
established by a preponderance of the evidence. The investigative
report shall also recommend an administrative response, which may
include sanctions, corrective actions or other institutional measures. The
respondent shall be given a copy of the investigative report. If the
respondent chooses to comment on the report within five working days
after receiving it, his or her comments shall be made a part of the record.
The report shall be provided to the Vice Chancellor for Research,
appropriate funding agencies, KUMC General Counsel, and the
appropriate dean and department chair or center director.

ix. **Administrative Response.** Within 15 calendar days after receiving the
investigative report, the Vice Chancellor for Research or designee shall
serve as the institution’s Deciding Official and shall render a written
decision regarding the recommended administrative response(s). The
Vice Chancellor for Research shall either accept all recommendations
(with or without modification) or reject the recommendations and instruct
the Research Integrity Officer to meet with appropriate institutional
officials to consider different administrative responses.

x. **Sanctions.** Sanctions for findings of research or scientific misconduct
shall be based on the seriousness of the misconduct, including but not
limited to the degree to which the misconduct: (a) was intentional,
knowing or reckless; (b) was an isolated event or part of a pattern; and
(c) had significant impact on the research record, research subjects,
other researchers, institutions or the public welfare. The range of
sanctions includes termination, expulsion, suspension, leave without pay,
letters of reprimand, and suspension or termination of an active award.

xi. **Criminal or Civil Violations.** In the case of criminal or civil fraud
violations, the EVC or designee shall ensure that the matter is referred
promptly to the Department of Justice, the Inspector General for the
funding agency, or other appropriate body.

xii. **Appeal and Adjudication of Corrective Actions and Non-Punitive
Measures.** If the administrative response results only in the imposition of
corrective actions or non-punitive measures, the decision of the EVC or
designee shall be final.

g) Adjudication Procedure
If the administrative response results in a proposed punitive sanction such as
termination or other adverse change in the respondent’s terms and
conditions of employment, the respondent may appeal the decision through
the appropriate procedure contained in Section III, Part 6J of this handbook.

h) Institutional Notification of the Funding Agency
KUMC is required to notify the funding agency (or agencies in some cases)
of an allegation of research misconduct when (a) it involves federally funded
research or a proposal for federal funding and meets the federal definition of
research misconduct [see Section IX, Part E]; and (b) if the institution’s
inquiry determines there is sufficient evidence to proceed to an investigation.
Upon completion of the investigation, the Research Integrity Officer will
forward to the appropriate funding agency a copy of the evidentiary record,
the investigative report, and recommendations made to the institution’s
adjudicating official, and the subject’s written response to the
recommendations, if any.

Upon completion of the adjudication phase, the Research Integrity
Officer will forward the Deciding Official’s decision and notify the agency of
any corrective actions taken or planned. At any time during an inquiry or
investigation, the Research Integrity Officer will immediately notify the federal
agency if any of the following conditions exist:

i. Public health or safety is at risk.

ii. Agency resources or interests are threatened.

iii. Research activities should be suspended.

iv. There is reasonable indication of possible violations of civil or
criminal law.

v. Federal action is required to protect the interests of those
involved in the investigation.

vi. KUMC believes the inquiry or investigation may be made public
prematurely and needs to take appropriate steps to safeguard
evidence and protect the rights of those involved.

vii. The research community or public should be informed.
When more than one agency is involved, a lead agency may be designated to coordinate responses to allegations of research misconduct; however, each agency is empowered to implement administrative actions in accordance with applicable laws, regulations, policies or contractual procedures.

i) Records Management
The Research Integrity Officer is delegated responsibility for preparing and maintaining all documentation gathered or generated during the inquiry and investigation. Documentation of an inquiry that was not followed by an investigation shall be sufficiently detailed to permit a later assessment of the reasons for determining that an investigation was not warranted. All records shall be maintained in a secure manner for a period of at least three years after termination of the inquiry.

j) Changes and Amendments to This Procedure
Changes in the complaint procedure governing research and scientific misconduct are made by the Research Integrity Officer in consultation with the EVC and will generally occur in response to shifts in federal or state regulatory requirements, to changes in institutional policy, or to developments in the field of responsible research conduct.

G. Discrimination Complaint
1. General Principles
The University of Kansas Medical Center is committed to resolving complaints of illegal discrimination at the earliest and most informal level, conducting internal investigations in a timely and effective manner, adhering to the principles of due process in all investigations and hearings, and providing prompt corrective action if discrimination is found to have occurred.

The Equal Opportunity Office is available to answer questions or provide advice regarding equal opportunity-affirmative action issues or concerns to faculty, staff, residents and students, regardless of whether or not they wish to file a complaint.

The University reserves the right to modify and/or amend the procedures outlined herein at any time. In the event the University determines that circumstances warrant modification/amendment of any part of these procedures, timely notice shall be delivered in writing to all relevant and affected parties.
2. Pre-Complaint Resolution Strategies

Individuals are urged to first bring their concerns to the person responsible for the behavior or action. In many cases, individuals will take self-corrective measures when they become aware of how their actions or behaviors are being received. The matter may be concluded by mutual consent at this point. However, the University recognizes that such a strategy may be inappropriate or ill-advised, especially when the conduct is severe, or when the person responsible for the behavior holds a position of authority.

Supervisors, unit heads, department chairs and others in leadership are responsible for ensuring nondiscrimination in the employment and academic environment. Therefore, individuals are encouraged to bring concerns to those individuals if discussions with the person responsible for the behavior or action are unsuccessful or ill-advised. Supervisors and chairs are required to utilize the expertise of the Equal Opportunity Office when handling such matters and are expected to maintain documentation sufficient to demonstrate a timely, appropriate and adequate response. If satisfactory resolution does not occur, the individual may file a complaint with the Equal Opportunity Office (EOO).

3. Purpose and Jurisdiction of the Discrimination Complaint Procedure

This procedure is restricted to complaints that allege differential treatment on the basis of race, color, creed, religion, ancestry, national origin, sex (including sexual harassment or pregnancy discrimination), sexual orientation, age, disability (including failure to provide reasonable accommodation), status as a disabled veteran or Vietnam-era veteran, or harassment based on protected class including race, color, sexual orientation, age and religion. Aggrieved parties are referred to as complainants. Persons alleged to have engaged in illegal discrimination are referred to as respondents. This procedure is internal to the University and applies to incidents that take place at the University and its affiliated off-site locations or are related to University operations. Individuals who may use this procedure include, but are not limited to, students; regular and research faculty, including those with visiting appointments; teaching or research assistants; research associates; residents and fellows; classified and unclassified employees; University administrators; and users of University services.
4. Responsibility for Implementation

The Executive Vice Chancellor delegates to the Director of the Equal Opportunity Office overall responsibility for assuring University compliance with nondiscrimination laws, receiving and investigating internal allegations of discrimination, and maintaining an effective and impartial complaint investigation process. The Executive Vice Chancellor has the authority to appoint an alternate investigator at his discretion and as circumstances require.

5. Timelines

The date upon which a complaint is received shall be referred to as the case filing date. Time limits set forth in these procedures may be extended by the EOO Director, at his or her discretion, or upon written request from the complainant, respondent or the unit head. The director shall inform the parties when extensions of the time limits are made.

6. Filing

To facilitate resolution or investigation, complaints should be brought forward within 30 days or as soon as possible after the alleged act of discrimination.

7. Complaint Procedure

The procedural steps are outlined in a flow chart at end of Section III, Part 6.

a) Filing of Complaint

Discrimination complaints shall be filed with the EOO. The written complaint must be signed by the complainant, identify the respondent(s), fully describe the alleged act(s) of discrimination, and authorize the EOO to proceed with an investigation.

b) Jurisdiction Decision

Within 15 working days of receiving the complaint, the EOO will determine whether issues raised in the complaint fall within the purview of these procedures. The complainant will be notified in writing if the complaint is not within EOO jurisdiction and will be provided with recommendations for other options to address the issue. No appeal may be made internally of this determination. If the complaint falls within the purview of these procedures, the EOO will meet with the complainant to discuss the investigative process and obtain additional information necessary for the investigation.
c) Informal Resolution
The complainant may issue written authorization for the EOO to attempt informal resolution at any time during the process. Such attempts will focus on resolving the dispute, managing the conflict, and non-punitive counseling.

d) Preliminary Assessment of Allegations
Upon determining that a complaint falls within its jurisdiction, the EOO may conduct an initial fact-finding to determine whether the allegations warrant an investigation. The complainant will be notified in writing if an investigation is not warranted. No appeal may be made internally of this determination.

e) Investigative Process
The EOO will take the following steps:

i. Schedule a meeting with the respondent(s) to discuss allegations raised in the complaint, provide a copy of these procedures, and discuss the complaint process. When appropriate, the EOO may provide a written request for information, and establish a deadline for receiving the respondent’s written response to the information request. Refusal to answer a charge or participate in the proceedings will not prevent the investigation from occurring and may result in the investigation proceeding solely on the basis of complainant testimony and evidence.

ii. Provide notice of the complaint to the appropriate unit head(s).

iii. Consult with individuals who have direct knowledge of the alleged incidents and/or who are in a position to gather or generate information relevant to the allegations, and prepare a written investigative report within 45 working days after determining jurisdiction.

iv. Review the report with appropriate University officials and, when justified by the findings, initiate discussions with appropriate individuals regarding the development of an administrative response.

v. Within five working days after the administrative review, provide the complainant, respondent and dean or vice chancellor with a written investigative summary and findings.
f) Determination of Disciplinary Action

i. Students. Each school administers its own student conduct system and determines any disciplinary actions against students that might arise from a complaint of student misconduct. Procedures are detailed in the Student Handbook.

ii. Employees, Faculty and Residents. Deans, vice chancellors or their designees are responsible for identifying an appropriate administrative response including non-punitive corrective measures and, in consultation with the appropriate human resource department, disciplinary actions. Disciplinary actions to be considered will vary in type, intensity and duration, depending on the specifics of each case. All disciplinary action, with the exception of termination or dismissal, may include mandatory training sessions.

iii. Appeal of Disciplinary Action. Should the administrative response result in disciplinary action for the respondent, he or she may seek review of the action through appropriate internal appeal procedures as provided in this handbook, the Graduate Medical Education Handbook for Residents, the House Staff Manual, applicable union contract, State Civil Service Procedures, or the Student Handbook.

g) Complaint Initiated by Administration

The Executive Vice Chancellor, vice chancellors, deans, directors, supervisors or chairs, if given sufficient cause, may request that the EOO conduct an investigation. The administrator requesting the investigation will act as complainant and must specify the persons who are alleged to be the recipients of the questionable conduct. The EOO will use the same notification and process guidelines outlined in the discrimination complaint procedure. The administrator initiating the complaint will not be involved in developing the administrative response and/or corrective action.

h) Records Management

The EOO shall maintain all records for complaints filed pursuant to these procedures, including the complaint, the response, and investigative summaries, materials considered in the course of the investigation, the administrative response, and any documentation confirming that administrative actions were taken. Records shall be retained in the EOO or in archived files for at least five years.
i) Filing a False Complaint or Retaliating Against Participants in the Complaint Process

Retaliating against participants in these proceedings is prohibited. The EOO will use the same notification and process guidelines outlined in the discrimination complaint procedure for claims of retaliation. Similarly, filing a false complaint in the absence of good faith is considered to be serious misconduct that is subject to sanction, including disciplinary action that shall be determined in conformance with the Determination of Disciplinary Action procedures.

j) Alternative Complaint Procedures

i. Internal. The complainant must use the EOO complaint procedure for processing an internal claim of illegal discrimination unless another procedure is specifically required or permitted by union contract. Should the complainant elect to use any other internal grievance procedure, he or she may not use the procedure operated by the EOO for the same complaint.

ii. External. A person who believes that he or she has been the subject of discrimination prohibited by state or federal law may contact one of the following agencies for advice, assistance, and explanation of filing deadlines:

a) Equal Employment Opportunity Commission
   (for employment matters only)
   400 State Avenue, Suite 905
   Kansas City, KS 66101

b) Kansas Human Rights Commission
   Landon Building 900 SW Jackson, Suite 851
   South Topeka, KS 66603

c) Office for Civil Rights
   10220 NW Executive Hills Blvd.
   Kansas City, MO 64153
H. Academic Freedom Complaint Procedure

1. General Principles

The University of Kansas has a long tradition of dedication to the principles of academic freedom and has sought to implement these principles as they are embodied in the 1940 Statement of Principles on Academic Freedom and Tenure of the American Association of University Professors and the American Association of Colleges. As outlined in the AAUP policy, academic freedom affords faculty an important right in fulfilling their teaching obligation: freedom in the classroom in discussing their subject. However, the faculty “should be careful not to introduce into their teaching controversial matter which has no relation to their subject.” An important right that academic freedom affords faculty in performing their research obligation is “full freedom in research and in the publication of the results.”

While academic freedom affords faculty some important rights and freedoms, it should not be construed to mean that it provides protection for all actions a faculty person may chose in an effort to fulfill his or her academic responsibilities. For example, academic freedom does not confer the right to a faculty person to choose to perform his or her research and/or teaching obligations at the expense of other academic and/or service responsibilities. Also, as stated in a policy on academic freedom and campus disruption adopted by the Board of Regents on June 19, 1970, academic freedom does not protect a faculty person from suspension if the faculty person engaged in activities deliberately designed to, and which did, disrupt the normal ordinary process of education and training offered at the University. KUMC recognizes that rights a faculty person may think are afforded him or her by academic freedom may be open for interpretation. Accordingly, KUMC is committed to resolve at the earliest and most informal level complaints by a faculty person or faculty group that academic freedom has been infringed.

2. Resolution Strategies

Individuals are urged to first seek remedy to their complaint at the level of their immediate supervisor (e.g., chairperson) as outlined in the Complaint Procedure section below. The complaint should be brought to their supervisor’s superior (e.g., dean of the respective school) if the supervisor is the person alleged to have violated the faculty member’s academic freedom. The Vice Chancellor for Academic Affairs may be consulted to resolve confusion as to where the initial complaint should be filed. The initial resolution attempt may resolve the matter. However, the University recognizes that such a resolution attempt may fail for a variety of reasons, including
(a) the parties cannot agree as to whether or not academic freedom has been infringed; (b) the parties agree that academic freedom has been infringed but do not agree as to the remedy; and (c) the supervisor does not have the authority to enforce an agreed-upon remedy. When the initial resolution attempt fails, an appeal can be made to the Vice Chancellor for Academic Affairs as outlined in the Complaint Procedure section below.

3. Purpose and Jurisdiction of the Academic Freedom Complaint Procedure

The procedure is restricted to complaints that allege that a faculty person’s (or faculty group’s) academic freedom has been infringed by some single act or combination of acts of the University and/or University faculty person or faculty group. The procedure is internal to the University and applies to incidents that take place at the University and its affiliated off-site locations or are related to University operations. Individuals who may use this procedure include all individuals with faculty appointments (tenured, non-tenured, clinical, research). Aggrieved parties are referred to as complainants. Persons alleged to have infringed on the academic freedom of the complainants are referred to as respondents.

4. Responsibility for Implementation

The Executive Vice Chancellor has the responsibility for assuring University compliance with protections afforded to University faculty by academic freedom.

5. Timelines

The date upon which a written complaint is received by the complainant’s supervisor (or supervisor’s superior when appropriate) shall be referred to as the case filing date. Time limits set forth in these procedures may be extended by the Vice Chancellor for Academic Affairs, at his or her discretion, or upon written request to the Vice Chancellor for Academic Affairs from the complainant, respondent, or the supervisor (or supervisor’s superior when appropriate). The Vice Chancellor for Academic Affairs shall inform the parties when extensions of the time limits are made.

6. Filing

If a single event is the cause, then the complaint should be filed within 30 days of the event alleged to infringe academic freedom. If the complaint was precipitated by a series of events over a period of days, months or years when viewed in culmination, then the complaint should be filed within 30 days of the last in the series of events.
7. Complaint Procedure

The procedural steps are outlined in a flow chart at end of Section III, Part 6.

a) Details of Complaint Procedure

i. The complainant(s) files a written complaint with his or her (their) immediate supervisor(s), or the supervisor’s superior when appropriate. This written complaint must be filed within 30 days of the initiating event(s). When a series of events over days, months or years leads to a complaint, the complaint should be filed within 30 days of the last in the series of events. The written complaint must detail:

   (a) the time and date of the event(s) that caused the complaint;
   
   (b) the reason why the event is viewed by the complainant(s) as an infringement of academic freedom;
   
   (c) the respondent (person(s) or group) that committed the alleged violation; and
   
   (d) the proposed remedy.

ii. Upon receipt of the complaint, the supervisor(s) (or the supervisor’s superior) will respond in writing to the complainant(s) acknowledging the time and date he or she received the complaint and inform the respondent in writing as to his or her involvement in a complaint concerning alleged violation of academic freedom.

iii. The supervisor(s) (or the supervisor’s superior) will investigate the complaint. This investigation and related responses are to be completed within 15 days of receipt of the complaint. As part of this investigation, the supervisor(s) (or the supervisor’s superior) will:

   a) meet with the complainant(s) and respondent(s) to discuss the complaint and proposed remedy; and
   
   b) make an earnest attempt to reach a resolution agreeable to all parties.

iv. If an agreement is reached, a written agreement detailing the resolution will be signed by the complainant(s) and supervisor(s)
(or the supervisor’s superior) with copies given to all involved parties to the resolution.

v. If a mutual resolution is not reached, the supervisor(s) (or the supervisor’s superior) will respond in writing to the complainant(s). The response must contain, as a minimum, the following information:
   a) whether or not he or she agrees that the complainant(s) has alleged a valid complaint which involves academic freedom;
   b) the steps that were taken to reach a resolution; and
   c) details as to why a mutually agreeable resolution was not accomplished.

b. If the above-mentioned resolution attempt fails, the complainants(s) may request in writing that the Vice Chancellor for Academic Affairs investigate the complaint and seek a resolution. This request must be presented to the Vice Chancellor for Academic Affairs within six months of the complaint filing date [see Timeline above]. In the request, the complainant(s) must document that he or she (they) has (have) attempted, in good faith, to resolve the complaint at the appropriate administrative level. At a minimum, this documentation must include:
   i. a copy of the original written complaint;
   ii. the written response of the supervisor(s) indicating time and date of receipt of the complaint (i.e., filing date);
   iii. details as to time and date of previous meetings to discuss complaint and seek resolution;
   iv. the complainant’s opinion as to why the resolution attempt failed;
      and the written response of the supervisor(s) (or the supervisor’s superior) detailing why the resolution attempt failed.

c. The Vice Chancellor for Academic Affairs will investigate complaints, interview parties, secure documents and seek a conciliatory solution. If the Vice Chancellor for Academic Affairs determines that there is probably cause to believe that academic freedom is an issue, an attempt at a mutually agreeable remedy will be sought. If the complainant(s) and the Vice Chancellor for Academic Affairs cannot agree on whether or not academic freedom is an issue or if they agree but fail at resolution, the Vice Chancellor for Academic Affairs and the
complainant(s) shall meet with the Faculty Assembly Steering Committee to state their views.

d. The Steering Committee will have four weeks to decide if there is reasonable evidence that academic freedom is an issue. If the Steering Committee decides that academic freedom is not an issue, there will be no additional appeal or hearing possible.

e. If the Steering Committee decides that there is reasonable evidence that academic freedom is an issue, and then an Ad Hoc Hearing Committee (link to table in Appeals and Grievances section) will be established within two weeks. Establishment of the Ad Hoc Hearing Committee shall not preclude continued effort to seek a conciliatory solution (rev. 6/99).

f. The Ad Hoc Hearing Committee will conduct hearings and gather the information needed in order for the committee members to reach decisions related to two issues: first, whether or not the academic freedom of the complainant(s) has been infringed as alleged; and second, the remedy, which need not be agreeable to the complainant(s) or the respondent(s). This committee will act in accordance with the Guidelines for Ad Hoc Hearing Committee. The hearing proceedings shall be completed within 16 weeks from the date on which the Ad Hoc Hearing Committee was established. The committee shall render its recommendations to the Vice Chancellor for Academic Affairs within two weeks from the date on which the hearing of evidence has been completed. The committee’s recommendation shall be forwarded to the Executive Vice Chancellor as well as to the complainant(s).

g. The Executive Vice Chancellor shall report his or her decision regarding the matter within two weeks to the chair of the Steering Committee and the Vice Chancellor for Academic Affairs. The Vice Chancellor for Academic Affairs will report the Executive Vice Chancellor’s decision to the complainant(s) and their supervisor(s).

8. Records Management

The Executive Vice Chancellor shall maintain all records for complaints filed pursuant to these procedures, including the complaint, the response, investigative summaries, materials considered in the course of the investigation, the administrative response, and any documentation which confirms that administrative actions were taken.
Records shall be retained in the Executive Vice Chancellor’s Office or in archived files for at least five years.

9. Changes and Amendments to Policy and Procedures

Policy and/or procedural changes and amendments to this process shall be made jointly by the Faculty Assembly Steering Committee, the Vice Chancellor for Academic Affairs and the Executive Vice Chancellor.

I. Promotion and Tenure Appeal Procedure

1. General Principles

The University of Kansas Medical Center is committed to ensuring that proper procedures are followed in reaching a decision to promote and/or award tenure to a faculty person. Accordingly, procedures related to the promotion and tenure decision process exist at three levels in relation to a faculty person’s appointment: (a) department affiliation, (b) school affiliation, and (c) the University. While it is expected that appropriate procedures for reviewing a faculty person’s academic and scholarly performance will be utilized in the decision process, it is recognized that this may not always occur. Accordingly, a faculty member who asserts that a decision to deny promotion or tenure has been made in violation of established procedures of the University, the school or the department is entitled to appeal.

2. Resolution Strategies

There are no informal resolution strategies available for an aggrieved faculty person to attempt reversal of his or her school’s decision to deny the aggrieved faculty person either promotion and/or tenure. Rather, the Medical Center Hearing Committee on Promotion and Tenure will become involved once an aggrieved faculty files his or her written appeal of his or her school’s decision [see Complaint Procedure Section below].

3. Purpose and Jurisdiction of the Promotion and Tenure Appeal Procedure

The procedure is restricted to appeals based only on the grounds that proper procedures were not followed in the decision-making process that resulted in a dean’s recommendation that promotion and/or tenure be denied a faculty person. The improper procedure may have occurred at the level of the aggrieved faculty person’s affiliation with his or her department, school, or dean. Improper procedure may include, but need not be limited to, (a) failure by a department and/or school to follow its guidelines related to the review of a faculty person’s academic and/or scholarly performance for promotion and/or tenure purposes, (b) failure by a department and/or school to afford a faculty person full opportunity for academic review, and (c) arbitrary
and capricious actions during the review process that could have contributed to the negative outcome in the decision-making process. Individuals who may use this procedure include all individuals with faculty appointments (tenure, non-tenured, clinical, research). The aggrieved faculty person is referred to as the appellant. There is no respondent since this procedure constitutes a review that proper procedure was followed in the decision-making process and not that the appellant was harmed directly by an identifiable faculty person or faculty group.

4. Responsibility for Implementation
The Executive Vice Chancellor has the responsibility for assuring compliance by KUMC with protections afforded faculty in the review of academic and scholarly performance for the purpose of awarding a promotion and/or tenure.

5. Timelines
The date upon which a written appeal from the appellant is received by the Office of the Vice Chancellor for Academic Affairs shall be referred to as the case filing date. Time limits set forth in these procedures may be extended by the Vice Chancellor for Academic Affairs at his or her discretion. The Vice Chancellor for Academic Affairs shall inform the parties when extensions of the time limits are made.

6. Filing
The appellant must file his or her written appeal with the Office of the Vice Chancellor for Academic Affairs within two weeks of the date of receipt of written notification from his or her dean informing the appellant that his or her promotion and/or award of tenure is denied.

7. Appeal Procedure
The procedural steps are outlined in a flow chart at end of Section III, Part 6 [see also the Proposed Faculty Appeal and Grievance Committees Chart in Appendix C].

a) Details of Appeal Procedure
   i. The appellant files a written appeal with the Office of the Vice Chancellor for Academic Affairs. This appeal must be filed within two weeks of receipt of written notification by his or her dean informing the appellant that promotion and/or award of tenure will be denied. The following must be included:
      a) A copy of the dean’s or dean’s designate letter to the appellant.
      b) Written school guidelines for promotion and tenure related to the appellant.
c) Written department guidelines for promotion and tenure related to the appellant.

d) Copies of letters written by the department to the appellant regarding decisions related to the appellant's proposed promotion and tenure.

e) The appellant's curriculum vitae.

ii. Since the appeal must be based on the grounds that proper procedures were not followed in the decision making process that resulted in a dean's recommendation that promotion and/or tenure be denied, the appellant must also detail the procedures that were not followed properly in the decision-making process and/or why he or she was not afforded full opportunity for academic review. Regarding procedural issues and opportunities for academic review related to promotion and/or tenure decisions, the appellant may consult the following policies or documents to access information:

a) Guidelines and Criteria for Tenure, Promotion and Appeals
b) School-based Promotion and Tenure Criteria.

c) Department-based Promotion and Tenure Criteria
d) Comprehensive Mid-Cycle Review of Tenure-Track Appointees

iii. Upon receipt of the appeal, the Vice Chancellor for Academic Affairs will establish in a timely manner the Medical Center Hearing Committee on Promotion and Tenure. In addition, the Vice Chancellor for Academic Affairs shall forward the promotion file to the committee for consideration. The recommendation of both the school committee and the dean shall be forwarded to the committee. Material may be added to the file by the faculty member involved or by others at any time prior to or during review by the committee.

iv. The Medical Center Hearing Committee on Promotion and Tenure will act within the Guidelines for The Medical Center Hearing Committee on Promotion and Tenure. The committee will review in a timely manner the promotion file and related decisions. The principal charge of this committee is to review procedural issues at the department and school level to determine if the faculty
member was afforded full opportunity for academic review and that there was no arbitrary and capricious action on the part of any component of the school's review process.

v. The Medical Center Hearing Committee on Promotion and Tenure shall make its recommendation to the Executive Vice Chancellor. The Executive Vice Chancellor will respond in writing to the recommendation of the Medical Center Hearing Committee on Promotion and Tenure documenting the reasons for agreeing or disagreeing. This response will be sent to the chair of the Medical Center Hearing Committee on Promotion and Tenure, the appellant's dean and chairperson, and the appellant.

b) Records Management

The Vice Chancellor for Academic Affairs shall maintain all records for appeals filed pursuant to these procedures, including the appeal, the response, investigative summaries, materials considered in the course of the investigation, the administrative response, and any documentation that confirms administrative actions were taken. Records shall be retained in the Vice Chancellor for Academic Affairs' Office or in archived files for at least five years.

c) Changes and Amendments to Procedure

Changes and amendments to this process shall be made jointly by the Faculty Assembly Steering Committee, the Vice Chancellor for Academic Affairs and the Executive Vice Chancellor.

J. Dismissal Appeal Procedure

1. General Principles

This procedure shall be used when termination of the continuous appointment of a tenured faculty person or termination of a probationary faculty person occurs before the end of his or her specified term appointment [see the Proposed Faculty Appeal and Grievance Committees Chart in Appendix C].

Circumstances that might result in a recommendation for dismissal or termination include, but are not be limited to, the following:

a) A for-cause disciplinary sanction arising from research, scientific or personal misconduct, or illegal discrimination.

b) Demonstrated, sustained failure on the part of a faculty person to meet his or her academic and/or teaching responsibilities.
2. Resolution Strategies

There are no informal resolution procedures to reverse a decision for premature dismissal. Questions concerning faculty appeal rights should be addressed to the Vice Chancellor for Academic Affairs.

3. Purpose and Jurisdiction of the Dismissal Appeal Procedure

The procedure is restricted to appeals based on the following grounds: (a) that the Executive Vice Chancellor had no reasonable basis in fact for selecting the appellant for dismissal, (b) that improper procedures were followed in dismissing the appellant, or (c) the selection of the appellant was based on age or on constitutionally impermissible reasons. Individuals who may use this procedure include all tenured faculty, probationary faculty whose dismissal will occur before the end of their term appointment, and faculty members released or relocated under financial exigency who claim that their reinstatement rights during Emergence from Financial Exigency have been infringed.

Regarding procedural issues related to dismissal, the appellant may use the following links to access information related to the following subjects.

a. Scientific misconduct.

b. Personal misconduct.

c. Illegal Discrimination.

d. Demonstrated, sustained failure to meet academic responsibilities.

4. Burden of Proof

The faculty member shall bear the burden of proof in appeals under this procedure.

5. Access to Information

The faculty member shall have access to all relevant information in the possession of the administration to aid in preparing his or her case in an appeal based on any of the three grounds.

6. Responsibility for Implementation

The Executive Vice Chancellor is responsible for ensuring that faculty are protected against arbitrary or capricious actions that result in dismissal or termination or suspension without pay and for providing an appropriate appeal mechanism.
7. Timelines
The date upon which a written appeal from the appellant is received by the Office of the Executive Vice Chancellor shall be referred to as the case filing date. Time limits set forth in these procedures may be extended by the Executive Vice Chancellor, at his or her discretion, or upon written request to the Executive Vice Chancellor from the appellant. The Executive Vice Chancellor shall inform the parties when extensions of the time limits are made.

8. Filing
The appellant must file a written appeal with the Executive Vice Chancellor within 30 working days after being notified of their termination.

9. Appeal Procedure
The procedural steps are outlined in a flow chart at end of Section III, Part 6 [see also the Proposed Faculty Appeal and Grievance Committees Chart in Appendix C].

a) Details of Appeal Procedure
The appellant must file a written appeal with the Office of The Executive Vice Chancellor within 30 working days after receiving written notification of proposed dismissal or suspension without pay. The appeal must include the basis for the appeal [see Section III, Part 6 of this handbook] and provide information that supports that basis. For example, if an appeal is based on procedural violations, the appellant must explain what procedures were applied and why they were improper.

i. Upon receipt of the appeal, the Executive Vice Chancellor shall inform the Vice Chancellor for Academic Affairs that an appeal has been filed. The Vice Chancellor for Academic Affairs will establish in a timely manner an Ad Hoc Hearing Committee.

ii. The Ad Hoc Hearing Committee will afford the appellant a hearing within 30 working days of the filing date of the appeal [see Timelines above]. Testimony and other evidence shall be taken in accordance Guidelines for Ad Hoc Hearing Committee.

iii. After receiving testimony and other evidence, the Ad Hoc Hearing Committee shall make its determination as to the validity of the appellant’s claims. The proceedings of the committee will be completed within 16 weeks from the date the Ad Hoc Appeals
Committee was established. The committee shall then issue within two weeks from the date on which the hearing of evidence was completed a written opinion to the Vice Chancellor for Academic Affairs delineating its decision, the reasons therefore, and its recommendation for disposition. Copies shall be sent to the appellant and to the Executive Vice Chancellor.

iv. Within 14 working days from receipt of the Ad Hoc Hearing Committee’s decision and recommendation, the Executive Vice Chancellor shall respond in writing to the recommendations of the committee documenting the reasons for agreeing or disagreeing. This response will be sent to the Vice Chancellor for Academic Affairs, the chairperson of the Ad Hoc Hearing Committee and the appellant. It is understood that the final administrative authority resides with the Executive Vice Chancellor, who is the appointed representative of the Board of Regents.

b) Records Management

The Executive Vice Chancellor shall maintain all records for appeals filed pursuant to these procedures, including the appeal, the response, investigative summaries, materials considered in the course of the investigation, the administrative response, and any documentation which confirms that administrative actions were taken. Records shall be retained in the Executive Vice Chancellor’s Office or in archived files for at least five years.

c) Changes and Amendments to Policy and Procedures

Policy and/or procedural changes and amendments to this process shall be made jointly by the Faculty Assembly Steering Committee, the Vice Chancellor for Academic Affairs, and the Executive Vice Chancellor.
Allegation of misconduct filed with Vice Chancellor for Academic Affairs (VCAA).

VCAA initiates **INQUIRY**

VCAA or designee conducts inquiry, decides whether or not an investigation is warranted, files written report. Notifies Steering Committee of Faculty Assembly, EVC, appropriate Dean and appropriate Department Chair or Center Director if investigation is warranted.

**INVESTIGATION** initiated if warranted.

The VCAA establishes a peer review committee that conducts investigation. The committee files written report containing recommended administrative response.

- **Executive Vice Chancellor’s decision is final if only corrective or non-punitive actions are imposed on the respondent.**
- **Respondent may appeal administrative sanction that results in dismissal or otherwise affects respondent’s terms and conditions of employment.**

**ADJUDICATION** via Dismissal Appeal Procedure
Research or Scientific Misconduct Complaint Procedure

Allegation of misconduct filed with Research Integrity Officer or KUMC Compliance Hotline.

Allegation may come from a variety of sources.

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Research Integrity Officer (ROI) initiates **INQUIRY**

ROI or designee conducts inquiry, decides whether or not an investigation is warranted, files written report, and notifies appropriate authorities

\[ \downarrow \]

**INVESTIGATION** initiated if warranted.

ROI or designee will conduct investigation. A committee may be used if warranted. Upon completion, ROI or designee files written report containing recommended administrative response.

Executive Vice Chancellors decision is final if only corrective or non-punitive actions are imposed on the respondent.

Respondent may appeal administrative sanction that results in dismissal or otherwise affects respondent’s terms and conditions of employment

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**ADJUDICATION** via Dismissal Appeal Procedure
Discrimination Complaint Procedure

Allegation of discrimination filed as a written complaint with Equal Opportunity Office (EOO). Allegation may come from a variety of sources.

EOO determines if complaint falls within the purview of these procedures

If warranted, EOO conducts initial fact finding to determine if investigation is warranted

**INVESTIGATION** initiated if warranted.

EOO conducts investigation and files written report containing recommended administrative response.

Executive Vice Chancellors decision is final

if only corrective or non-punitive actions are imposed on the respondent.

Respondent may appeal administrative sanction

that results in dismissal or otherwise affects respondent’s terms and conditions of employment

**ADJUDICATION** via Dismissal Appeal Procedure
Academic Freedom Complaint Procedure

Complainant files written complaint with immediate supervisor

Supervisor acknowledges receipt of complaint and informs respondent

Supervisor, complainant and respondent seek resolution agreeable to all parties

If resolution attempt fails, complainant may appeal to Vice Chancellor for Academic Affairs (VCAA)

VCAA investigates and seeks resolution

If unresolved, VCAA and complainant meet with Faculty Assembly Steering Committee (FASC)

AF not an issue

FASC decides if academic freedom (AF) is an issue

(AF not an issue) (no further appeal)

AF is an issue

Ad Hoc Hearing Committee is established

Attempt to reach conciliatory agreement can continue

Committee conducts hearing and sends its recommendation to VCAA and EVC

EVC reviews recommendations and reports his/her decision to Chairperson of FASC and VCAA

VCAA informs complainant and complainant's supervisor of EVC's decision
Promotion and Tenure Appeal Procedure

Appellant files written appeal with the Vice Chancellor of Academic Affairs (VCAA)

VCAA establishes The Medical Center Hearing Committee on Promotion and Tenure and forwards relevant files to the Committee

The Committee reviews the written appeal and relevant files and then sends its recommendation to the Executive Vice Chancellor (EVC)

The EVC responds in writing to the Chairperson of the Committee, the appellant’s Dean and Chairperson, and the appellant documenting his/her reasons for agreeing or disagreeing with the Committee’s recommendation.
**Dismissal Appeal Procedure**

Appellant files written appeal with Office of The Executive Vice Chancellor (EVC) detailing grounds for appeal.

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The EVC informs the Vice Chancellor of Academic Affairs (VCAA) that an appeal has been filed.

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The VCAA forms Ad Hoc Hearing Committee.

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Ad Hoc Hearing Committee conducts hearing.

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Ad Hoc Hearing Committee sends written report as to its recommendations to VCAA, appellant, and EVC.

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EVC responds in writing to appellant, Chairperson of Ad Hoc Hearing Committee, and VCAA as to his/her agreement or disagreement with the Committee’s recommendation.
Unclassified Professional Staff Regulations

Unclassified professional staff members of the University are those unclassified, non-student employees who are not identified as faculty, residents or academic staff members. These staff members engage in administration, education, counseling, advising, research, and student and public service in support of the missions of the institution. In January of 1979, the Chancellor approved a statement of personnel policies and procedures for unclassified professional staff members. This statement includes policies on appointment, promotion, leave, termination and other personnel matters. The entire policies and procedures statement as amended (modified 10/2011) appears below.

1. Initial Employment

Unclassified Professional Staff members shall be selected and appointed in accordance with prevailing policies within the University and the particular department, school, division, or unit; such policies shall include those on appropriate search, interview, and review. The terms and conditions of each initial appointment must be stated in writing, approved by the appropriate Vice Chancellor, Dean, Chair or Department Head or his/her designated representative, and communicated to the prospective appointee for written acceptance before the appointment is consummated. Pursuant to authorization by Kansas Board of Regents policy, all initial appointments shall provide that the Unclassified Professional Staff member shall serve at the pleasure of the Executive Vice Chancellor for the initial six months of the first annual appointment. (modified 12/05/06)

2. Titles

Titles for unclassified professional staff members reflect the responsibilities and qualifications of the positions and individuals covered under this policy. These titles are selected and approved by the appropriate Department Head, Dean or Vice Chancellor (modified 10/2011) from those titles available to and approved for use by the University. If the staff member also holds a regular faculty or unclassified academic staff appointment, faculty or unclassified academic staff policies and procedures will apply.

3. Terms of Employment

Annual salaries of Unclassified Professional Staff employees are always subject to limitations on funding, such as legislative and executive mandated reductions. These limitations apply to all funding sources including but not limited to: state appropriations, restricted fee accounts, grant funding, and endowed funds. Further, Staff members’
4. **Performance Management**

The University recognizes the value of an active, yet informal system of managing performance and achievements of unclassified professional staff members. No formal regular “performance appraisal” is required. Instead, the University encourages the use of mentoring, coaching, periodic discussion, recognition and when necessary, remediation. In those rare cases when a manager identifies serious performance deficiencies, documentation of such deficiencies should be undertaken. (modified 02/06/08)

Individual departments or schools may initiate or maintain a more formal "retrospective" review process for their unclassified professional staff members after discussion with Human Resources.

5. **Professional Development**

The importance of professional development for unclassified professional staff members is recognized. Activities which may enhance such development may include conferences, workshops, and professional meetings. Under appropriate circumstances "released time" may be approved for such professional pursuits.

6. **Promotion**

Promotion of an unclassified professional staff member must be approved by the appropriate Vice Chancellor or his/her designated representative. In some areas of the University, promotion may be effected by advancement in title (e.g., from Assistant Director to Associate Director) or by advancement to a different title or position (e.g., from Research Assistant to Assistant to the Vice Chancellor). Promotion shall be made on the
basis of meritorious performance. The University shall at all times seek to attract, retain, and reward the staff member who consistently performs effectively. Promotion and the usual accompanying salary increase is an important means of acknowledging such performance. It should be awarded for achievement rather than for mere length of service or as an incentive to greater effort.

7. Reappointment, Notice of Non-Reappointment, Discipline, and Termination

a. Term of Appointment

Unclassified professional staff appointments are normally made on a year to year basis. Unless a limited term of appointment has been stated or previous notice of non-reappointment has been given, all appointments to unclassified professional staff positions will be automatically renewed on July 1 of each year. In accordance with Kansas Board of Regents policy (Section F.2.C(2)), and Medical Center Policy, the first six months of an Unclassified Professional Staff member’s initial appointment shall be “at the pleasure of” the Executive Vice Chancellor and, as such, the provisions of Subsections b. and c., below, shall not be applicable to that initial six months of employment. (modified 12/05/06)

b. Notice of Non-Reappointment

i. Upon recommendation of the Chair or Director of the appropriate school or division, and after review by the appropriate Vice Chancellor or Dean, or a designated representative, notice of non-reappointment will be sent to the holder of such appointment. Such individuals may be reassigned to other duties for the balance of the fiscal year (rev. 10/23/97). For individuals with three or more years of continuous service, notices of non-reappointment should be mailed at least three months in advance of the expiration date of the annual appointment (no later than March 31 of the year in question).

ii. Externally Supported Grants and Contracts It is recognized that the positions of some unclassified professional staff members may be funded from externally supported grants and contracts, and that termination of such support provides a bona fide cause for termination of appointment without the usual notice.

iii. Financial Exigency/Program Discontinuance or Reorientation In the event of termination because of a discontinuance or reorientation of a program, or termination at any time due to budgetary constraints, the appropriate budgetary unit will assist the affected staff member in seeking transfer to other budgetary units of the University of Kansas, or to other state agencies,
or in seeking other employment. If a state of financial exigency impends, no unclassified professional staff member should be terminated solely to create a position for a tenured faculty member.

iv. A staff member who asserts that a decision to give notice of non-reappointment constitutes a violation of established procedures of the University or of the unit should first review the proposed action with the immediate supervisor taking the action. Such review should normally be sought within 10 days of the date of notice of the proposed action. The employee may appeal the matter to the next highest level of administration if a satisfactory resolution is not reached within 10 days of the date the appeal was raised. If the matter is still unresolved after review by the second level administrator, the employee may reduce the issues to writing clearly indicating the policy or procedure that was allegedly violated by the action and providing a brief description of the facts involved. This written appeal shall be presented to the Director of Human Resources, who shall advise the employee of the remaining steps in the appeal process which will vary depending on the unit in which the person is employed.

c. Suspension, Demotion or Termination

Employees may be disciplined for either issues of performance or conduct. An unclassified staff member may be terminated, suspended without pay, or demoted because of inadequate performance of duties, disciplinary reasons, or other good cause. Generally an employee will receive the minimum disciplinary action appropriate to the misconduct or other infractions committed, taking into consideration prior history as well as the nature of the misconduct or infraction. When an instance of misconduct or poor job performance is determined to be of a serious nature, the suspension, demotion, or dismissal of an employee may occur in the absence of any prior discipline. Unclassified professional employees who are proposed for suspension without pay, involuntary demotion involving a reduction in pay, or termination shall be entitled to receive a written statement from the Director of Human Resources which sets forth the reasons for the proposed discipline. A staff member who wishes to contest or otherwise appeal the proposed discipline, shall have the right to utilize the following procedures:

i. The employee should first review the proposed discipline with the immediate supervisor proposing the action within five working days after notice of the proposed action. Efforts to resolve a proposed disciplinary action are to be made at the lowest possible reporting level and are to be appealed to higher
reporting levels only if a solution is not reached. If a satisfactory resolution is not reached within 10 working days of the date the matter was taken to the immediate supervisor, the employee may appeal the matter to the next levels of administration up to, and including, the department/unit Chair or Director. Appeals through these levels of administration should be concluded within a total of 20 working days. If there is ultimate resolution in favor of the employee, the employee shall be made whole with regard to pay and benefits.

ii. Should satisfactory resolution through the administrative levels, cited above, be unsuccessful, the employee may appeal to the Unclassified Appeals Committee. The employee shall reduce the issues to writing, clearly indicating the facts and matters which are contested. The employee's written statement shall be submitted to the employee’s immediate supervisor and to the Director of Human Resources for the Appeals Committee's consideration. The Appeals Committee shall be established by the following procedure: the employee, ("the appellant"), shall designate an unclassified professional staff member who is not from the employee's department and is willing to serve on the Appeals Committee; the employee's immediate supervisor who proposed the discipline, (the "respondent") shall designate an unclassified professional staff member who is not from the employee’s department and is willing to serve on the Appeals Committee; and the Director of Human Resources shall designate third unclassified professional staff member who is not from the employee's department, is unbiased, and is willing to serve on the Appeals Committee. The Appeals Committee member appointed by the Director shall serve as the Appeals Committee Chair and shall have the power to conduct a fair and orderly hearing and rule on questions of relevance and evidence. The Appeals Committee shall convene the hearing of the employee's appeal within 14 working days after the Appeals Committee is established. The following procedural rules shall apply to the hearing:

a) The appellant and respondent shall exchange lists of witnesses and exhibits at least three working days before the hearing.

b) Unless all parties agree that the hearing shall be public, the hearing shall be closed to all but the parties and witnesses. The records and recommendations of the Appeals Committee may refer to the type of
c) The appellant shall bear the burden of persuading the Appeals Committee that the proposed discipline is unreasonable based upon the facts presented by the parties.

d) Each party shall have the right to a full examination of the witnesses and evidence presented, including the opportunity to cross examine witnesses.

e) The hearing shall be as informal as possible. Formal rules of evidence shall not apply.

Each party may represent himself/herself or may be represented by an advisor of his/her choice. However, representation by legal counsel is not encouraged. A recording or other permanent record of the hearing proceedings shall be made by the Appeals Committee.

iii. After hearing the evidence and arguments presented, the Appeals Committee shall deliberate and decide, by majority vote, on a written recommendation which shall be forwarded to the Vice Chancellor for Administration. The recommendation shall: summarize the evidence received the basis of the factual findings reached by the Appeals Committee, and include the Appeals Committee's rationale for its recommendation. Each party to the hearing shall receive prompt written notice of the Appeals Committee's recommendation. Within five days of the recommendation's issuance, the employee may appeal and/or contest the Appeals Committee's recommendations to the Vice Chancellor for Administration. Subsequent to this appeal by the employee to the Vice Chancellor for Administration, or if no appeal is taken, the decision of the Vice Chancellor accepting or rejecting the Appeals Committee recommendation shall be implemented and shall not otherwise be appealable.

8. Resignations

Resignations should always be submitted in writing to the Chair, Dean, or Director. Such letters will be forwarded to the appropriate Vice Chancellor or his/her designated representative, who will acknowledge the resignation on behalf of the University. Unless an earlier date is requested and approved, the effective date of the resignation shall be the expiration date of the current appointment. If an earlier date is specified, the date
should be established at a time that will not cause a significant interruption of the ongoing work of the department, school, or division. The resignation should be submitted three months in advance of the requested termination date. For purposes of orderly transaction of business, a resignation should normally identify the staff member’s future location.

9. **Other Areas**

Unclassified professional staff members are afforded the same benefits as provided for all other unclassified staff, such as group and hospitalization insurance, retirement plans, group life and disability insurance, workmen’s compensation, unemployment compensation, retirement benefits, military leave and other privileges and general perquisites. These programs are explained in the body of this handbook.

**IV. APPOINTMENT TERMS AND BENEFITS**

**A. Salary Payments**

On the Medical Center campus, faculty and other unclassified professional staff receive salary checks on alternate Fridays (26 pay periods per year). Paychecks are distributed to employees through one of three methods: electronic fund transfer (EFT) to employee’s designated bank account(s), paycard or federal mail to the employee’s home address. Paychecks will be placed in U.S. mail, in Topeka, one day before payday.

**B. Proof of Date of Birth/Proof of U.S. Citizenship**

At the time a person is appointed to the payroll, documentary proof of date of birth should be provided to the Payroll Office. The State of Kansas requires that proof of date of birth be provided, and this requirement is related to eligibility standards under the retirement systems. Furthermore, all name changes must be documented. Prior to the third day of work, each person must provide the documentation required by the Immigration, Reform and Control Act of 1986. Specifically, at the time of hiring, each employee must provide either one document establishing both identity and authorization to work or two separate documents, one for identification and one for work authorization. For more information, visit [http://www.uscis.gov/files/form/i-9.pdf](http://www.uscis.gov/files/form/i-9.pdf) (link modified 10/2011).

**C. Payroll Deductions**

The Payroll Office will arrange for automatic deductions for Social Security, state and federal income taxes, retirement, group health insurance, group life insurance, flexible spending accounts, Learning Quest, long term care insurance, Series “EE” savings bonds and other approved payroll deductions, such as the credit union, KUEA, parking and the Kirmayer Fitness Center. Federal law requires that Social Security deductions
be made from the paychecks of all employees, full-time or part-time, except for some
students during the time they are actually enrolled (spring semester, fall semester, or
summer semester). Deductions for the retirement system are made for all persons
covered by the system under the provision of the state law [see Retirement in this
section]. Deductions for the group health insurance program are made for all persons
who are eligible and who have indicated their desire to participate in this program. An
additional group life insurance program is available to all University unclassified staff and
faculty members. Premiums may be paid through payroll deductions upon authorization.
For more information, please visit www2.kumc.edu/finance/payroll.html.

D. Compensation in Excess of Full-Time Salary

Compensation in excess of full-time salary will not be approved for University of Kansas
employees except in specific cases approved in advance by the Chancellor. As a matter
of policy, the Chancellor will not grant such authority except in certain unusual cases and
in accordance with the requirements set forth below.

1. General Authorization

The Chancellor has given blanket approval for extra compensation for the following
specific kinds of service:

a. Preparing an independent study course.
b. Grading independent study papers.
c. Performing certain services for the University Press of Kansas.
d. Consulting by faculty members and unclassified employees for another
   institution under the jurisdiction of the Board of Regents, as well as
   consultation for other state agencies, shall be approved in advance by
   the institution or agency seeking these services and approved by the
   appropriate vice chancellor. The University shall effect payment to the
   faculty member through the regular payroll process and shall receive
   reimbursement through the interfund transfer process [see Section F,
   #13, of the Kansas Board of Regents Policy Manual (modified 10/2011)
   regarding “Consulting and Other Employment].
e. Specified continuing education instructional activities. Activities included
   are those conducted by the Division of Continuing Education and the
   instruction-related activities conducted by other units of the University
   that are (1) derived from the unit’s mission; (2) intended for audiences
   external to the University of Kansas; and (3) authorized by an
organizational unit of the University, not by an individual. Excluded are activities that are run by individual employees. When the following continuing education instructional activities meet each one of the above criteria, overload payment may be authorized for:

i. Instruction of or presentations to a class, seminar, conference, etc. (credit or non-credit).

ii. Development or revision of course materials for a class, seminar, conference, etc.

iii. Development (including writing) or revision of content for a publication associated with a continuing education instructional activity; e.g., radio, newspaper or book series and development of books and pamphlets for purposes of public education.

iv. Dissemination at reasonable costs of proceedings, course materials, readers, technology transfer (films, tapes, computer-assisted instruction, etc.).

v. Instruction funded by grants and contracts, approved by proper authorizing units, which will not be included in the University’s base for funding purposes.

vi. Management and development of continuing education instructional activity that utilizes University personnel.

2. Prior Authorization Required

   All other cases require specific prior approval from the Chancellor. Examples are:

   a. Services rendered to other external agencies, public or private, for which compensation is to be paid through University channels.

   b. Services rendered as a consultant to other departments, schools or divisions of the University.

Requests from faculty and staff members for exceptions to permit extra compensation in these cases are to be submitted through regular channels to the chair, dean or director and appropriate vice chancellor for endorsement. These requests then are to be forwarded to the Executive Vice Chancellor and Chancellor for approval. The guidelines and criteria for approval are:

i. The services are requested by the agency, department, school or division to be served.

ii. The rendering of services is in the University’s interest, contributing to the improvement of its instructional activities or the professional development of the faculty or staff member, strengthening the
institution’s research and service program, supporting its cooperation with other Regents’ universities and state agencies, and enhancing the image of the institution as a public servant.

iii. The faculty or staff member is uniquely qualified to provide the services.

iv. The faculty or staff member’s regular University assignments cannot be appropriately decreased to accommodate the services.

v. The amount of time and effort to be expended by the faculty or staff member in providing the services is consistent with the University limitations for personal professional activities.

vi. The services cannot properly and reasonably be negotiated under the University’s policies and procedures for personal professional activity.

To allow time for receiving decisions from the Chancellor before work is performed, requests submitted under this policy should be submitted well in advance or the time for performing the service. University policy prohibits payment of extra compensation except in such cases approved in advance by the Chancellor.

E. Faculty and Staff In-State and Out-of-State Travel

University faculty and staff members may be reimbursed for official travel authorized. Detailed information for faculty and staff in-state and out-of-state travel is available in the Employee Travel Expense Reimbursement Handbook (link modified 10/2011). This publication should be consulted well in advance of any planned travel as it contains information on the limitations of reimbursement, receipts, and application forms for travel to be reimbursed by state or other non-private funds. The limitations imposed by state law are subject to change.

F. Group Health Insurance

The State of Kansas has several optional group health insurance plans available to eligible University faculty and staff. Please refer to the following website: http://www.khpa.ks.gov/default.htm (link modified 10/2011). A separate program is offered to all students [see the Student Handbook].

All employees participating in the group health insurance plan are covered by dental insurance. For detailed information, refer to www2.kumc.edu/hr/benefits/benefits.html (link modified 10/2011).
Those faculty and unclassified professional staff members going on leave without pay status (involuntary and voluntary) and who are covered under the Group Health and Hospitalization Insurance program should contact the Human Resources Benefits Office prior to going on leave without pay to obtain information about continuing this coverage. In cases of disability and retirement, group health insurance coverage may be continued after active employment has ceased. In these cases, the insured must pay the full amounts of the group premium.

Effective January 1, 1987, employees and their dependents who are no longer eligible for health insurance coverage under the State of Kansas health benefit plan have the right to elect to continue coverage under COBRA for a specified time by paying the required premium themselves. For specific information on this program, contact the Human Resources Benefits Office or refer to

http://www.kumc.edu/human-resources/benefits.html (link modified 10/2011)

In order to comply with the Tax Equity and Fiscal Responsibility Act of 1982 (TEFRA), employees age 65 or older will have the same coverage as employees under the age of 65. Effective January 1, 1986, TEFRA extended this coverage to the spouse of the employee regardless of the age of the employee. The state group health care program is the primary carrier and Medicare is the secondary carrier. If the employee or the spouse under TEFRA should choose Medicare to be the primary carrier, they must be withdrawn from the state health contract.

Additional information may be obtained from the Human Resources Benefits Office (link modified 10/2011) on the Medical Center campus.

G. Retirement
1. Regents Retirement Plan

Eligible employees must participate in one of several retirement plan options, as set forth in Appendix E of the Kansas Board of Regents Policy Manual (link modified 10/2011).

a) Phased Retirement Program

The Board of Regents has approved a phased retirement program for faculty and other unclassified employees. Please refer to www2.kumc.edu/hr/benefits/phasret.html (link modified 10/2011). The Phased Retirement Agreement shall specify the annual percentage effort, the duration of the agreement, and the financial benefits
provided by the institution. For more information, see the following website:
www2.kumc.edu/aa/fa/doc/Phased_Retire.doc.

b) Tax Sheltered Annuities

Subject to K.S.A. 74-4925 and 4925b, K.A.R. 88-10-1 through 12, and K.A.R. 88-11-1 through 12, Regents employees may participate in a voluntary tax-sheltered annuities program (11-21-86; 9-16-93; 9-15-94; 12-14-95).

2. Plans

The University of Kansas maintains contributory, funded retirement programs for faculty and other unclassified professional staff members with several companies selected by the Board of Regents [see Retirement Programs]. The Kansas Public Employees Retirement System (KPERS) was established in 1961 for State of Kansas public employees to provide a defined benefit pension plan. Deferred compensation is a voluntary defined retirement plan established by the state to help employees provide a supplement to their retirement income [see www2.kumc.edu/hr/benefits/defcomp.html]. A voluntary retirement plan permits employees to make contributions to an investment company without paying taxes during the current year on the amounts invested [see http://www.hreo.ku.edu/benefits_pay/benefits_info/retirement_programs/voluntary_retirement].

3. Benefits After Retirement

Persons approaching retirement age should consult with the Human Resources Benefits Office (link modified 10/2011) for individual review of their situation. Retired members may continue to participate in the group health insurance program and in the group life insurance program under specified conditions.

Under the will of the late Miss Elizabeth Sprague, a longtime member of the faculty, the KU Endowment Association constructed in 1960 the Sprague Apartments in Lawrence, Kansas. Six two-bedroom and three one-bedroom units are available at a modest monthly rental to retired faculty and staff members who have give 15 years or more of service to the University.

At retirement, certain courtesy benefits are extended by the University Theater, School of Fine Arts, University Libraries, and Parking Services. Information on specific programs is available on request from these departments.
4. Employment After Retirement

A retired faculty or staff member may be reemployed for limited service. There is no University restriction on the amount that may be earned during the reemployment period. However, Social Security and KPERS benefits will be decreased if the amount earned is greater than the limit set by the Social Security Administration and KPERS. A retired faculty member may apply through the Office of Research Administration for an externally supported research grant or contract. As a part of the agreement, salary may be requested for the retired faculty member, provided that the individual is not receiving retirement benefits from KPERS. The level of salary will be arranged with the Office of Research Administration but will not exceed the level last paid to the faculty member as a regular employee at the full-time equivalent rate. Any exception to this policy must be approved by the Chancellor.

5. Research Work by Emeritus Staff

The University considers retirement from active service as terminating all teaching duties, both on the undergraduate and graduate levels, and other assignments and responsibilities of active service. However, it encourages professors emeritus to continue their personal research activities and supplies them with the needed facilities if these are not required by students or other staff members of the department for their teaching and research; and it helps them, through the Office of Research Administration, to obtain sponsored research grants and to carry out these activities.

Should a retired professor's research work call for or permit the assistance of graduate students, such students may be appointed to work with that professor, provided that the department and the Graduate Studies feel the professor is qualified to carry on the research and the nature of the project justifies such help both by its desirability and by the type of experience to be gained by the students. A student thus employed may be given graduate credit for such work only if arrangements have been approved by the student’s department and the Graduate Studies and if the student has been enrolled with a regular member of the graduate faculty department who has accepted the responsibility for evaluating the work and determining the student's grade.
H. Group Death and Disability Insurance

The State of Kansas provides, at no cost, group life insurance for employees with a 50 percent or more appointment [see http://www.sehbp.org (link modified 10/2011)]. The premium for the disability portion of this insurance is also paid by the state [see http://www.sehbp.org (link modified 10/2011)].

I. Optional Group Life

An optional group life term insurance program offered by Minnesota Life provides coverage in addition to the coverage provided by the state group death and disability insurance program [see http://www.kpers.org/lifeinsuranceactive.htm].

J. Legal Protection Afforded Faculty and Unclassified Professional Staff at KUMC

The Office of the General Counsel is responsible for all legal matters of the University of Kansas. In carrying out that responsibility, the General Counsel and members of the staff at KUMC are involved in such functions as preparing and reviewing legal documents, representing the University in legal actions, and providing legal advice to those who administer the affairs of the University. For the purposes of prosecuting or defending actions involving the University, the General Counsel serves as Special Assistant Attorney General by appointment of the Attorney General of the State of Kansas.

One of the important functions of the Office of the General Counsel is to provide assistance and information to the University employees about the policies and procedures of the University, the Board of Regents, and the state. The General Counsel’s Office is generally available to provide such information relative to legal matters that arise out of the employee’s conduct of his or her duties.

Individuals sued for actions arising out of the scope of their employment with the University may request representation by the Attorney General under the terms of the Kansas Tort Claims Act (K.S.A. 75-6101 et seq.). This act provides that individuals sued for alleged acts or omissions in the scope of their employment with the University may, upon appropriate request, be provided with legal representation. This representation may be provided by the Office of the General Counsel of the University or by other counsel employed for that purpose.
The Tort Claims Act specifies that, upon request of an employee of the state to the Office of the Attorney General within 15 days after service of process upon the employee, the employee shall be provided with legal defense of any civil action or proceeding against such employee in his or her official or individual capacity on account of an act or omission in the scope of his or her employment. Legal defense may be refused the employee of the state if it is determined that:

1. The act or omission was not within the scope of such employee's employment;
2. Such employee acted or failed to act because of actual fraud or actual malice;
3. The defense of the action or proceeding by the governmental entity would create a conflict of interest between the governmental entity and the employee; or
4. The request for legal defense was not made in writing to the Office of the Attorney General within 15 days after service of process upon the employee in the action. Provided a proper request for representation has been submitted to the Attorney General and the employee acted within the scope of his or her employment, attorneys within the General Counsel's Office will defend that employee. Costs of litigation are paid by the state and/or the University. In the event a judgment is rendered against an employee of the University, the state will indemnify the employee up to $500,000 for any number of claims arising from a single event or occurrence.

Because the General Counsel is appointed by the Chancellor, the counsel's ultimate responsibility is to represent that office and those individuals to whom the Chancellor has delegated responsibility. In determining whether the General Council will provide legal advice or representation, the counsel will represent those individuals in the highest position of authority. The General Counsel will provide advice and counsel to University employees so long as the issues do not involve conflicts with those higher in the administrative or executive hierarchy of the University. If the individual seeking the services of the General Counsel ultimately finds himself or herself in an adversary position with someone higher in the University hierarchy, the counsel will represent those individuals in the higher position authority.

The procedures for an employee to follow if a civil suit is brought against the employee for acts or omissions arising from employment with the University are as follows:

1. The employee shall submit a written request to the University General Counsel and, after conferring with the counsel, to the Kansas Attorney
General asking that legal representation be provided. The request to the Attorney General must be made within 15 days after service of process in an action.

2. Should the University and the Attorney General decline to provide legal defense of an action, an employee may petition a court of competent jurisdiction to compel performance of that duty.

3. If the court does not issue a writ compelling performance, the employee may retain his or her own counsel to defend the action. If it is determined that the acts or omissions were within the scope of employment, and no actual fraud or malice on the part of the employee was involved, the employee is entitled to recover reasonable attorney’s fees, costs and expenses from the state.

   a. **Physicians’ Liability Insurance.** In accordance with the provisions of the Kansas Health Care Provider Availability Act (K.S.A. 40-3401 et seq.), full-time physician faculty employed by the University of Kansas Medical Center are insured by the State of Kansas while they are providing health care. Because this malpractice coverage is statutory, a determination is made annually by the Executive Dean of the School of Medicine about the applicability of the statute to individual physician faculty. Full information about coverage under the statute and certain limitations in coverage are available from the Office of the Executive Dean and the Medical Center’s risk manager. Physician faculty should obtain this information prior to providing health care services.

**K. Workers’ Compensation**

All state employees, whether classified, unclassified or employed students, are covered under the Workers’ Compensation Act. The carrier for State of Kansas employees is the Self-Insurance Fund for Workers’ Compensation. [Also see Sick Leave for Unclassified Employees in Section V.]

Any employee injured by an accident arising out of and in the course of employment may receive compensation for the injury, provided the injury is not caused by misconduct. The act also covers illnesses arising out of and in the course of employment. Prompt reporting by the department to the Department of Occupational Health and Environmental
Medicine (OHEM) is required for all on-the-job accidents and apparent occupational illnesses. A reportable injury is one that causes the injured to lose work time and/or requires either first aid or medical attention. Questions regarding workers’ compensation should be directed to the worker’s compensation nurse case manager in OHEM.

L. Unemployment Compensation

Employees of the University came under the Kansas Unemployment Compensation Act in January 1972. This act was designed to provide a program of insurance on a short-term basis for the payment of benefits to workers of Kansas who through no fault of their own have been temporarily restricted from gainful employment.

Faculty and staff are covered by the act. Students who are enrolled in courses and who are excluded from Social Security coverage, as well as nonresident aliens who are on F-1 or J-1 visas performing services for which they are allowed to enter the United States, are excluded. Nine-month faculty members are not eligible for unemployment compensation during the summer months. The eligibility or disqualification of each faculty or staff member who separates from University employment will be determined by reason of separation. A claimant must initiate the claim at the nearest Employment Security Division Office.

M. Holidays

Faculty and other unclassified staff members enjoy official state holidays as established by the Office of the Governor. [Please refer to http://www.kumc.edu/human-resources/policies-and-procedures/designated-holidays.html (link modified 10/2011)]

N. Employment of Relatives

1. Employment of Relatives

Persons may be appointed to classified or unclassified positions without regard to family relationship to other members of faculty or staff. Where a family member is in a position to directly evaluate or make decisions such as those concerning appointment, retention, promotion, tenure or salary of a close relative, all such decisions shall be the responsibility of the next highest administrative supervisor or the supervisor’s designee.
2. Process of Evaluation of Relatives

An individual who is employed by a relative is to have a letter on file stating who the buffer person is or who directly evaluates or makes decisions such as those concerning appointment, retention, promotion, tenure or salary. These letters are filed in the following offices or locations:

a) Respective department chair
b) Respective dean
c) Office of the Executive Vice Chancellor (or designee)
d) Equal Opportunity Officer
e) Associate Vice Chancellor for Research Administration (if the situation involves grants)
f) Person directly involved
g) Personnel file of the person employed

Initiation of the buffer letter may be from the principal investigator of the grant, the department chair, the dean or the Executive Vice Chancellor (or designee) depending on the respective or specific situation.

0. Identification Badges

Identification badges are provided to each new employee immediately following the commencement of work. These badges are distributed through the Human Resources Benefits Office. The badge may be used both within and outside of the Medical Center to identify the individual as a KUMC employee. This badge should be worn or carried whenever at work. Faculty and staff will be charged a fee to replace lost or destroyed badges.

P. Faculty and Staff Enrollment

Full-time faculty or staff may enroll in class work. Fees are assessed at the resident hourly rate. No charge is made for campus privileges and therefore no campus privileges are available on the basis of such enrollment. Staff members who have 40 percent or more but less than 100 percent of full-time appointments also are assessed at the resident hourly rate but are assessed the campus privilege fees. Continuous employment during the period of enrollment is required. Prior to enrollment, the faculty or staff member should secure an Application for Staff or Staff Dependent Tuition Rates form. The application must be signed by the department chair and turned in with other registration materials at or prior to enrollment. In addition, the dependent spouse or child
of a staff member may pay resident fees, provided an Application for Staff or Staff Dependent Tuition Rates form is presented at or prior to enrollment.

The Graduate School, from traditional concerns of conflict of interest, has established the following rule:

> Members of the University of Kansas faculty holding any rank above that of instructor will not be granted a degree from the University of Kansas.

Exceptions to this rule may be granted in circumstances where conflict of interest is deemed not present. Petition for exception on the Medical Center campus should be forwarded to the Vice Chancellor for Academic Affairs for review and recommendation.

V. LEAVE POLICIES

A. Sabbatical Leave

1. Introduction

The policy of the University with regard to sabbatical leaves is governed by the regulations of the Board of Regents, which state that “in strictly meritorious cases, a full-time faculty member on regular appointment, which refers to tenure-track or tenured, who has served continuously for a period of six years or longer” may be granted sabbatical leave. The Board of Regents policy also states that such leavers “shall not exceed four percent of the number of equivalent full-time faculty . . . for the fiscal year for which the leave of absence is granted.”

In April 1977, the board extended the sabbatical leave policy to include those individuals identified by the University as “academic staff,” defined in the Lawrence campus Handbook for Faculty and Other Unclassified Staff as unclassified academic staff who engage in research, public service and teaching in units that support the academic mission of the institution. They are unclassified employees whose education and experience are equivalent to those of the academic faculty. Some of these staff are funded from the University’s state-allocated budget, while others are funded by grants and contracts.
2. **Policy**

The Board of Regents’ interpretation of “strictly meritorious case” is derived from the nature and the purpose of a sabbatical leave. Sabbatical leaves are granted because it is recognized that there are some tasks essential to the educational mission of a distinguished university that cannot be pursued within the context of normal teaching loads and committee responsibilities. Scholars sometimes need periods for sustained research, advanced study or other experiences outside the normal classroom atmosphere. Sabbatical leaves are such periods. A strictly meritorious application for sabbatical leave will show that the proposed sabbatical activity will be of great value to the applicant’s needs and goals, to the applicant’s department’s programs, and to the educational mission of the University. Sabbatical leaves are an important means of promoting faculty development. A strictly meritorious application for sabbatical leave will show that the sabbatical leave will indeed promote the intellectual growth of the applicant.

Sabbatical leaves are rewards for scholars who have fulfilled classroom duties, pursued research activities, and have served the University and community and nation in ways that reflect the excellence of a distinguished institution of higher learning. Sabbatical leaves are never automatic for a faculty or staff member. They must be earned.

Sabbatical policies established by the Board of Regents are as follows:

1. Sabbatical leaves shall be approved by the chief executive officer of each institution in accordance with board policy.

2. Sabbatical leave may be granted subject to the following conditions:
   a) In strictly meritorious cases, a full-time faculty member on regular appointment at any of the Regents institutions of higher education who has served continuously for a period of six years or longer at one or more of these institutions may, at the convenience of the institution and upon the recommendation of the president or chancellor of the institution and upon the recommendation of the president or chancellor of the institution with which connected, be granted not to exceed one such leave of absence for each period of regular employment for the purpose of pursuing advanced study, conducting research studies or securing appropriate industrial or professional experience; such leave shall not be
granted for a period of less than one semester nor for a period of more than one year, with reimbursement being made according to the following schedule:

1) For nine-months faculty members, up to half pay for an academic year, or up to full pay for one semester.
2) For twelve-months faculty members, up to half pay for eleven months, or up to full pay for five months.

b) Provided: Regular salary is defined as the salary being paid at the time the sabbatical leave begins. Outside grant funds received by the University in support of the individual’s scholarly efforts during his/her sabbatical leave may be used for supplemental salary, but total sabbatical leave salary in these instances may not exceed his/her regular salary. Provided further, that the number of faculty members to whom leave of absence with sabbatical pay is granted in any fiscal year shall not exceed four percent of the number of equivalent full-time faculty with rank of instructor or higher, or equivalent rank for the institution concerned for the fiscal year for which the leave of absence is granted; and provided further, that no faculty member will be granted leave of absence with sabbatical pay who does not agree to return to the service of the state institution granting the sabbatical leave for a period of at least one year immediately following the expiration of the period of leave. Persons failing to return to the institution granting sabbatical leave shall refund all sabbatical pay. Those who fail to remain for the full year of school service (nine to 12 months depending on annual term of employment) shall refund that portion of their sabbatical pay as represented by the portion of time they fail to serve. For more information, please refer to the Kansas Board of Regents Policy Manual (link modified 10/2011).

3. Application Process

   a. The call for applications for sabbatical leave shall be issued each fall by the dean of each school. The call shall include a statement of the scope and purpose of sabbaticals. The broad purpose is faculty development through pursuing advanced study, research or securing appropriate professional experiences. Included in its scope are in-depth or advanced study in one’s field of expertise and in related fields, research, preparation of a manuscript,
a book or other creative activity, and participation in professional
development activities in one’s discipline and in related disciplines. During
sabbatical leave a faculty member is expected to carry full-time responsibility
for pursuing the purposes for which the sabbatical is granted. The applicant
should set forth sufficient information about his or her professional work and
sabbatical proposal to enable the dean to make an evaluation.

b. Applications for sabbatical leaves are submitted to academic departments
and deans, who then forward the application to the Vice Chancellor for
Academic Affairs or designee [see
www2.kumc.edu/aa/fa/doc/Sabbatical_Process.doc]. Whenever possible, a
comprehensive statement containing peer-group evaluations on the following
aspects of the request shall be furnished:

1. The applicant’s contributions to teaching, research and service.
2. Value of the sabbatical proposal to the applicant’s professional
   needs and goals; value and likely benefits to the
   department/University of the sabbatical proposal; benefits likely to
   result in terms of enhanced teaching/professional service; and
   enrichment of interdisciplinary programs. Where more than one
   case is reviewed at the department level, the comparative merit of
   the cases considered should be indicated.

Department chairs and deans shall review and evaluate the merit of
the applicants and their proposals before transmittal to the Vice
Chancellor for Academic Affairs. Evaluations shall be kept
confidential, but the applicant shall be given an opportunity to
respond to a summary of negative comments made at any level in
the evaluation.

c. Forms for application for sabbatical leave are available from the office of the
appropriate dean and the Office of the Vice Chancellor for Academic Affairs.
They also may be downloaded from the Faculty Affairs website. Applications
are due in the Office of the Vice Chancellor for Academic Affairs by
December 1st for leaves to begin during the subsequent fiscal year (July 1 to
June 30). A faculty member returning from sabbatical leave is expected to file
a brief report with the office of the appropriate dean and Vice Chancellor for
Academic Affairs within 90 days (rev. 9/99).
4. Extra Compensation While on Sabbatical Leave

Faculty members on sabbatical leave at half pay may receive additional income from non-state sources either directly or through regular University administrative processes. When received directly, the maximum increment is the second half pay plus the amount ordinarily allowed under the University’s consulting policy. When administered through the University, the maximum increment is the half pay only. [Please refer to Section F, #13, of the Kansas Board of Regents Policy Manual (link modified 10/2011).]

Faculty members on University sabbatical leave at full pay may receive additional income from non-state sources directly to the maximum ordinarily allowed the University’s consulting policy. They may not receive additional income from non-state sources through regular University administrative processes.

Faculty members on sabbatical leave, either full pay or half pay, may not receive additional income through the University from state sources.

In all cases, the acceptance of additional income by a person on sabbatical leave is justified only if the activity is congruent with the purposes of research, scholarly writing, clearly related professional experience, and study, for which sabbatical leaves are granted.

B. Leave Without Pay

A faculty or staff member who applies for a leave of absence without pay may be granted such leave when it is considered in the best interests of the University. A written application with the endorsements of the appropriate department chair and/or dean or director should be submitted to the Executive Vice Chancellor. [For detailed information, see www2.kumc.edu/hr/er/leavewopay.html.]

If appropriate, a faculty member may request, at the time the application is submitted, that the leave not be considered a scholarly leave. The Executive Vice Chancellor (or designee), in consultation with the University General Counsel, will determine whether the request is to be granted.
C. Leave With Pay

In order to fulfill jury duty, military duty or other appropriate civic obligations, employees may be granted leave with pay pursuant to Executive Vice Chancellor (or designee) approval.

D. Vacation Leave

Persons holding nine-month appointments are not entitled to vacation leave with pay. Faculty and unclassified staff holding 12-month appointments are entitled to vacation leave with pay as detailed in www2.kumc.edu/hr/er/vacation.html.

1. Before taking vacation leave with pay, an employee must receive prior approval from the employee’s immediate supervisor.

2. Records of earned and used vacation leave shall be maintained by the employee’s department, school or division. Use of vacation leave shall be reported to the Payroll Office. Vacation leave balances are reported on each paycheck stub. Any discrepancy in this record should be reported to the appropriate department, school or division.

E. Sick Leave for Unclassified Employees

All faculty and unclassified professional staff forced to be absent from their duties because of illness or disability are eligible to receive sick-leave pay at a rate equal to their usual salary. The official sick-leave policy approved by the Board of Regents for State of Kansas Regents’ institutions can be found at www2.kumc.edu/hr/er/sick.html.

Records of accumulated and used sick leave shall be maintained by the employee’s department, school or division. Use of sick leave shall be reported bi-weekly to the Payroll Office. Any discrepancy in the record should be reported to the appropriate department, school or division.

A former employee who had unused sick leave at the time he or she left the University and who returns to University employment in a permanent position within one year shall have the unused sick leave reinstated. This provision does not apply to persons who retired from the University [see also Group Death and Disability Insurance in Section IV].
F. Military Leave for Unclassified Employees

Any unclassified employee with an appointment of 50 percent time or greater who is a member of the state or national guard or the reserves of the United States armed forces shall be granted a leave of absence for the duration of any official call to emergency duty or to the annual training period. Military leave with pay shall be limited to 12 working days in any calendar year. For details, see www2.kumc.edu/hr/er/military.html.

G. Bereavement Leave for Unclassified Employees

The University of Kansas provides benefits for bereavement leave. Details can be found at www2.kumc.edu/hr/er/death.html.

H. Shared Leave for Unclassified Employees

The University Kansas provides benefits for shared leave. For details, please refer to www2.kumc.edu/hr/er/sharedlv.html.

I. The Family and Medical Leave Act (FMLA)

The University of Kansas provides benefits for leave under the Family and Medical Leave Act. For details, please refer to www2.kumc.edu/hr/er/fmla.html.

VI. ACADEMIC RULES AND REGULATIONS

A. Academic Calendar

The Kansas Board of Regents has ruled that the academic calendar shall be followed as published and that any deviation from this calendar for reasons other than natural disasters must have prior approval of the Board of Regents.

The academic calendar for the Lawrence campus applies to Medical Center students enrolled in semester courses only with respect to the beginning of classes, holidays, the last day of classes, the beginning of examinations, the end of semester examinations and commencement. Separate calendars are prepared for (1) the School of Medicine preclinical program, (2) the School of Medicine clinical program, and (3) University of Kansas Medical Center (KUMC) programs in Graduate Studies and KUMC undergraduate programs (published in the official schedule of classes (link modified 10/2011)).
B. Admission, Registration and Enrollment

Admissions requirements and application procedures are established by individual schools and academic programs. Students and trainees (except employees) involved in any educational or training program at KUMC must be registered either with the Office of the Registrar or with the Office of Continuing Education according to the following guidelines:

1. Every person (except employees) involved in a program or course giving academic credit or leading to a degree, diploma or certificate from the University will register with the Office of the Registrar. This regulation also applies to undergraduate medical students from other institutions that are on the Medical Center campus for research or clinical experience, whether or not they receive credit or certification from the University of Kansas.

2. Every person involved in an adult or continuing education program that does not award academic credit or lead to a degree or diploma will register with the KUMC Division of Continuing Education.

Academic advising is provided to students by the school or department in which they are enrolled. More information may be obtained by viewing the Web site of the KUMC Registrar, Academic and Admissions Information, at the following address: www.kumc.edu/studentcenter/regacademic.html.

C. Attendance

There is no all-University policy regarding attendance in class or the reporting of absences by the faculty. Each school and/or academic department establishes and publishes its own regulations with regard to class attendance and/or exams. The institution and/or faculty member has the right to restrict classroom attendance to those students who are properly enrolled. More information may be obtained by viewing the Web site of the KUMC Registrar, Academic and Admissions Information, at the following address: www.kumc.edu/studentcenter/regacademic.html as well as the KUMC Student Handbook.

D. Tests, Examinations and Final Examinations

All tests and examinations, except for the final examination, are scheduled by the course instructor with due regard for any procedures that may have been established by the school in which the department, program or course is administered.
All final examinations are scheduled in accordance with the University of Kansas Schedule of Classes, with the exception of the School of Medicine. For medical students, the KUMC Student Handbook (link modified 10/2011) provides test and examination guidelines.

At the beginning of a course, students should be given a schedule of all major examinations, including any final examination, as well as a statement of the policies governing the administration of examinations and the use of individual examination results in computing and assigning grades.

E. Grades

It is expected that grades will be assigned to all students enrolled in a given course. Information regarding grading can be found in the Undergraduate Catalog (link modified 10/2011), the Graduate Catalog (link modified 10/2011) and the School of Medicine Catalog (link modified 10/2011).

F. Personnel and Academic Records

Official employment records for unclassified professional staff members and faculty are maintained by the Department of Human Resources. The Office of Faculty Affairs maintains the official academic personnel records for all faculty members. Access to faculty academic records is governed by the following policy:

1. Files on individual faculty members are in general to be treated as confidential, with access limited to the individual concerned (except as provided in number 3 below); to those administrators and committees who are directly responsible for making individual staff decisions; and to local, state and federal officials specifically authorized by law or regulations to have access to specified categories of information.

2. At the written request of the faculty member, copies of any materials in his or her file (except as provided in number 3 below) shall be made available to other individuals that he or she designates. In the absence of such request, and subject to numbers 1 and 3, materials in the file shall be made available to other individuals seeking access only with the consent of the individual concerned or as a consequence of a court order. Unless the dean’s office receives written permission from a faculty member to release information about his or her performance while employed at KUMC, only the start and end dates of employment, position and salary will be released by the department, school, or Office of Faculty Affairs as appropriate.
3. A separate file relating to matters such as promotion and tenure may be maintained by the school on a faculty member to which he or she may neither have nor authorize others to have access, because the materials it contains (such as letters of recommendation) were placed therein with a guarantee of confidentiality made or implied to the originators of such materials.

No personnel or academic records pertaining to unclassified professional staff or faculty shall be destroyed without approval of the Executive Vice Chancellor and the General Counsel.

G. Confidentiality of Student Records
KUMC affords all of its students their full rights as required by the Family Educational Rights and Privacy Act (FERPA). Students have the right to inspect all educational records personally identifiable as their own, except for certain components of such records exempt from inspection as outlined in the Student Records Policy (link modified 10/2011). The Student Records Policy places strict limitations on the release of student information without the consent of the student. Faculty are responsible for reading and following the guidelines presented in the policy.

VII. SERVICES
A. Scheduling Services
1. Special Events
   Arrangements for special events such as lectures, workshops and symposia should be made by the school, department or other functional unit that is sponsoring the event. Central facilities—classrooms, auditoriums and lounges—can be reserved through Instructional Services, a division of Administrative Services. It is important to reserve them as early as possible because classrooms and auditoriums are scheduled months in advance.

2. Classrooms for Scheduled Courses
   Classrooms for scheduled courses are reserved through Instructional Services, a division of Administrative Services. Priority is given to academic courses.

B. Educational Support Services
   Instructional Services provides the following services to assist faculty and staff in their academic and other professional endeavors: classroom and auditorium scheduling,
media support, video recording/production, instructional television and audio conferencing. Reservations can be made by calling 588-7326.

The NetLearning group assists faculty and staff in building multimedia and Web-based environments for courses and training. This includes digital development for online courses, tests, surveys, graphics, animation, interactive modules, audio and video. Educational database and application programming is also provided.

The Instructional Technology Center offers checkout services for items including audiovisual materials, school reserve materials, laser pointers and microphones, digital cameras and classroom keys. The center contains student computers, copiers, printers and computer-equipped classrooms. It also provides bubble-sheet scoring for exams and evaluations.

The Computer Productivity Training Unit provides face-to-face and Web-based instruction on computer productivity tools relating to e-mail, databases, spreadsheets, word processing, presentations and Web development. Individual consulting is also available.

C. Network and Computer Support Services
Information Resources (link modified 10/2011) manages the network, telephone and Web infrastructure for the Medical Center campus. Faculty, staff and students at KUMC are provided e-mail accounts. Faculty and staff also are provided network accounts. To receive an account, contact your department administrator or the Customer Support Help Desk at extension 87995. All users are expected to follow the policies for acceptable computer, Internet and e-mail use. Customer Support will also help set up and install desktop computers. Hardware troubleshooting is provided, but maintenance agreements should be purchased for computers.

Information Resources (link modified 10/2011) offers a wide range of computer support services, including consulting, training, systems troubleshooting and analysis, database development, and development of Web-based resources.

D. Library Services
1. Archie R. Dykes Library of the Health Sciences

The Dykes Library manages current health sciences information resources to support teaching, research, clinical practice and information management training. The library's catalog, databases (MEDLINE, CINAHL and others) and many electronic journals are available online and can be used from office and home computers. The Calkins Educational Resource Center manages the library’s audiovisual resources.
2. Clendening History of Medicine Library

The Clendening History of Medicine Library and Museum (link modified 10/2011) is the rare books and manuscripts library of KUMC. It actively collects rare books as well as current works in the history of medicine, nursing and the health professions. The library also supports the biomedical ethics and medical humanities curriculum by collecting contemporary secondary works in these areas. Under the auspices of its museum, the library also owns hundreds of medical artifacts. The Digital Clendening highlights eight separate digital collections, including Florence Nightingale Letters, Rare Text Images, and Japanese Medical Prints.

3. Farha Medical Library at the Wichita Campus

The Farha Medical Library on the Wichita Campus houses a collection of current journals and periodicals along with a variety of reference texts.

E. Statistical and Survey Services

The Enterprise Analytics (link modified 10/2011) is a source for data and statistics about the Medical Center. The office can provide faculty with a variety of information such as enrollments, faculty numbers and research dollars, which is often required in research proposals to external agencies. The office also provides help with program evaluation, including such tools as surveys of students and alumni to be used for accreditation and program review.

F. Student Services

The Department of Student Services (link modified 10/2011) is committed to fostering a sense of community between students, faculty and staff at KUMC and has many things to offer that can enrich the educational experience for students. The department is located on the ground, first, third and fourth floors of the Student Center. The primary goal of the department is to provide essential support services that assist students as they pursue their academic goals and to ensure that student services are efficient, accessible and user-friendly. These services include:

- Student Counseling and Educational Support Services, (913) 588-6580
- Student Health Services, (913) 588-1941, or in Wichita, (316) 293-2622
- Housing Office, (913) 588-6580
- Registrar’s Office, (913) 588-7055
- Dean of Student’s Office, (913) 588-4698
- Office of Student Resources, Wellness and Diversity, (913) 588-6681
- Office of Student Financial Aid, (913) 588-5170
G. Kirmayer Fitness Center

Kirmayer Fitness Center (link modified 10/2011) is located on the southeast corner of Rainbow and Olathe Boulevards. The center offers to students, staff, and KUMC alumni and their spouses a variety of programs, including fitness training and intramural sports. For more information, please call (913) 588-1532.

H. Bookstore

The Student Union Corporation is responsible for the operation of the KU Medical Center Bookstore (link modified 10/2011), as well as the Student Union Bookstore at the Wichita campus. The corporation, a non-profit organization on the campus since 1941, is governed by a board of directors derived from the student body, faculty and staff. The goal of the corporation is to provide books, electronic media, medical instruments and other goods and services to meet the physical, academic, social and cultural needs of the students, staff, faculty, alumni, friends and visitors. The corporation seeks to provide those goods and services that will enhance experiences of students as well as become a resource for the alumni and the health care community at large.

VIII. RESEARCH ADMINISTRATION

A. Overview

The Kansas Board of Regents has established research as a major mission for the University of Kansas. The board has delegated the authority (K.S.A. 76-723) for oversight of all research programs and the conducting of all research to the Chancellor of the University of Kansas and the Executive Vice Chancellor of the University of Kansas Medical Center (KUMC). By direction of the Chancellor, and in compliance with state law, all applications for sponsored research and for external support of institutes, conferences, demonstration and training programs, and similar academic or service programs must be submitted through the Office of Research Administration. All proposals and applications for research or sponsored programs (new, competing renewals, non-competing, fellowships, etc.), including grant proposals, material transfer agreements, consulting agreements, or contract proposals submitted to an outside agency by Medical Center faculty and staff must be processed through the Office of Research Administration for institutional approval prior to submission to funding agencies.

At KUMC, the Executive Vice Chancellor has allocated basic responsibilities related to research and administration of all sponsored programs in the following ways:

- The University of Kansas Medical Center Research Institute is a not-for-profit University corporation responsible for research administration. The Vice Chancellor
for Research has responsibility for institution-wide research programs and is the
President of the Research Institute.

www2.kumc.edu/researchinstitute

- Deans of the Schools of Medicine, Health Professions*, and Nursing are responsible
for conducting the program of research, as well as the oversight of collaborative
research centers and core research service facilities.

http://alliedhealth.kumc.edu/school/research/research.html (modified 10/2011)
http://nursing.kumc.edu/currentresearch.html (modified 10/2011)

- The KUMC Research Compliance Division has responsibility for overseeing a
comprehensive research compliance program.

http://www2.kumc.edu/compliance/ (modified 10/2011)

- The Research Advisory Council (RAC) is responsible for providing formal counsel
and advice on research matters to the Executive Vice Chancellor. The RAC consists
of research representatives from each of the three schools and an additional
representative from the Wichita campus of the School of Medicine. The KUMC
Faculty Assembly is represented on the RAC by the chair of the Faculty Assembly
Research Committee (FARC). The basic mission of the RAC is to review research-
related issues for the entire research mission of the Medical Center and to advise the
EVC.

www.kumc.edu/rac
www2.kumc.edu/aa/fa/fac_assembly.htm

B. Office of the Vice Chancellor for Research
The Vice Chancellor for Research is designated as the KUMC official responsible for
research administration. Any written communication made by the principal investigator
(P.I.) to the funding agency concerning the administration of the award (i.e., re-budgeting,
change of effort or thrust, change of P.I., extension of funding period, etc.) must be
countersigned by the Vice Chancellor for Research or designee. This requirement is
established by the funding agencies because awards are made to the institutions. The
Vice Chancellor for Research also is designated as the official authorized to conduct
expanded authority privileges of various funding sources. (Forms are available from the
Division of Sponsored Programs Administration and the Office of Research-Wichita.)
C. University of Kansas Medical Center Research Institute, Inc.
The KUMC Research Institute is a not-for-profit 501(c)(3) corporation that performs the administrative services related to extramural grants and contracts for all KUMC faculty and staff. This responsibility includes all pre- and post-award functions, clinical research support, contract development, technology transfer, and intellectual property issues related to faculty and staff inventions.

As President of the Research Institute, the Vice Chancellor for Research is the authorized agent for all new and continuing research grants and contracts. The Research Institute President and the Research Institute Executive Director are authorized to review and approve KUMC grant and contract proposals for the University. They are also responsible for negotiating and administering all related agreements. The Research Institute Board of Directors consists of six University administrators, six faculty, and eleven members of the Kansas City community. A listing of board members can be found at the following website:

www2.kumc.edu/researchinstitute/admin/committees_list.html

The Executive Director of the Research Institute also serves as Associate Vice Chancellor for Research Administration, acts as an advocate for the research community to the administration, and serves as a liaison between faculty and outside funding agencies.

Research-related activities of the Research Institute include the following:

- Institutional approval of applications for external funding of research and sponsored programs.
- Negotiation of the applications prior to award.
- Institutional administration of both pre-award and post-award services for grants, contracts, and other sponsored programs.
- Communication of funding opportunities to all faculty on a regular basis.
- Staff assistance to the RAC and the FARC.
- Coordination with the department chairs and dean of the three schools to support research plans for the future.
- Administration of internal funding to enhance the research developmental activities of the departments. The Research Institute has assigned responsibilities to the Wichita campus for certain pre-award functions (see III-A of this section) and for management of clinical research (see I of this section).
The Research Institute is made up of four administrative divisions:

- Division of Clinical Research Administration
- Division of Finance and Administrative Services
- Division of Sponsored Programs Administration
- Division of Technology Transfer and Intellectual Property

1. Division of Clinical Research Administration

   All extramurally funded clinical research for KUMC faculty must be managed by the Research Institute. For clinical trials research on the Wichita campus, the Vice Chancellor for Research has delegated this responsibility to the Dean of the School of Medicine at Wichita.

   The Research Institute’s Division of Clinical Research Administration assists faculty and clinical staff in all service aspects for marketing of new clinical research; pre-award contracts, financial, human subjects approval; post-award monitoring; quality assurance in the clinical research setting; in-service education; and study closures. Complete procedures and additional information can be found at the following website:

   [www2.kumc.edu/researchinstitute/cra/index.html](http://www2.kumc.edu/researchinstitute/cra/index.html)

2. Division of Finance and Administrative Services

   The Division of Finance and Administrative Services is responsible for the management of all funds provided by extramural research grants and contracts, the development and management of Research Institute operating budgets, oversight of all accounting functions for the Research Institute and related entities, operation of the Human Resource Office for Research Institute employees, and the oversight of all properties owned or leased by the Research Institute.

   The Executive Vice Chancellor and the Vice Chancellor for Research (as President of the Research Institute), along with the Executive Director and Chief Financial Officer of the Research Institute, are responsible for all functions of this division. Additional information can be found at

   [www2.kumc.edu/researchinstitute/fas/index.html](http://www2.kumc.edu/researchinstitute/fas/index.html)
3. Division of Sponsored Programs Administration

All proposals and applications for research or sponsored programs (i.e., new proposals, competing renewals, non-competing renewals, and fellowships), including grant proposals, material transfer agreements, consulting agreements, or contract proposals submitted to an outside agency by KUMC faculty or approved unclassified or professional staff must be processed through the Research Institute for institutional approval prior to submission to funding agencies.

The Division of Sponsored Program Administration has two major functions: (1) assisting faculty in the proposal development process, and (2) monitoring grant expenditures when awarded.

a) Proposal Development Office (Pre-Award)

www2.kumc.edu/researchinstitute/spa/spappropprocess.html

On the Kansas City campus, the Proposal Development Office is authorized to assist faculty in the submission and negotiation of all proposals for new or continued federal and private support of University projects. The Executive Vice Chancellor and the Vice Chancellor for Research are authorized to review and approve such proposals for KUMC. They are responsible for negotiating and administering the agreements.

On the Wichita campus, the Dean of the School of Medicine-Wichita is authorized by the Vice Chancellor to review and sign proposal applications prepared by faculty on that campus. The Wichita Research Office (wichita.kumc.edu/research) coordinates the submission of proposals with the Kansas City office. All grant award and research contracts must be signed by the Vice Chancellor for Research as certification of institutional final acceptance.

Procedures for processing proposals for external funding of research and sponsored programs (i.e., training, fellowships, service, drug protocols), and for administration of the award (i.e., grant, contract, cooperative agreement, or gift), apply to both federal and non-federal applications. Policies and procedures for preparing an application for external funds vary among funding agencies; therefore, the Proposal Development
Office of the Research Institute and the Office of Research in Wichita provide the necessary services to assist faculty in developing proposals. In order to ensure the review and approval of the application at the department, school, and administrative levels, an institutional application checklist can be found at the following website:

http://www2.kumc.edu/researchinstitute/spa/Forms.html (link modified 10/2011). If the P.I. and co-investigator are in different departments, schools, and/or centers, the signatures of all chairs, deans, and/or center directors are required.

Signature approval by the department indicates the following:

1. the project is consistent with the overall objectives of the department, represents high-quality research, and has substantial scientific merit;

2. adequate (co)investigator time is available to conduct the project and the time committed is consistent with the terms under which the (co)investigator is employed;

3. adequate research space and facilities are available within the department(s) to support the proposed project;

4. requests for new equipment have been reviewed to determine whether similar suitable equipment might be available in the department(s) or school(s); and

5. matching funds and resources are available.

Signature approval by the center ensures that the director has reviewed and approved commitments or requirements of the individual center involved.

Signature approval by the school indicates the following:

i. the project is consistent with the mission of the school(s);

ii. the commitment of school resources is consistent with the mission of the school;

iii. new positions would be available if the project is awarded; and

iv. the school will guarantee any matching funds.

Finally, administrative signature approval demonstrates the following:
i. all department and school approvals have been obtained;
ii. the budget (direct and indirect costs) is appropriate and equipment items are justified;
iii. facilities and services required will be available when the project is awarded and the costs requested are adequate to cover the services required (mathematical and statistical services, computer-related services, hospital services, facilities and personnel, animal care services, and electron microscopy and other core or institutional services);
iv. space requirements have been addressed;
v. new faculty positions would be available if the project is awarded;
vi. project applications involving the use of human subjects have been submitted to the Human Subjects Committee (HSC) in accordance with KUMC policies and sponsor-specific mandates, and pre-award approvals have been obtained when required by the University of the granting sponsor;

Kansas City -

http://www2.kumc.edu/researchcompliance/human.htm

Wichita – http://wichita.kumc.edu/afs/compliance/
(modified 10/2011)

vii. project applications involving the use of animals have been submitted to the Institutional Animal Care and Use Committee (IACUC) in accordance with KUMC policies and sponsor-specific mandates, and pre-award approvals are obtained when required by the University or sponsor;

www.kumc.edu/lar/acupform.html

viii. a biohazard form has been submitted to the Institutional Research Safety Committee (IRSC) for all applications, and all projects involving Class II, III, or IV biohazard risks have been approved by the IRSC;

http://www2.kumc.edu/researchcompliance/hscforms.htm
(modified 10/2011)

http://www2.kumc.edu/researchcompliance/irsc.htm (modified 10/2011)
ix. project applications involving the use of radioactive material have been submitted to the Radiation Safety Committee (RSC) in accordance with University policies, and pre-award approvals are obtained when required by the University; (modified 10/2010)

x. applications are complete, conform to funding agency guidelines, and are accurate in terms of forms and budget;

xi. conflict of interest forms have been submitted for all grant-related personnel, been reviewed and approved by the department chair or center director, and received by the Research Compliance Division in accordance with KUMC policies and procedures governing conflict of interest; and

http://www2.kumc.edu/researchcompliance/coipolicies.htm (modified 10/2011)

xii. Health Insurance Portability and Accountability Act of 1996 (HIPAA) forms have been submitted for all applications involving protected health information.

www.kumc.edu/hipaa

b) Grant Monitoring Office (Post-Award)

www2.kumc.edu/researchinstitute/spa

Although the grant is awarded to the applicant institution (KUMC or KUMC Research Institute), the P.I. is responsible for compliance with all the specific requirements of the sponsoring agency upon accepting the award. The Grant Monitoring Office, under the direction of the Vice Chancellor for Research, is responsible for all special award requirements for Kansas City and Wichita, such as approval requirements related to budget changes, change in the scope or project objectives, change in the P.I., prohibition in spending against unallowable costs, carryover approval requirements financial reports, limitations on travel, special approval for the purchase of equipment, number of hours to be applied to the project by specific personnel, time and effort reporting, and other post-award related matters.

At the time the award document is received, the Grant Monitoring Office will assign an account number, which is to be used on all financial transactions. The financial billing or reporting date is noted, and all
necessary reports will be prepared as of these dates. The Grant Monitoring Office will be responsible for financial and administrative compliance of all expenditures applied to each award account. It is also responsible for timely submission of the required financial billing and reporting. State and institutional financial policies require that grant income be used for the purpose for which the income was awarded. As a result, “fund accounting” procedures are utilized and each project must have its own unique account number.

The Research Institute specifies that expenditures cannot be processed against a grant until funds are secured from the awarding organization. The Research Institute is not in a position to finance or make arrangements to finance awards for which funding is not secured in advance. Exceptions to this policy should be initiated through the Vice Chancellor for Research. Decisions are made on a case-by-case basis relating to such considerations as need, assurance of award, and funding agency policies regarding pre-award expenditures. Complete grant accounting requirements can be found at the Division of Sponsored Programs Administration website:

www2.kumc.edu/researchinstitute/spa.

c) Cost-Sharing

The Research Institute must ensure that cost-sharing requirements in agreements for sponsored grants and contracts are proposed, accounted for, and reported in a manner consistent with the requirements set forth in federal regulations, primarily OMB Circulars A-110 (Subpart C, Section 23) and A-21 (Section J.13.a). When the sponsor accepts cost-sharing or matching, it becomes a commitment of the University; thus, only designated school- and department-level administrators are authorized to commit University funds. It is the responsibility of the P.I. and department to assure that correct cost-sharing has been identified and all necessary approvals from academic units and schools have been secured in accordance with federal statutory requirements and specific agency program requirements.

Cost-sharing mandated by the sponsor on federal, state, or private awards should be provided from department or school resources and limited to only what is required by the sponsor. If the sponsor does not
require cost-sharing or if cost-sharing is not necessary to ensure the competitiveness of a proposal, P.I.’s and departments should refrain from making such commitments voluntarily. Research Institute policy requires that Sponsored Programs Administration review agency program guidelines and policy requirements to determine whether cost-sharing is necessary. Non-sponsor-funded research by any P.I. or other personnel on a grant is considered cost-sharing. All cost-sharing commitments on sponsored grants must be reviewed and approved by the department chair, school dean, and Vice Chancellor for Administration.

More information about cost-sharing, including definitions and procedures, can be found at www2.kumc.edu/researchinstitute.

d) Time and Effort Charged to Sponsored Projects

The Research Institute requires employees to declare and certify the accuracy of the percentage of time that they charge to sponsored projects. Each department has the primary responsibility of ensuring compliance with this policy. If effort is not properly certified, salary charges must be removed from the sponsored project account.

OMB Circular A-21 describes the cost accounting standards that must be followed by all universities receiving federal funding. They include the requirement for monthly distribution of all salaries to appropriate accounts in proportion to the effort expended toward activities associated with those costs. Under OMB A-21, effort reporting provides the necessary documentation to certify and substantiate direct labor charges to all sponsored activities. Effort reporting is a federal requirement outlined in this circular (J.8.b). Institutions receiving sponsored program grants must maintain an accurate system for identifying and reporting the effort paid for by the funding agency. The effort reporting system assures external sponsors that funds are properly expended for the personnel paid for by the grant. Additionally, sponsors and auditors must also be able to verify that funds allocated for cost-sharing have been provided. The effort reporting system is the mechanism used to document cost-shared salary expenses. In cases of inaccurate, incomplete, or untimely effort reporting, or deviations from
this cost accounting standard are found during an audit, severe penalties and funding disallowances could result.

4. Division of Technology Transfer and Intellectual Property

This Division of Technology Transfer and Intellectual Property is responsible for management of technology disclosures and patenting processes for all KUMC faculty and staff research inventions.

a) Faculty and Staff Assignment of Inventions to KUMC

As a condition of employment at the time of hire, all faculty and staff must agree to assign ownership of all newly created inventions (other than textbooks) that are invented on the campus, or as a result of research and other activity originating on the campus, to KUMC. The Research Institute’s Division of Technology Transfer and Intellectual Property is responsible for assisting faculty and staff in disclosure, protection, and commercialization of such inventions. Members of the faculty and staff shall sign the following agreement at the time of employment:

PATENT AGREEMENT

I, _________________________, acknowledge, accept, and agree to abide by the statement of patent policy published in the Handbook for Faculty and Other Unclassified Staff of the University of Kansas. More specifically, for the effective implementation of that patent policy, I agree to report promptly, through the Research Institute, all inventions conceived by me in the course of research and related activities at the University; (2) to abide by the decisions of the advisory committee of the University appointed as provided in said patent policy; (3) to assist the Research Institute or appropriate patent management firm determined by the Research Institute in the prosecution of patent applications on such inventions; and (4) to assign to the University of Kansas all right, title, and interest in any patents issued on such inventions. Finally, if I work on a project supported in whole or in part by an external sponsoring agency, I agree to comply with all terms and regulations on patents and
inventions prescribed by the agency and accepted by the Research Institute.

I agree to disclose, at the time of employment and thereafter, all inventions in which I participated in the development, for the purpose of determining employer and employee rights in an invention.

I further agree that the term “invention” as used in this agreement means any process, machine, manufacture, composition of matter or design, or any new or useful improvement thereof, and any variety of plant, which is or may be patentable under the Patent Laws of the United States.

Date________________ Signature _______________________

Accepted _______________________________________

(Sign and return to the KUMC Transactions Office)

K.S.A. 44-130 provides that this agreement, which assigns employee rights to inventions to the University of Kansas Medical Center, does not apply to an invention for which no equipment, supplies, facility, or trade secret information of the University was used and which was developed entirely on the employee's own time, unless:

i. the invention relates directly to the business of the University or to the University's actual or demonstrably anticipated research or development; or

ii. the invention results from any work performed by the employee for the University. Please list below all inventions (if any) that you are currently developing. (Attach another page, if necessary.)

b) Board of Regents Patent Policy

http://www.kansasregents.org/policies_procedures (modified 10/2011)

Patents obtained on inventions resulting from institutionally sponsored research shall be retained by the University or may be assigned to an organization (hereinafter called the Organization) independent of the institution and created for the purpose of obtaining patents on inventions, receiving gifts, administering or disposing of such patents, and promoting research at the institution by every proper means. The following regulations shall be followed with respect to patenting inventions:
i. Anyone who conceives an invention resulting from a research project sponsored by the institution shall report the matter to the appropriate research administrator at the institution, who will recommend whether or not to forward it to the Organization.

ii. If the institution or the Organization decides that the invention does not warrant patenting, the inventor is free to patent it. In such a case, however, the institution does not relinquish its right to publish any of the data obtained in the research project.

iii. When any revenue is obtained by or on behalf of the institution from the development or assignment of any patent or from royalties, license fees or other charges based on any patent, not less than twenty-five (25) percent of that revenue shall be paid to the inventor.

iv. The remainder of any revenue mentioned in paragraph 3 shall be used to sponsor further research and research-related activities in the institution. The institution may agree that the Organization may retain a portion of the funds.

v. In the case of cooperative research sponsored in part by an outside corporation or individual, a written contract shall be made between the institution and the cooperating agency. This contract should include a statement of policy substantially equivalent to that outlined below:

"It is agreed by the parties to this contract that all results of experimental work, including inventions, carried on under the direction of the scientific staff of the institution, belong to the institution and to the public and shall be used and controlled so as to produce the greatest benefit to the public. It is understood that if such inventions have commercial value, the cooperating agency shall receive preferential consideration as a prospective licensee, with a view to compensating said cooperating agency in part for the assistance rendered in the investigation. It is further agreed that the name of the institution shall not be used by the cooperating agency in any advertisement, whether with regard to the cooperative agreement or any other related matter."
vi. In case of a research project where it is proposed that all costs, including overhead, salary of the investigator, reasonable rent on the use of equipment, etc., are paid by an outside party, the outside party and the institution shall negotiate the appropriate assignment of all patent rights prior to the provision of any funding by the outside party. The institution shall reserve the right to publish all data of fundamental value to science and technology.

vii. Changes in the above policies may be made by the institution to conform to the requirements of the United States Government when contracting with a federal government agency.

c) University of Kansas Patent Policy

www2.kumc.edu/researchinstitute/tech/index.html

The University of Kansas Medical Center retains the right to a non-exclusive, royalty-free license to practice the technology for educational research purposes and retains the right to require reimbursement for funds expended in support of the invention before revenue is distributed. The overriding philosophy that prevails in determinations related to patent prosecution includes the following concerns: effecting benefits to society, recognition of the inventor or originator, the dissemination of the results of each, the honoring of contractual arrangements with grantors, and assuring the University of current and continuing support for its efforts in providing an environment for creative endeavors.

Procedures for the patent process, including royalty distribution, faculty and institutional conflict of interest, and student involvement in inventions, can be found at the Research Institute’s Division of Technology Transfer and Intellectual Property website: www2.kumc.edu/researchinstitute/tech/index.html.

Procedures pertaining to copyrights can be found at the Research Institute’s Division of Technology Transfer and Intellectual Property website: www2.kumc.edu/researchinstitute/tech/index.html.
d) Classified Research

A Statement of Policy on Classified Research at the University of Kansas was approved by the University Senate on October 23, 1969. It states as follows:

University policy concerning research is derived from the University's basic goals. One such goal is the development of new knowledge, necessarily through research by faculty and students. Another goal is the constant submission of all knowledge, new and old, for reappraisal by anyone concerned. A third goal is the dissemination or teaching of such knowledge as apparently still stands the test of reappraisal, as well as teaching the techniques of reappraisal themselves. And to the extent that the University is a part of the society, which built and maintains it, the security of that society in times of national emergency can be a goal of the University.

The integration of multiple goals traditionally has depended on the exercise of reason and good will within the University community. Thus, the policy which follows states only the general consequences of our multiple goals for the problem of classified research and assumes that specific cases will be fitted to that policy in an open and reasonable manner.

Classified research may be broadly defined as research in which the University accepts from outside some abridgement of the usual requirement that the total procedures, techniques, tools, data, results, and products of the research are open to inspection and appraisal by any legitimately interested person, usually through unrestricted publication by the investigator at such time as he/she deems appropriate. Research may be classified with respect to (1) its primary sources, (2) the process itself, or (3) its product; and the abridgement or classification may be made in the interest of the Government, corporate organizations, or individual persons.

This University will accept no theses, dissertations, research grants, contracts, assignments, or agreements which are classified. The only exceptions to the policy include classification of primary sources, products, processes, or national emergencies.

i. Classification of Primary Sources. Individuals, corporate organizations, and government agencies are sometimes willing
to permit access to private records and to provide personal data for use in research so long as the confidential nature of the materials and the privacy of the individual are respected. In the humanities, such limitations are often placed upon the use of primary sources; in the behavioral sciences, on the identity of the subject; and in the engineering sciences, on data furnished by corporate or government bodies. Such restrictions are acceptable when they are in the best interests of the researchers and the University, and the integrity of the investigators and their work is not compromised.

ii. Classification of Research. The University will allow the momentary classification of research (not to exceed one year) when this classification is required by outside agencies to protect their interests by preserving the privacy of the data, records, and products generated in the processes of the research, provided such momentary classification is deemed in the best interest of the University and all faculty members and students who are involved. In the case of student research, such classification shall be further limited by the proviso that it shall not restrict in any way the department or Graduate School in their usual practices of appointing members to the Student Advisory Committee, nor the student’s freedom to seek expert advice and assistance from the faculty. In addition, it should not restrict the ability and duty of the members of the Student Advisory Committee to inspect the research process and product at any time.

iii. Classification of Product. This momentary classification may not extend beyond one year after the development of the research result or product, the point of development being judged by the responsible investigator. Such momentary classification may be accepted only when its conditions are approved in writing by the Office of Research Administration and the faculty member concerned. When students propose to use the research for a thesis or dissertation or other requirement of a graduate enrollment, such classification will be further limited by the proviso that (1) theses and dissertations performed as part of
such research will be unclassified (or else will not be submitted to the committee for formal defense until they are declassified; i.e., until their procedures, techniques, tools, data, and results are open to inspection by any member of the graduate faculty); and (2) the conditions must be approved in writing by the Graduate School, the students involved, the Office of Research Administration, and the faculty member concerned. It will be the responsibility of the faculty member to secure such approvals.

iv. National Emergency. In times of national emergency declared by the Congress, the University, through its established procedures and channels, may accept classified research grants, contracts, assignments, and agreements in the interests of national security and appropriate to the nature of the emergency and the resources of the University.

Although thus committed to a policy of discouraging classified research projects, the University maintains a facility security clearance to facilitate the acquisition, shortage, and use of classified information where necessary and appropriate for its research activities. Several administrative officers and faculty members hold Department of Defense security clearances. Questions and requests for assistance may be addressed to the University Security Officer through the Director of KUMC’s Police Department.

e) Business and Industry Grants and Contracts

All industry research grants and contracts, with the exception of faculty consulting contracts, must be managed by the Research Institute. Consistent with the University goal to increase cooperation between industry and the University of Kansas Medical Center, faculty are encouraged to support the needs of the biomedical industries in Kansas through collaboration, consultation, grant and contract development, and by providing access, when appropriate, to selected research equipment, faculty, staff, and space. Specific procedures for such access can be found at the following website:

www2.kumc.edu/researchinstitute/tech/index.html
f) Retention of Research Records

Research records are to be retained by the University of Kansas Medical Center for a period of six years after the submission of the final report and close-out procedures on the research project for which the research records were prepared, unless a longer retention period is specified by the sponsor, funding source, or regulation. The retention of the original research records will be the responsibility of the P.I. on behalf of KUMC, but at all times shall remain the property of KUMC unless otherwise specified by law, regulation, or agreement.

This KUMC policy assures that research records are appropriately archived and retained, and that they are available for review under the appropriate circumstances. The P.I. is responsible for the maintenance and retention of research records in accordance with this policy, which exists so KUMC and the P.I. can (1) verify compliance with federal, state, and local laws and supporting regulations; (2) ensure the protection of intellectual property; (3) fulfill contractual obligations and sponsored project agreement requirements; (4) assure scientific integrity; (5) protect human and animal subjects; (6) assure appropriate use of recombinant DNA, etiologic agents, radioactive materials, etc.; and (7) avoid disputes among researchers and protect the rights of all those participating in the research, including postdoctoral fellows, students, and staff.

This policy applies to all KUMC faculty, staff, postdoctoral fellows, students, trainees, and any other individuals at KUMC or KUMC Research Institute involved in the design, conduct, or reporting of research, including all research projects on which they work, regardless of funding source for the project. Specific procedures for implementing this policy may be found at [www2.kumc.edu/researchinstitute](http://www2.kumc.edu/researchinstitute).
The Records Retention Policy shall not be construed to authorize or condone destruction of any document in contemplation of or in anticipation of, or during, any litigation or investigation. This prohibition of destruction is applicable regardless of whether the document is otherwise eligible for or past the point at which it may be destroyed. Questions regarding this requirement should be directed to the Office of the General Counsel.

g) Related Policies and Procedures

- Human Subjects Committee Policy and Procedure Manual
  www2.kumc.edu/researchcompliance/human.htm
- KUMC Record and Retention Schedule
  www2.kumc.edu/finance/recordretention (modified 10/2011)
- KUMC Policies and Procedures
  www.kumc.edu/guides/policyguide.html
- 21 CFR §312.62 – Investigator Record-Keeping and Record Retention for Clinical Drug or Biological Trials
- 21 CFR §812.140 – Investigator Record-Keeping and Record Retention for Device Trials
- ICH Good Clinical Practice Guidelines – Part 4.9, Records and Reports
- OMB Circular A-110, §.53 – Retention and Access Requirements for Records
  www.whitehouse.gov/omb/circulars/a110/a110.html
- Federal Acquisition Regulation (FAR)
  https://www.acquisition.gov/Far/ (modified 10/2011)
- 48 CFR, Part 27 (for contracts awarded by the federal government), §27.403 --Data Rights, general, 52.227-14 Rights in Data – General (Clauses & Forms)
- Kansas Statutes Annotated §75-3504, Public Records Disposition, Agreement
  Term + 5 Years
- National Institutes of Health (NIH) Office of Extramural Research
  http://grants1.nih.gov/grants/oer.htm
- NIH Statement on Sharing Data Policy (Notice #NOT-OD-03-032, released
  February 26, 2003)
D. Principal Investigator (P.I.) or Project Director
All faculty may exercise the privilege of being named as P.I. or project director on proposals submitted for external support. Unclassified professional staff may qualify to serve as P.I.; however, justification to designate a person other than a faculty member as principal investigator must be approved by the appropriate chair, dean, and Vice Chancellor for Research prior to submission of a proposal for external funding. The P.I. is responsible for compliance with all the specific requirements of both the sponsoring agency and KUMC. In all cases, institutional approval must be obtained prior to the submission of the application to the funding agency. The process for gaining institutional approval is outlined in Policies and Procedures for External Funding of Research and Sponsored Programs in this section.

E. Facility and Administrative Overhead (Indirect Costs)
The Vice Chancellor for Research is responsible for ensuring that appropriate F&A costs have been included in every proposal. Facility and administrative overhead revenue plays a vital role in the administration and conduct of research and sponsored programs. It is awarded as a means of offsetting a portion of the expenses inherent in the operation of an organization and the performance of its programs. These expenses include such items as plant operations, maintenance, accounting and administration, core facilities and
services (safety operations, library, etc.) and general and departmental administration. Therefore, it is important that these costs be included on all grants and contracts unless specifically prohibited by the funding source as a condition of the award. Most federal and non-federal funding agencies allow a stipulated rate for calculating these costs. Federal rates are negotiated and information concerning the current rates, base, and the date of agreement is available in the Sponsored Programs Administration Office and the Office of Research-Wichita. The information can be viewed online at http://www2.kumc.edu/researchinstitute/spa/Forms.html (modified 10/2011). Unless the funding source specifically excludes such expenses for the grant program, the P.I. must include such expenses as a line item in the proposed budget. In some cases, funding agencies will allow a direct cost for administrative overhead rather than indirect costs. If this is the case, the P.I. must include this cost.

IX. PROFESSIONAL CONDUCT

A. Faculty Code of Conduct

1. Article I – Title

This code shall be known as the Code of Faculty Rights, Responsibilities and Conduct. Nothing in this document shall contravene the Rules and Regulations of the Faculty Assembly or duly published Board of Regents Regulations on Conduct.

2. Article II – Definitions

When used in this code:

a. The term "University of Kansas Medical Center" encompasses all schools and the hospital including the University of Kansas School of Medicine-Wichita.

b. The term "student" includes all persons taking courses at the University of Kansas Medical Center, both full-time and part-time, enrolled in undergraduate or graduate courses.

c. The term "faculty member" includes all persons specified in Personnel Appointment Policies and Procedures (Section III) of the Handbook for Faculty and Other Unclassified Professional Staff of the University of Kansas Medical Center as it may be amended from time to time.

d. All other terms have their conventional meaning unless the text dictates otherwise.
3. Article III – Faculty Rights

The following enumeration of rights shall not be construed to deny or disparage others retained by faculty members as members of the University community or as citizens of the community at large:

a. Freedom of inquiry, expression and assembly are guaranteed to all faculty members.

b. The right of faculty members to be secure in their persons, offices, laboratory, papers and effects against unlawful searches and seizures is guaranteed.

c. Faculty members shall be exempt from disciplinary action except for conduct proscribed in Article V of this code.

d. No disciplinary sanctions may be imposed upon a faculty member without notice of the charges against the member and an opportunity for a hearing before the Ad Hoc Investigating Committee. At any such hearing the faculty member shall have all rights afforded under the Faculty Hearing or Grievance Procedures.

e. Faculty members, groups and organizations may invite and hear any persons of their own choosing subject only to the requirements for use of the Medical Center as defined in section "g" and the policy regarding campus speakers [see language regarding campus speakers in Section X, Part E].

f. Faculty members shall have the right to participate in the determination of school, department and University policies as stated in the Rules and Regulations of the Faculty Governance.

g. Subject to reasonable conditions imposed to regulate the timeliness of requests, to determine the appropriateness of the space and time of use requested and to insure proper maintenance, Medical Center facilities shall be made available for assignment to faculty members, individually or in groups, even though not formally organized; preference may be given to instructional programs designed for audiences from the Medical Center community.

h. Faculty members, groups or organizations may distribute written material on campus without prior approval. Postings to bulletin boards must be dated and contain the identification of the posting organization and must be approved by the Vice Chancellor for Administration. The person or persons responsible for such material must be clearly indicated. The use of campus mail or email for political purposes is not permitted. The use of campus mail
4. Article IV – Faculty Responsibilities

The responsibilities of the faculty as a whole are multiple and are not to be construed as narrowly limited to any specific list. The same is true of the responsibilities of individual faculty members. Nonetheless the major responsibilities are traditionally divided into teaching or its professional equivalent, research and service. These are the criteria used in awarding promotion and tenure, and they are also the criteria used in faculty evaluations. Each faculty member shall be evaluated annually and shall receive from his or her department chair or dean a written statement evaluating the performance of the faculty member during the preceding year. Typically the faculty member will be evaluated on teaching or its professional equivalent, research and service. Although each faculty member is expected to perform at least adequately in all three areas over time, outstanding effort or performance in any one area because of institutional needs or personal inclinations may, with the approval of the department chair or dean, offset less effort (but not below acceptable performance) in another area in any given year or approved period of time.

a) Teaching

Faculty who teach are expected to teach courses in their department or school in accordance with the needs, requirements and expectations thereof and the general requirements concerning the conduct of classes specified in various University regulations.

Good teaching requires continual application and effort. Faculty who teach are expected to keep abreast of new developments in their fields and must maintain credentials as scholars so that they are part of the creative process by which the frontiers of knowledge and culture are continually being expanded. A teacher should be engaged with his or her particular discipline and should be able to convey to the students the value of the subject.

Teaching duties of a professor include not only classroom activities, but also such duties as preparing course syllabi, lectures and examinations; being available for consultation; supervising independent work undertaken by students; directing theses and dissertations; evaluating students; advising; and participating in curriculum planning. A professor is expected to treat students with courtesy and to respect their rights, including, but not limited to,
academic freedom and those rights as outlined in the Student Code of Rights and Responsibilities [see the KUMC Student Handbook].

Academic advising is a part of the teaching responsibility of faculty who teach. In the case of non-teaching faculty, comparable professional responsibilities shall be those defined by their departments and the relevant standards of their disciplines.

b) Research

Research includes critical evaluation, artistic creation, and performance, as well as discovery and interpretation. Research appropriate to one's department and field is more specifically defined by each department or field in its criteria for promotion and tenure. For general guidelines concerning research and scholarship, see Section VIII of this handbook. Publication is the normal outlet for research in many areas other than the visual and performing arts. Scholarship that does not result in publication or public performance may be valuable for keeping one's teaching current, but it does not subject one's ideas or performance to the critical scrutiny of peers necessary for expanding the frontiers of knowledge and culture.

c) Service

Service covers faculty activity in a number of different areas.

1) Service to the Medical Center. This may include patient care and treatment. For these health care faculty, the responsibility must be performed with the best interests of the patient in mind [see the Patient Bill of Rights].

2) Service to the Academic Unit. Service to the academic unit is expected of all faculty. It is essential that all members of the academic unit participate in the decision-making necessary for the working and ultimately the health of the academic unit. Ideally, each faculty member participates regularly and fully in the academic unit's activities. Faculty members are typically expected to attend faculty and unit meetings; to serve on committees; to contribute to planning, development and scheduling activities of the academic unit; where appropriate, to review graduate students; and to refrain from activities that disrupt proper operations of the academic unit.
3) *Service to the school and the University.* Faculty members are expected during the period of their employment at the University to bear their fair share of committee work on the levels of the school and the University.

4) *Service to the profession.* Faculty members are expected to be active in their professional fields. This includes belonging to and taking part in the professional activities of their field on the local, regional, national and international levels, although not all faculty will be active on all these levels.

5) *Service to the community, state, nation, world.* This use of one’s academic expertise to help community, state, nation and world is appropriate service, although the extent to which one contributes outside the University depends on one’s field, inclination, opportunity and other relevant factors.

Of the many responsibilities of faculty members, the following are enumerated because of their importance to the maintenance of appropriate faculty-student relations:

d) **Protection Against Improper Disclosure**

Information about student views, beliefs and political association that professors acquire in the course of their work as instructors, advisers and counselors should be considered confidential. An improper disclosure is a serious professional offense. Judgments of student ability and character may be provided under appropriate circumstances, normally with the knowledge or consent of the student.

e) **Privacy of Records**

Faculty members shall accord respect to the essentially confidential relationship between the faculty/staff and the students by preserving to the maximum extent possible the privacy of all records relating to students.

f) **Regular Class Times**

A member of the faculty is expected to meet classes at the regularly scheduled hour and to carry out his/her other academic responsibilities. If a faculty member considers it necessary for sound academic reasons to move a class to another time, advance notice must be given to the class and arrangements must be made to assure that the change does not work undue hardship on any member of the class. If prevented from meeting classes or
carrying out other academic responsibilities, a faculty member must, if physically able to do so, make satisfactory advance arrangements and communicate, preferably in writing, the nature of these arrangements to his/her chair (or dean, if the school in question is not organized departmentally). Such arrangements are subject to the approval of the appropriate chair or dean. Each department or school must define what arrangements are considered "satisfactory" in that unit and appropriately publicize its definition. Failure to comply with the procedures outlined in this paragraph may result in the placement of the faculty member on administratively determined leave without pay by the appropriate dean, with the approval of the Executive Vice Chancellor. When such leave without pay is imposed, the dean shall notify the faculty member of the action and provide the reasons therefore. In addition, the notice shall advise the faculty member that the leave without pay shall cease upon the faculty member's notification to the dean that the faculty member has resumed his/her attendance or academic responsibilities or otherwise made satisfactory arrangements. Resumption of satisfactory arrangements shall be confirmed by either the chair or dean. Finally, the notice shall advise the faculty member that if he/she believes the leave without pay to have been improperly imposed, review may be sought by requesting a hearing before the Grievance Committee.

5. Article V – Proscribed Conduct

Such conduct falls into the following categories:

a. Sustained overall failure to meet academic responsibilities may constitute willful failure of a faculty member to carry out his or her academic responsibilities. Cumulative absences or failures to perform in less grievous matters are more serious than occasional lapses over long periods of time.

b. Violation of lawful published Medical Center regulations.

c. Behavior in the discharge of duties that violate commonly accepted standards of professional ethics [see also the University of Kansas Policy on Consenting Relationships in this section].

d. Knowingly furnishing false information to the Medical Center or forging, altering or misusing documents or instruments of identification with intent to defraud.

e. Failure to respect the rights of all persons or academic freedom of students or faculty members. Behavior in the discharge of his/her duties that violates
commonly accepted standards of professional ethics as defined, for example, in the statement of professional ethics adopted by the 52nd Annual Meeting of the AAUP, April 1966 [see also the University of Kansas Policy on Consenting Relationships in this section]. Abusive or unprofessional treatment of students, faculty or other members of the University fall within this category. Repeated infractions of one's responsibilities, whether informal and/or formal admonitions, warnings or reprimands have occurred, are more serious than initial infractions of the same type. Also proscribed is any form of sexual harassment or discrimination on the basis of sex, race, religion, age, national origin, disability or sexual orientation.

f. Plagiarism, misrepresentation or fraud in classroom presentations, published works, or published presentations.

g. Committing an act that involves such moral turpitude may render the faculty member unfit for his/her position. As used in this section, conduct involving moral turpitude means intentional conduct, which is gravely injurious to another person or to society and which constitutes a substantial deviation from the accepted standards of duty owed by a person to other persons and society.

If another University tribunal or body exists that might properly entertain a claim or charge of conduct proscribed in Article V, the processes of that body or tribunal normally must first be exhausted before the jurisdiction of the appropriate hearing or grievance committee can be invoked. However, in extraordinary circumstances, such committee may exercise original jurisdiction notwithstanding failure to exhaust remedies available in other University tribunals. Whether such extraordinary circumstances exist as warrant the exercise of original jurisdiction by the committee shall be determined by that committee.

6. Article VI – Sanctions

The sanctions listed here are formal sanctions and are steps taken beyond informal complaints about one's performance; i.e., verbal admonitions to improve or change one's behavior or negative comments concerning one's performance as stated in the annual evaluations. One or more of the following sanctions, listed in order of increasing severity, may be imposed for proscribed conduct by a faculty member. Although listed in order of severity, the sanctions need not be applied serially, and a more serious sanction may be applied without a less serious one having been previously applied. Sanctions a, b, c and d below are considered corrective and not
subject to appeal. Sanctions under e below are considered punitive and subject to appeal.

a) Warning
   Notice in writing that continuation or repetition of conduct found wrongful, within a period of time stated in the warning, may be cause for more severe disciplinary action.

b) Restitution
   Reimbursement for damage to or misappropriation of property. This may take the form of appropriate service or other compensation.

c) Recommendation of Censure
   Recommendation to the Executive Vice Chancellor and Chancellor that a faculty member be formally reprimanded.

d) Recommendation of Suspension
   Recommendation to the Executive Vice Chancellor and Chancellor that a faculty member be excluded from teaching and other specified privileges or activities for a definite period not in excess of two years.

e) Recommendation of Dismissal or Suspension Without Pay
   Recommendation to the Executive Vice Chancellor and Chancellor that a faculty member be dismissed or suspended without pay. Upon receipt of a recommendation of suspension or dismissal of a tenured faculty member, the Executive Vice Chancellor shall request a Grievance Committee to review the entire proceedings and records that culminated in the recommendation. After affording an opportunity to the affected faculty member to be heard, the Grievance Committee shall make its independent recommendation to the Executive Vice Chancellor.

The 73rd Annual Meeting of the AAUP (1987) endorsed a "Statement on Professional Ethics" [see Section III, Part 2, of this handbook]. It is a revision of a statement originally adopted in 1966. Many other professional organizations have also adopted codes by which unethical conduct can be judged.

B. Standards of Conduct in the Clinical Setting
   The unclassified clinical staff has a duty to conduct themselves in a manner that demonstrates competence, adherence to the ethical standards of their profession and the
ability to work harmoniously with others in a manner that insures that patients will receive safe, high-quality medical care.

In addition to the Faculty Code of Conduct, medical or physician faculty engaged in the patient care setting are also governed by the Medical Staff Bylaws (link modified 10/2011), which are available in the Office of the Chief of Staff of the hospital, and the Hospital Ethics Handbook and the Patients' Rights brochure. With respect to hospital privileges, these regulations must be adhered to and any interpretation of faculty rights is not intended to supersede the Medical Staff Bylaws Rules and Regulations, Hospital Ethics Handbook or the Patients' Bill of Rights brochure. In all cases, the behavior and conduct of the unclassified clinical staff may not be lower than the stated behavioral standards of the hospital or the medical staff.

The University of Kansas Hospital is committed to respect and protect the rights of each patient. The Hospital Ethics Handbook, prepared by the Hospital/Medical Staff Ethics Committee, provides information regarding guidelines and policies that have been adopted by this institution in order to respond to ethical issues. The Patient's Bill of Rights and the Hospital Ethics Handbook, available in the Hospital Administration offices, are guides to the various roles, relationships, duties and associated obligations required of a clinical staff member.

An important aspect of professional conduct in the clinical setting is the expectation that practitioners will identify and report deviations from standards that may impact on patient care so that problems are resolved, improvements are made, and patients are assured of high-quality health care. If a faculty member's clinical privileges are removed, this would constitute grounds for removal of clinical teaching privileges in the university. The operational linkages between the quality improvement functions relating to patient care, the risk management functions, and institutional safety programs, place specific reporting responsibilities on staff members. This information may be obtained from the Office of the General Counsel. A copy of “Safety and Health Programs and Policies: An Overview” may be obtained from the Safety Office.

C. Standard of Academic Conduct

1. Academic Misconduct by Faculty

This shall include grading student work by criteria other than academic performance or repeated and willful neglect in the discharge of duly-assigned teaching duties.

Every instructor shall make clear, at the beginning of each course, his or her rules for the preparation of classroom assignments, collateral reading, notebooks, or other outside work, in order that his or her
students may not, through ignorance, subject themselves to the charge of academic misconduct. Academic misconduct by a student shall include giving or receiving of unauthorized aid on examinations or in the preparation of notebooks, themes, reports or other assignments, or knowingly misrepresenting the source of any academic work.

The regulations also define the correct modes of treating academic misconduct on the part of a student or an instructor. The following sanctions may be imposed upon a student or an instructor: admonition, warning, or censure. In addition, a student may be subjected to: reduction of grade, disciplinary probation, suspension, or expulsion. An instructor may also be recommended for suspension or dismissal for academic misconduct.

Alleged instances of academic misconduct by a student are initially directed to the department chair. If necessary, the alleged instance may be taken to the dean of the school or the academic committee of that school or the Executive Vice Chancellor. With regard to all cases of alleged academic misconduct, detailed procedures are published and may be obtained from the office of the dean of the appropriate school.

In all alleged cases of academic misconduct, whether by a student or a faculty member, care must be exercised to preserve the requirements of due process.

2. Interpersonal Relationships

In keeping with the accepted standards of professional ethics, faculty members are expected to avoid relationships that may lead to potential conflicts of interest in their role as teacher, advisor and evaluator of students. If such a relationship should develop after a professional one has been established, the instructor will remove himself or herself from the professional role. Such a relationship, whether between a student and a faculty member or a graduate student acting as an instructor, constitutes a potential conflict of interest, especially as perceived by other students and faculty members, and therefore should be scrupulously avoided. This is not intended to affect the normal and expected mentorship that should include both personal and intellectual advising.
D. Guidelines for Conduct of Research and Publication

It is recognized that there is a tradition in scientific research to which investigators have long adhered. These guidelines are intended to incorporate this tradition for the benefit especially of those individuals who are beginning their careers in research. The concepts expressed here are best implemented by understanding the interactive nature of many scholarly activities. Science is best served by careful attention to accuracy and reproducibility of results within and between groups of investigators.

1. Graduate students, postdoctoral and other research trainees should be under the guidance of a faculty member who is responsible for supervision of the trainee's research.

2. The ratio of trainees to faculty preceptors should be small enough to encourage close interaction in all aspects of the research including concepts, design of experiments, techniques, data analysis and preparation of data for publication.

3. Interaction among trainees and faculty in the form of discussion and presentation of research in progress should not be limited to one faculty member and his/her trainees but should involve members of associated research groups. Often this interaction will be along departmental lines but interdepartmental interactions in research are also to be encouraged. Such interactions should be directed both to contribute to the research efforts of the groups and to provide informal peer review.

4. Custody of all original laboratory data must be retained by the unit in which they are generated. Copies may be made by the investigators in the unit for personal use. The time of retention of original data should be dictated on the basis of reasonable need for reference to the data.

5. The only criterion for authorship of a manuscript is that an individual has made a significant contribution to the research. Technical services are not sufficient reason for authorship unless there has been substantive scientific interaction between the individuals involved. When a trainee is preparing a manuscript, the faculty member responsible for the trainee should review the manuscript and give advice before approving the final draft. All authors should review and approve the final draft before submission for publication.

6. The number of publications to be reviewed at times of faculty appointment or promotion should be limited in order to encourage and reward bibliographies
containing substantive publications rather than those including many insubstantial or fragmented reports. Faculty members should discourage trainees from preparing manuscripts without adequate tests of reproducibility or assessment of significance or from preparing multiple manuscripts differing only slightly in content.

7. Because each research unit addresses different scientific problems with different methods, each unit should develop its own specific guidelines to identify practices that seem most likely to enhance the quality of research conducted by its members. Those guidelines should be in written form and should be provided to the new investigator upon starting work.

E. Guidelines for Dealing with Allegations of Scientific and Other Scholarly Misconduct

Anyone having reason to believe that a faculty or staff member has falsified research results, plagiarized another's work endeavor, violated regulations or ethical codes for treatment of human and animal subjects, or otherwise acted dishonestly in scholarly activities should report the matter to the chair (or other comparable administrator) of the department in which the accused is primarily appointed or employed. This accusation is assumed to be a "good faith allegation." The institution must protect the rights and reputations of all parties involved, including individuals who report perceived misconduct in good faith. A "good faith" allegation means that this individual honestly believed that the allegation was true. Thus, an allegation may be made in good faith even if after investigation the allegation is not proven to be true, or even if the allegation was made for personal reasons. Therefore, if the allegation is made in "good faith," under the assurance program the individual may not be retaliated against for making the allegation. Institutions and researchers must guard against the initial reaction of blaming, firing or ostracizing the individual. The parties shall have 10 working days to achieve resolution. Prior to any action, the chair shall inform the accused of the nature of the accusation. Within five working days the chair shall notify the dean and Executive Vice Chancellor in writing that an accusation has been made and that an inquiry and attempted resolution has been initiated by the chair. Acknowledging that misunderstandings between accuser and accused may be the basis for such allegations, the chair, the accused, and the accuser shall meet and make a good faith effort to achieve a mutual resolution of the matter. Such resolution shall be acknowledged in writing by the chair, the accuser, and the accused. Should a funding agency or other regulations require, the resolution shall be communicated to the funding agency. The resolution shall be forwarded to the dean and the Executive Vice Chancellor (or designee).
Should resolution attempts fail, the accuser shall submit his/her allegations to the chair, in writing, within the next seven working days. [In the event the accuser does not submit the allegations in writing, the chair may, at his/her discretion, submit the allegation(s) in writing to the dean.] Upon receipt of the written allegations, the chair shall transmit the allegations and a summary of the attempted resolution to the dean. Thereafter, the dean shall further investigate the allegations and within 10 working days shall attempt to achieve a mutual resolution of the matter between the parties. If a resolution is reached, the resolution shall be in writing and signed by the dean, the accuser, and the accused. The resolutions shall be forwarded to the Executive Vice Chancellor (or designee).

If the dean is unable to achieve a resolution of the matter, he/she shall report the matter in writing, along with all information obtained concerning it, to the Executive Vice Chancellor (or designee). Within 10 working days of receipt of the material, the Executive Vice Chancellor (or designee) shall (a) appoint an ad hoc investigating committee (composed as described in the following paragraph); (b) notify the accused of the nature of the charges and that an investigation will be initiated; (c) notify the Vice Chancellor for Research; and (d) notify the appropriate funding agency in accordance with the policy set forth by that agency.

The Ad Hoc Investigating Committee shall consist of six tenured faculty members of the University of Kansas Medical Center, the KU School of Medicine-Wichita, or the Lawrence campus without conflict and with knowledge of the individual's academic field. The chair of this committee shall be designated by the Executive Vice Chancellor (or designee) and shall have no vote. External scientists may be used where warranted by the nature of the research field or by the nature of the allegations. The Vice Chancellor for Research shall be a non-voting ex officio member of the investigating committee and shall maintain the records of the proceedings.

The committee shall, within 10 working days or as soon as reasonably possible, initiate a thorough investigation to ascertain the facts of the case to determine whether the accused has engaged in scientific or scholarly misconduct, and, if so, to what extent. The investigation shall be conducted in a collegial manner. No legal representatives or other advisors shall be permitted in these proceedings. An observer from the University of Kansas American Association of University Professors shall be permitted to be present during the investigation meetings but the observer shall not participate in the discussions.

Early in the course of the investigation, the committee shall discuss the matter in confidence with the accused and the accuser(s). The committee shall have the right to request all relevant information and documents. The committee shall also have the right
to discuss the matter in confidence with any persons who may have information relevant to the allegations. Throughout the investigation the committee shall be sensitive to the effects of the proceedings on all individuals who need to be involved in the investigation. The investigation shall be closed to the public unless the accused requests that it be open; however, all committee deliberations shall be closed to the public. As the investigation proceeds, the Executive Vice Chancellor (or designee), in consultation with the Vice Chancellor for Research, shall inform the external funding agency (or agencies) in accordance with the policy set forth by the agency. If the committee finds that there exists a sufficient basis in fact to conclude that the accused committed scientific or scholarly misconduct, the committee shall report this finding to the Executive Vice Chancellor.

Recommendations shall include appropriate sanctions as well as adequate steps to ensure that the institution meets its obligations to third parties affected by the misconduct, including, where relevant, patients, referring physicians, granting agencies and other research sponsors, collaborators and the scientific community. The aforementioned process should be completed within 120 calendar days.

The Executive Vice Chancellor (or designee) shall consider the committee's recommendations and make a decision within seven working days, which shall be in writing, and sent immediately to the chair of the investigating committee and to the accused individual(s) and shall review the decision in an interview with the accuser(s). If the Executive Vice Chancellor (or designee) determines that the accused did commit scientific or scholarly misconduct, the Executive Vice Chancellor (or designee) shall review the matter with the individual and take such action as deemed appropriate in accordance with established University policies and procedures on disciplinary sanctions or dismissal for cause pursuant to the Faculty Code of Conduct, Section IX. In addition, the Executive Vice Chancellor will follow the policies and procedures set forth by the funding agency. Separate disciplinary actions may be imposed by the funding agency.

If the Executive Vice Chancellor (or designee) determines that the accused did not commit scientific or scholarly misconduct and that no action is appropriate, the investigative file will be closed and no reference to it will appear in the individual's personnel file. In addition, if a funding agency has been notified, the Executive Vice Chancellor will inform the agency, in writing, of the determination. Provided further, all individuals who were officially contacted or asked to provide information regarding the accusation will be notified in writing of the determination of innocence.

In instances in which a department chair (or comparable administrator) is accused, allegations shall be reported to the dean of the appropriate school, who will
assume the role delegated to the chair in this procedure. The dean shall summarize the findings to the Executive Vice Chancellor (or designee), to the accused and to the accuser. In instances in which a dean is accused, allegations shall be reported directly to the Executive Vice Chancellor.

It is understood that certain of the above-mentioned time frames may need to be adjusted. Under these conditions, the Executive Vice Chancellor (or designee) should make the changes and notify the involved parties in writing.

If the accused directly involved in resolution wishes to appeal the decision of the Executive Vice Chancellor (or designee), he/she may avail himself/herself of the appropriate institutional grievance procedures within 14 calendar days of notification by the Executive Vice Chancellor [see Section III, Procedure for Grievance].

F. Conflict of Interest – Regents' Policy
For specific language from the Board of Regents Policy regarding conflict of interest, see Section III, Part 2B3, Commitment of Time, Conflict of Interest, Consulting and Other Employment. (see also Section III, Part 3B2)

G. KUMC Conflict of Interest and Conflict of Time Commitment Reporting Procedures
The Board of Regents’ and University of Kansas Medical Center Conflict of Interest (COI) and Conflict of Time Commitment (COC) policies require disclosure of any potential COI or COC by all full- and part-time faculty and unclassified staff.

Accordingly, every employee must fill out a Declaration form/Disclosure form as part of their orientation or annual appointment process. All responses will be kept confidential.

Responses should be sent to the Office of the Vice Chancellor for Research. If a potential conflict is identified, then the forms will be forwarded to the COI Committee. The committee will work to resolve the potential conflict with input from the employee. These forms will then be sent to Human Resources and the information will be considered part of an employee's personnel file and thus not public information.

Faculty members who submit grant proposals must provide assurance that he/she and all faculty and unclassified personnel on the grant proposal have complied with the institutional policy. If a potential conflict is identified, the grant may not be funded until the conflict is resolved.
H. State Regulations on Conflict of Interest

All employees of the University are subject to the provisions of state law on Conflict of Interest embodied in K.S.A. 46-215 et seq. These provisions proscribe certain kinds of conduct by state employees, require public disclosure of certain outside interests, and circumscribe political activity if the person engaged in such activity is not registered as a lobbyist. Any questions concerning this law should be directed to the Office of the General Counsel.

I. Employment- and Enrollment-Related Professional Activities and Guidelines

The policies and procedures for employment- and enrollment-related professional activities do not apply to personal professional activities such as consulting and outside work activities. The Medical Center recognizes that professional activities by its employees in accomplishing teaching, research and service, and enrollment-related activity by its students, may lead to the creation of new knowledge, art forms, etc., which will benefit society.

It is also recognized that many such results of professional activity may be best disseminated through commercial channels. To assure that commercial interests do not subvert the objectives of the Medical Center, misuse public moneys, or interfere with the proper activities of faculty, staff and students, it is necessary that everyone adhere to policies and procedures established by the Medical Center community to conserve the interests of all concerned with the results of professional activity, the originator(s), the Medical Center and others who provide support, and the public.

1. Policies

The policies governing employment- and enrollment-related professional activities at the Medical Center and the dissemination of the results therefrom are as follows:

a. The Medical Center encourages its members (faculty, staff, and students) to engage in professional activities which are consonant with the Medical Center's objectives. It is expected that the results of such professional activities will be made readily available to the public through normal professional channels; e.g., journal publication.

b. The Medical Center shall support, within the limits of its capability, professional activities of members of the Medical Center community by
providing facilities, materials, and services, and by assisting in procuring
outside agency support.

c. The Medical Center shall insure that the dissemination of the results of
professional activities will be directed toward the greatest public benefit
consistent with the rights of the originator(s), the Medical Center, and outside
agencies which may have supported those activities.

2. Procedures

In furtherance of these policies, the following procedures are established:

a. Members of the Medical Center community shall report results (or anticipated
results) of professional activity that they feel are of potential commercial value,
or which they would like to see promoted, in advance of releasing the results
or of entering into any contractual agreement for release or promotion of such
results.

b. The report shall be forwarded to the Office of the Vice Chancellor for
Research for evaluation. This evaluation shall be made in a timely manner by
a committee consisting of (a) faculty members and/or faculty equivalent
members who are knowledgeable in the area of generally professional activity
being evaluated, (b) the originator(s), (c) a representative from the Office of
the Vice Chancellor for Research, and (d) designated representatives for legal
and fiscal advice. The result (or anticipated result) of professional activity
shall be evaluated as to its potential value to society and the committee shall
make a recommendation as to whether or not the Medical Center shall offer
its name and/or services in patenting or copyrighting, or otherwise interest
itself in the effective dissemination of the result. In making this
recommendation, the committee shall be guided by Policy C above, and in
particular shall recognize any prior obligation or restriction either accepted by
the Medical Center in connection with sponsored support, or regularly
established by, within and for a Medical Center Division.

c. If the evaluation committee recommends that the Medical Center shall offer its
name and/or services in patenting or copyrighting, or otherwise shall interest
itself in the effective dissemination of the results (or anticipated results) of
professional activity, the committee shall further agree upon the distribution of
financial return generated from the dissemination. This agreement shall cover
(a) the procedure for reimbursing the Medical Center for the use of
customarily priceable materials, facilities, and services as well as for
expenses incurred by the Medical Center in disseminating the results, and (b)
the equitable distribution of financial return, beyond expenses, between the originator(s) and the Medical Center. Such an agreement must always honor prior agreements made with outside agencies supporting the professional activity. The Medical Center's share of financial return after expenses shall be devoted to further support of professional activity by members of the Medical Center community. The committee may recommend ways in which the Medical Center's share shall be used to this end.

If the evaluation committee recommends that the Medical Center should neither offer its name and/or services in patenting or copyright nor otherwise interest itself in the effective dissemination of the results (or anticipated results) of professional activity, the right to do so rests solely with the originator(s) subject to (a) any contractual agreements with outside supporting agencies and (b) reimbursement, to the extent feasible from financial returns received, of recognizable costs incurred by the Medical Center during the development of the results.

3. Guidelines for Administration of Medical Center Policy on Employment- and Enrollment-Related Professional Activities

a. The official Medical Center policies and general procedures on Employment- and Enrollment-Related Professional Activities are described in the preceding statement which was reviewed by Medical Center Governance. Its principal concern is the proper treatment and management of the products of professional activities including but not limited to inventions, works or art or literature, computer programs and other writings. Its regular and equitable implementation in the several colleges, schools, and divisions is a desirable objective in the best interest of the faculty, the students, the Medical Center, and the public, and these guidelines are promulgated to assist toward that end.

b. The statement of policies and general procedures shall be incorporated in the Handbook for Faculty and Other Unclassified Staff and in any handbooks or similar publications intended for general distribution to the student body and to the Classified Service. Copies of the statement and of these administrative guidelines shall be available in the offices of deans, directors, and vice chancellors for employees and students who may request them.

d. Any additional policy and/or procedure statements issued in and for particular colleges, schools, and divisions shall be consistent with the Medical Center
statement and these administrative guidelines, although of course the additional statements may be more specific and more detailed. In case of apparent conflict, the Medical Center Statement and these administrative guidelines shall always control.

e. The three fundamental policies enunciated in the statement prescribe the general behavior of the Medical Center and those administrative officials charged to guide and assure that behavior. The four general procedures outlined in the statement prescribe the behavior of the individual employee or student as well as of the institution and its administrative officials. The prescription of reporting responsibility of the individual employee or student given in general procedure "a" is crucial.

f. Any member of the Medical Center community (employee or student) shall report results (or anticipated results) of employment- or enrollment-related professional activity that he/she feels are of potential commercial value, or which he/she would like to see promoted, in advance of releasing the results or of entering into any contractual agreement for release or promotion of such results, to the Vice Chancellor for Research. The report shall include a description of the work, a statement of its potential commercial value and if applicable, the originator's proposal for promotion of the work without Medical Center intervention, sufficient information for evaluation of the feasibility of such promotion should be provided.

g. Employment or enrollment-related activities do not include personal activities undertaken outside the scope of employment or enrollment. In addition, scholarly works, including contributions to collective works, literary works, and all works of art are to be considered to be created "outside the scope of employment" of the authors for purposes of copyright ownership, unless their creation is in fulfillment of employment- or enrollment-related assignments or responsibilities, whether or not their creation involves the use of Medical Center facilities and resources. These works will be owned by the University of Kansas Medical Center. The division of credit and income will follow our patent policy. This provision does not affect a Medical Center employee's responsibilities under the consulting or conflict of interest policies of the Board of Regents or of the Medical Center [see Also Section VIII, Copyright Regulations, and Section VIII, C.4].

h. The Vice Chancellor for Research will appoint an ad hoc committee, including a representative from the KUMC Research Institute, to assist with
the evaluation. The committee's first responsibility shall be to determine whether the report in fact describes results related to the originator's employment by or enrollment in the Medical Center. Appropriate considerations include the use of the originator's "Medical Center time," or of Medical Center facilities or services in the conception and/or development of the results, or their relation to class or course assignments, thesis or dissertation subjects, or assigned tasks in the employment relationship.

If the committee finds no such relationship, then it shall so report to the Vice Chancellor for Research. If the Vice Chancellor concurs, all putative Medical Center right, title, and interest in the reported results shall be released to the originator in writing with a copy to the General Counsel. The originator's right to disseminate, market, or otherwise use the results (or anticipated results) shall be subject to (a) any contractual agreements with outside supporting agencies and (b) reimbursement, to the extent feasible from financial returns received, of recognizable costs incurred by the Medical Center during development of the results. Such reimbursement shall be determined by negotiation between the originator and the Vice Chancellor for Research, or their designee.

i. If the Committee finds an employment or enrollment-relationship, it shall proceed to evaluate the originator's estimate of potential commercial value, or the originator's premise of potential public or social usefulness. Appropriate considerations are novelty and originality, likely cost of development and dissemination, market size, product life, nature and breadth of the particular public or part of society ostensibly to benefit from dissemination of the results and benefit to the Medical Center in terms of both financial return and public good will. If the originator has proposed to promote the work without Medical Center intervention, an evaluation of the feasibility of that proposal should be provided. It is recognized that the committee will not generally be expert in these considerations but will exercise with good will its general intelligence and common sense in essentially a non-technical review by well-intentioned laymen. In addition, the committee shall whenever possible also take advantage of evaluation and advisory services available through standing royalty-sharing contracts negotiated in advance by the Vice Chancellor for Research with such development and management organizations as appropriate or through
individual agreements similarly negotiated for particular cases with appropriate organizations, corporations, companies, or individuals.

If the committee is convinced that no significant net commercial return is likely to accrue to the Medical Center, or no substantial public or social benefit will derive from dissemination of the results through Medical Center intervention, it shall so report to the Vice Chancellor who shall proceed as in "g" above. Further, where special circumstances warrant, the committee may recommend and the Vice Chancellor may negotiate a release contingent upon the originator's agreement to pay the Medical Center a share, not to exceed 25 percent, of any net financial return that may accrue from the dissemination of the results through the efforts of the originator.

In cases of reasonable doubt that significant net commercial return is likely to accrue or substantial public or social benefit will derive from dissemination of the results through Medical Center intervention, the committee shall endorse the report, add its findings, and forward the file to the Vice Chancellor for Research for final evaluation.

j. If the committee concludes that a significant net return is likely to accrue to the Medical Center or a substantial public or social benefit is likely to derive from dissemination of the results, but that Medical Center intervention is not appropriate, it shall so report to the Vice Chancellor for Research who, if concurring, shall negotiate a release contingent upon the originator's agreement to pay the Medical Center a share not to exceed 25 percent of any net financial return that may accrue from the dissemination of the results through the efforts of the originator. If the Vice Chancellor does not concur, the file shall be forwarded to the Executive Vice Chancellor as prescribed in item "n" below. In the event the originator is unable or unwilling to proceed with the dissemination of the product within a reasonable time after release of it by the Medical Center, the Medical Center may terminate its release and proceed to disseminate the product in accordance with the procedures outlined in these guidelines.

k. If the committee concludes a significant net return is likely to accrue to the Medical Center or a substantial public or social benefit is likely to derive from dissemination of the results through Medical Center intervention, it shall recommend to the Vice Chancellor for Research appropriate steps to disseminate the results, whether through patenting, copyright registration, sale or lease of rights for dissemination on a proprietary basis. In making
this recommendation, the committee shall be guided by "c" in the general statement, and in particular shall recognize any prior obligation or restriction either accepted by the Medical Center in connection with sponsored support, or regularly established by, within, and for a Medical Center college, school or division.

l. The committee shall recommend whether the Medical Center's name may be used in marketing or otherwise disseminating the results, and if so, to what extent and in what ways. The committee shall recommend a formula and proposed agreement with the originator for the distribution of financial return from the dissemination. The formula and agreement shall cover (a) the procedure for reimbursing the Medical Center for the use of customarily priceable materials, facilities, and services as well as for expenses incurred by the Medical Center in disseminating the results, and (b) the equitable distribution of financial return, beyond all expenses, between the originator and the Medical Center. The agreement must always honor prior agreements made with outside agencies supporting the professional activity or participating in the evaluation, development, and dissemination of the results. Of the total net financial return to the Medical Center and originator, not less than 15 percent shall be allowed the originator, and the committee is encouraged, as circumstances of particular cases may justify, to increase this percentage with a maximum of 50 percent to the originator.

m. The Medical Center's share of financial return after all expenses shall be deposited in a special account in the Research Institute, Inc. there to be used one-half for expenses of dissemination of results approved by these procedures and one-half for the benefit of the originator's department or division. The committee may make special recommendations for the use of such funds which may derive from particular disseminations.

n. If the Vice Chancellor for Research concurs in the committee's several recommendations, he/she shall proceed to implement them in concert with the Medical Center General Counsel.

o. If the Vice Chancellor for Research does not concur with one or more recommendations of the committee, and consultation with the committee does not reconcile the differences, the Vice Chancellor shall transmit the entire file with comments to the Executive Vice Chancellor for final determination and instructions for action. There can be no appeal within the Medical Center to the Executive Vice Chancellor's decision.
p. In all legal matters arising from the application of the general statement and these administrative guidelines, the Medical Center shall be guided by the opinions of the Medical Center General Counsel. In all fiscal matters similarly arising, the Medical Center Associate Vice Chancellor for Administration shall be consulted.

q. In these Guidelines reference to a "member of the Medical Center community," an "employee or student," or an "originator" shall always imply "members," "employees or students," or "originators" when more than a single person is involved in a single report of results or anticipated results.

r. All Kansas Regents’ institutions are entitled to royalty-free licenses to use any of the works that have been developed from employment- or enrollment-related activities provided such works are used in bona fide instructional or research activities of the institution. The Vice Chancellor for Research shall make the determination of what constitutes a bona fide activity.

J. Political Activity
See specific language in the Board of Regents policy with regard to political activity, see Section III, Part 3B4.

K. Lobbying Regulations
Recently enacted legislation considerably tightens state control over lobbying activities. Any faculty or unclassified staff efforts to support or oppose either legislation or regulatory action which tie the identity of the faculty member to the University should only be carried out after consultation with the Office of the General Counsel. All expenditures made to entertain, or otherwise influence, legislators or other state officials should be reported before the fact to the Executive Vice Chancellor's Office and the Chancellor's Office.

L. Policy on Consenting Relationships
The University of Kansas has a tradition of commitment to providing an academic community environment that, without discrimination, fosters intellectual, professional and personal growth. Central to the preservation of this environment is the trust that should characterize all interactions among those working toward the common goal of the institution, namely, our students, faculty, unclassified staff, and classified personnel. This trust is put at risk when members of the University community engage in consenting romantic or sexual relationships that involve persons of unequal power, for example, administrator and faculty, faculty and student, supervisor and employee. Because the
University strongly disapproves of consenting relationships where a professional power differential exists, this policy statement is being promulgated.

1. A faculty member will always be treated as having such a power differential if the student is in an educational experience where the faculty member has authority to assign grades. The same holds in other circumstances as well; for example, when a faculty member serves on thesis, dissertation, or scholarship awards committees. These principles also apply to administrators and supervisors in their relationships with students, faculty, unclassified staff, and classified personnel.

2. In the view of the University of Kansas, romantic or sexual relationships between persons of unequal power, even if consenting, are unwise and often contrary to professional ethics. Such a relationship tends to impair one's ability to make an objective judgment of the performance of the student or employee. Those who choose to ignore these standards will stand responsible for their actions and risk the loss of support of the University community.

3. Decisions concerning grades, degrees, promotions, merit increases and awards must be made free from any trace of bias or favor. Such decisions come under a cloud when made by those who have an emotional relationship beyond the purely professional or academic one, with those who benefit from those decisions. Even the mere appearance of bias may seriously disrupt the academic or work environment.

4. The individual in authority bears the primary responsibility for any negative consequences resulting from an even apparently consenting romantic or sexual relationship. It is the student or the employee, not the instructor or supervisor, who is most at risk in these relationships. In particular, the respect and trust accorded a professor by a student, as well as the legitimate power exercised by the professor in giving grades, criticism, praise, recommendations for further study, future employment, etc., greatly diminish the student's actual freedom of choice, should sexual favors be added to the professor's demands. Although it is proper for a student to decline any personal relationship of this kind, a student may feel that few options are available when a professor asks for a date. As a result, the degree of informed consent that exists within such a relationship is difficult to establish. Should there be a charge of sexual harassment, a claim of mutual consent may be difficult to sustain.
5. Commonly accepted standards of professional behavior and ethics require that faculty members not hold evaluative power over any student with whom they have a romantic or sexual relationship. Thus, faculty members should not initiate or accept such a relationship with a student over whom they have an evaluative role. Should such a relationship exist between a faculty member and a student, the faculty member must remove himself/herself from the evaluation of the student's work. Failure to do so will be a violation of the Faculty Code of Conduct.

Similar proscription applies to administrators and supervisors in their relationships with students and employees over whom they have an evaluative role. A supervisor who is in a romantic or sexual relationship with another individual over whom he/she has evaluative responsibility must remove himself/herself from personnel decisions concerning that individual, such as appointment, retention, promotion, discipline, tenure or salary. Failure to do so will be a conflict of interest.

X. GENERAL POLICIES AND PROCEDURES
A. Equal Opportunity/Affirmative Action/Nondiscrimination – Policies and Procedures
   1. Affirmative Action
      a) Affirmative Action Policy Statement
         It is the policy of the University of Kansas Medical Center to develop and implement an effective, defensible Affirmative Action Compliance Program for the following affected groups: American Indians/Alaska Natives, Asian/Pacific Islanders, Blacks/African Americans, Hispanics, women, individuals with disabilities, disabled veterans, and Vietnam-era veterans. The University shall report annually the results of its Affirmative Action Compliance Program in a written Affirmative Action Plan [41 CFR 60-1.40(a)] which shall conform to current state and federal guidelines as defined by the Office of Federal Contract Compliance Programs and the State of Kansas.
      b) Legal Basis
         The University of Kansas Medical Center is a federal contractor subject to requirements of Federal Executive Order 11246 as amended, Section 402, of the Vietnam Era Veterans Readjustment Assistance Act of 1974, Section
503, of the Rehabilitation Act of 1973, and provisions of Title 41, Chapter 60, of the Code of Federal Regulations (revised 11/13/00).

c) Responsibility for Implementation

1) The Executive Vice Chancellor has overall responsibility for promoting and enforcing the Affirmative Action Compliance Program and ensuring that resources necessary for implementation of the program remain a priority in the University budget. The director of the Equal Opportunity Office reports directly to the Executive Vice Chancellor and has the authority to administer the Affirmative Action Compliance Program for both KUMC and the KU School of Medicine-Wichita. The director’s name, title, location and telephone number will be included on all internal and external communications regarding the Affirmative Action Program.

The director of the Equal Opportunity Office is responsible for:

(a) developing and maintaining an effective AA/EO compliance program, including nondiscrimination policies and procedures, and ensuring that they are readily available to all faculty, staff, residents, students and the public;

(b) developing and maintaining effective internal complaint procedures, facilitating informal resolution of concerns whenever feasible, investigating complaints of illegal discrimination, and participating in the determination of administrative responses;

(c) providing training, education and advice to the campus community regarding University policies and procedures governing Affirmative Action, equal opportunity, nondiscrimination, illegal harassment, discrimination complaint procedures and reasonable accommodation;

(d) developing effective and meaningful monitoring, auditing and reporting mechanisms to ensure compliance with state and federal requirements governing employment, academic admissions and financial aid; and acting as the institution’s Title IX Coordinator; and
(e) overseeing compliance with the Americans with Disabilities Act, the Federal Rehabilitation Act, and provision of services to students with disabilities.

b) Vice Chancellors and deans are responsible for ensuring the success of affirmative action efforts in their divisions. Specific responsibilities include utilizing the appropriate nondiscrimination clause in all contracts, monitoring subcontractor compliance with federal and state nondiscrimination law, and ensuring that employees participate in the University's affirmative action/equal employment opportunity training program. The responsibility for ensuring compliance with AA/EO policies and procedures may be delegated to one or more equal opportunity liaisons in each division, who will be responsible for receiving training from the Equal Opportunity Office. Each vice chancellor and dean will review annually with the Equal Opportunity Office the effectiveness of the affirmative action program in each operating unit under his/her authority.

c) All members of the KUMC community, including affiliated sites and the School of Medicine-Wichita, are charged with creating an atmosphere conducive to attracting and retaining a diverse workforce. Department heads are responsible for ensuring that recruitment and selection guidelines are followed, that required documentation is maintained, and that good faith effort is demonstrated toward the achievement of goals for eliminating underutilization. Affirmative action efforts shall be a part of the evaluation of the performance of administrators and supervisors.

d) Notification of Commitment

The University of Kansas Medical Center is obligated to notify all students, applicants, residents and members of the public of its commitment to affirmative action, equal opportunity and nondiscrimination. All materials produced by the University to solicit applications for employment or educational programs, publicize activities or services, or otherwise describe programs and departments must contain approved notification statements as listed on the Equal Opportunity Office website.
e) Record Retention

Any personnel or employment record made or kept by the University shall be preserved for at least three years from the date of the making of the record or the date of the personnel action, whichever is later. Such records include, but are not limited to, documents pertaining to hiring, assignment, promotion, demotion, transfer, lay off, selection for training, reasonable accommodation requests, results of physical examinations, job advertisements and posting, applications and resumes, and interview notes [41 CFR 60-1.12(a)]. All records kept in accordance with this requirement must include the gender, race and ethnicity of each employee, and where possible, the gender, race and ethnicity of each applicant [41 CFR 60-1.12(c)].

f) Internal Auditing, Monitoring and Reporting Requirements

As part of its affirmative action program, the University must monitor and audit KUMC and KUSM-W employment decisions and compensation systems to evaluate their impact on affected groups [41 CFR 60-2.10(2)]. In order to identify problem areas, the Equal Opportunity Office shall evaluate personnel activity (applicant flow, hires, terminations, promotions and other personnel actions); compensation systems; selection, recruitment, and other personnel procedures; and any other areas that might impact the success of the affirmative action program [41 CFR 60-2.17(b)]. In addition, the Equal Opportunity Office shall report annually on the attainment of EEO objectives, review results with management, advise senior administrators of program effectiveness, and develop recommendations to improve unsatisfactory performance [41 CFR 60-2.10(d)].

g) Recruitment

The Human Resource departments on both the Kansas City and Wichita campuses are responsible for conducting recruitment. When the position belongs to a job group that is underutilized, the search shall include recruitment efforts that are targeted to attract members of the underutilized group. Such efforts may include advertising in publications known to reach the affected group, making personal contacts with affected group members, or contacting professional associations that serve affected groups. The
Equal Opportunity Office shall provide annually a list of underutilized job
groups to the Human Resource departments.

2. Equal Opportunity and Nondiscrimination
   a) Equal Opportunity/Nondiscrimination Policy

   The University of Kansas Medical Center is committed to providing equal
   opportunity and prohibiting illegal discrimination. The Executive Vice
   Chancellor affirms that the institution shall:

   i. develop and enforce University policies governing recruitment
      and selection for both employment and academic admissions to
      remove barriers to equal opportunity and prevent illegal
      discrimination;

   ii. ensure that all decisions affecting students, residents and
        employees conform to the principles of equal opportunity and
        nondiscrimination;

   iii. administer personnel actions such as hiring, promotion,
        separation, compensation, benefits (within the limits of the law),
        transfers, layoffs, returns from layoff, University-sponsored
        training, education, tuition assistance, and social or recreational
        programs with fairness and equity, regardless of race, color,
        creed, religion, national origin, ancestry, sex, age, disability,
        sexual orientation, or status as a Vietnam-era or disabled
        veteran;

   iv. ensure that affirmative action employment placement goals are
       not used for the following reasons: to justify either a preference
       or an adverse effect upon an individual solely on the basis of
       his/her race, color, religion, sex or national origin to create set-
       asides for specific groups; or to supercede merit selection
       principles [41 CFR 60-2.16(e)];

   v. prohibit discrimination in the operation of all University programs,
      activities and services;

   vi. ensure that no prohibited pre-employment or pre-admission
       inquiries are made on application forms or during interviews; and
vii. cooperate with federal and state agencies in fulfilling its obligations under the laws of the United States and the State of Kansas.

b) Legal Basis

Discrimination on the basis of race, color, creed, ancestry, religion, national origin, sex (including pregnancy), age, disability, or status as a Vietnam-era or disabled veteran is prohibited by federal and state statutes as amended, including Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973, the Pregnancy Discrimination Act of 1978, the Age Discrimination in Employment Act of 1978, the Vietnam Era Veteran's Readjustment Assistance Act of 1974, the Americans with Disabilities Act of 1990, the Civil Rights Act of 1991, the Kansas Age Discrimination in Employment Act, and the Kansas Act Against Discrimination. Discrimination on the basis of sexual orientation is prohibited by University policy.

c) Responsibility for Implementation

It is the responsibility of all members of the University community to ensure that commitment to equal opportunity and nondiscrimination is an integral part of KUMC. This policy governs all employees, faculty, students, residents, volunteers, agents, groups and organizations that use University facilities, and other members of the University community to the extent provided by law.

d) Selection

All procedures and practices by which individuals are hired, selected, promoted, transferred or terminated must be valid, reliable, nondiscriminatory and consistently applied. All persons who make selection decisions on behalf of KUMC are responsible for understanding the University's recruitment and selection procedures, the development and application of nondiscriminatory selection criteria, prohibited pre-employment inquiries, and required recordkeeping. Technical assistance and advice is provided by the Human Resource Departments on both the Kansas City and Wichita campuses.
e) Training/Education

The University is committed to educating members of its community about the nature and consequences of discrimination, including all forms of illegal harassment, and the availability of internal avenues for handling complaints. Ongoing education is particularly essential for supervisors, directors, department chairs and administrators who are responsible for taking appropriate action when they become aware of incidents that may involve illegal discrimination, including sexual or other forms of harassment.

f) Retaliation

Retaliation against anyone reporting or thought to have reported discrimination, including all forms of illegal harassment, is a violation of this policy and will be considered independently of the discrimination complaint. Encouraging others to retaliate also violates this policy.

g) Reporting Discrimination and Illegal Harassment

Individuals who believe they have been subjected to illegal discrimination, including sexual or other forms of harassment, must report incidents to one of the following individuals or offices: Equal Opportunity Office, Graduate Medical Education Office in Kansas City, the Wichita Center for Graduate Medical Education, the Dean of Students, or the Human Resource Department in Kansas City or Wichita.

h) Receiving Reports of Discrimination and Illegal Harassment

It is the responsibility of any member of the University who receives a report involving potential discrimination or illegal harassment to record adequate information for conducting an inquiry, and make immediate contact with the Equal Opportunity Office. Reports shall be treated with respect and diligence. Complaints are handled internally through the Discrimination Complaint Procedure outlined in section F.

3. Sexual Harassment

a) Definition

Sexual harassment is a form of sex discrimination, prohibited by Title VII of the Civil Rights Act of 1964, Title IX of the 1972 Education Amendments, and
Kansas state laws. Sexual harassment can occur between persons without regard to gender, age, appearance, sexual orientation, or professional status and may arise from either supervisory actions or co-worker interactions. Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, or other verbal or physical conduct of a sexual nature when:

i. submission to such conduct or activity is made either explicitly or implicitly a term or condition of an individual's employment or academic progress;

ii. submission to or rejection of such conduct or activity is used as the basis for employment or evaluation;

iii. such conduct or activity interferes with an individual's employment or educational advancement; or

iv. such conduct or activity creates an intimidating, hostile or offensive environment.

b) Sexual Harassment Policy Statement

The University of Kansas Medical Center is committed to providing a positive learning and working environment for its faculty, staff, residents and students. Sexual harassment in any form is not tolerated. Anyone who violates this policy will be subject to a range of sanctions, including written reprimand, termination or expulsion. When the University becomes aware of sexual harassment allegations, it is bound by state and federal law to investigate those allegations, stop the harassment if it is found to exist, and take all necessary action to prevent sexual harassment from recurring.

4. Other Forms of Harassment

a) Policy Statement

The University of Kansas Medical Center is committed to fostering dignity and respect among all members of the KUMC community at all affiliated locations. Severe or pervasive behavior that is intended to harass or intimidate an individual because of his/her race, ethnicity, age, religion, disability, gender, sexual orientation or national origin and has a negative impact on that individual's work or learning environment is prohibited. Anyone who violates this policy will be subject to a range of sanctions, including written reprimand, termination or expulsion. When the University becomes aware of allegations, it is obligated to investigate those allegations,
stop the harassment if it is found to exist, and take all necessary action to prevent illegal harassment from recurring.

5. Accommodation of Individuals with Disabilities

a) Accommodation Policy

It is the policy of the University of Kansas Medical Center to provide reasonable accommodation to qualified individuals with known impairments that meet the statutory definition of a covered disability except where such accommodation would impose an undue hardship or present the threat of harm. This policy governs all KUMC affiliated sites, including the School of Medicine-Wichita campus. Persons with disabilities who are covered under this policy include:

i. individuals seeking admission to academic or residency programs;

ii. applicants for employment;

iii. employees who, with or without reasonable accommodation, can perform the essential functions of a position;

iv. students who satisfy eligibility criteria, and with or without reasonable accommodation, meet the technical standards and matriculation requirements of a program;

v. residents who satisfy eligibility criteria and, with or without reasonable accommodation, meet the technical standards for graduate medical education; and,

vi. individuals who wish to participate in university-sponsored events, programs or activities which are open to the public.

b) Legal Basis

The principles of reasonable accommodation are articulated in provisions of the Americans with Disabilities Act (ADA) of 1990, the Federal Rehabilitation Act of 1974 and the Kansas State Act Against Discrimination. Reasonable accommodation applies to all aspects of employment, all University services or activities provided to the general public, and all educational programs, services and activities.

c) Responsibility for Implementation

The ADA/504 coordinator, located on the Kansas City campus, is the primary contact for information and advice about disability accommodation and
access. However, all unit heads and University departments share certain responsibilities, including:

i. **Notification.** Any office, department, program or site that distributes announcements or advertisements for services and activities is responsible for inserting notification of the KUMC accommodation policy and instructions for requesting an accommodation. Notification statements must be approved by the Equal Opportunity Office.

ii. **Identification of Essential Job Functions.** Unit heads are responsible for identifying and documenting essential and marginal functions, as well as physical and mental requirements in the job descriptions of all positions under their supervision, in consultation with the ADA/504 coordinator. The Human Resource Departments on both the Kansas City and Wichita campuses are responsible for ensuring that position descriptions comply with this requirement before recruitment begins.

iii. **Identification of Technical Standards.** Unit heads are responsible for developing and maintaining current technical standards governing admission to and completion of academic and residency programs under their direction, in consultation with the ADA/504 coordinator.

iv. **Provision of Accommodations.** The primary responsibility for providing reasonable accommodation rests with the affected department or unit, which must consult with the ADA/504 coordinator and other appropriate university officials.

d) **Procedure for Requesting Accommodation**

It is the obligation of individuals seeking accommodation to direct their request to the appropriate University contact, depending on whether the individual seeking accommodation is a student, applicant, staff member, faculty member, resident or member of the general public.

i. **Students.** Students with documented disabilities who are enrolled at the University should direct their request for accommodation to the ADA/504 coordinator. Students may also discuss their need for accommodation with faculty, a student
services official on either the Kansas City or Wichita campus, or
the school’s disability officer.

ii. *Staff and Faculty.* Employees may request accommodation from
their immediate supervisor, program director, department chair,
or the ADA/504 coordinator.

iii. *Applicants for Employment.* Applicants may request
accommodation during the application or interview process from
the search committee chair, hiring/screening official, Human
Resource Department in Kansas City or Wichita, or the ADA/504
coordinator.

iv. *Applicants for Admission.* Applicants may request
accommodation during the application process from the
appropriate admissions office for the school or program, the
school disability officer, or the ADA/504 coordinator.

v. *Residents (including applicants and candidates for residency).*
Individuals applying for a residency program, candidates for
residency, or current residents may request accommodation
from the residency program director, the director of Graduate
Medical Education in Kansas City or Wichita, or the ADA/504
coordinator.

vi. Members of the general public seeking accommodation for
specific University-sponsored activities, services or events that
are open to the public may request accommodation from the
program's sponsor in advance of the date upon which the
accommodation is sought.

e) Receiving Accommodation Requests

It is the responsibility of any member of the University who receives an
accommodation request to contact the ADA/504 coordinator, who is
responsible for ensuring that requests are considered on a case-by-case
basis in accordance with state and federal regulations, and that appropriate
University officials are involved in evaluating the request, identifying funds
and implementing the accommodation. The right to reject an
accommodation request because of undue hardship is reserved for the
Executive Vice Chancellor (or designee).
f) Documentation of Disability

Individuals who request accommodation are obligated to provide documentation of their disability from an appropriate health care provider upon request of the ADA/504 coordinator. The University reserves the right to obtain additional medical or psychological assessment at its own cost. All documentation received regarding disability shall be retained in confidential files in the Equal Opportunity Office, separate from the academic or personnel files of the individual. Information regarding the nature of the disability and the accommodation indicated shall be restricted to individuals who, in their official University capacity, have a legitimate need for the information.

g) Reporting Failure to Provide Reasonable Accommodation

Individuals who believe they have been denied reasonable accommodation or have been subjected to discrimination because of their disability are advised to contact the Equal Opportunity Office. Disputes related to reasonable accommodation are handled internally through the Discrimination Complaint Procedure outlined in section F.

6. Discrimination Complaint Procedure

a) General Principles

The University of Kansas Medical Center is committed to resolving complaints of illegal discrimination at the earliest and most informal level, conducting internal investigations in a timely and effective manner, adhering to the principles of due process in all investigations and hearings, and providing prompt corrective action if discrimination is found to have occurred.

The Equal Opportunity Office is available to answer questions or provide advice regarding equal opportunity/affirmative action issues or concerns to faculty, staff, residents and students, regardless of whether or not they wish to file a complaint.

The University reserves the right to modify and/or amend the procedures outlined herein at any time. In the event the University determines that circumstances warrant modification/amendment of any part of these procedures, timely notice shall be delivered in writing to all relevant and affected parties.
b) Pre-Complaint Resolution Strategies

Individuals are urged to first bring their concerns to the person responsible for the behavior or action. In many cases, individuals will take self-corrective measures when they become aware of how their actions or behaviors are being received. The matter may be concluded by mutual consent at this point. However, the University recognizes that such a strategy may be inappropriate or ill-advised, especially when the conduct is severe, or when the person responsible for the behavior holds a position of authority.

Supervisors, unit heads, department chairs and others in leadership are responsible for ensuring nondiscrimination in the employment and academic environment. Therefore, individuals are encouraged to bring concerns to those individuals if discussions with the person responsible for the behavior or action are unsuccessful or ill-advised. Supervisors and chairs are required to utilize the expertise of the Equal Opportunity Office when handling such matters, and are expected to maintain documentation sufficient to demonstrate a timely, appropriate and adequate response.

If satisfactory resolution does not occur, the individual may file a complaint with the Equal Opportunity Office (EOO).

c) Purpose and Jurisdiction of the Discrimination Complaint Procedure

This procedure is restricted to complaints that allege differential treatment on the basis of race, color, creed, religion, ancestry, national origin, sex (including sexual harassment or pregnancy discrimination), sexual orientation, age, disability (including failure to provide reasonable accommodation), status as a disabled veteran or Vietnam-era veteran, or harassment based on protected class including race, color, sexual orientation, age and religion. Aggrieved parties are referred to as complainants. Persons alleged to have engaged in illegal discrimination are referred to as respondents.

This procedure is internal to the University and applies to incidents that take place at the University and its affiliated off-site locations, or are related to University operations. Individuals who may use this procedure include, but are not limited to, individuals applying for enrollment or employment to the University; students; regular and research faculty, including those with
visiting appointments; teaching or research assistants; research associates; residents and fellows; classified and unclassified employees; university administrators; and users of University services.

d) Responsibility for Implementation

The Executive Vice Chancellor delegates to the director of the Equal Opportunity Office overall responsibility for assuring University compliance with nondiscrimination laws, receiving and investigating internal allegations of discrimination, and maintaining an effective and impartial complaint investigation process. The Executive Vice Chancellor has the authority to appoint an alternate investigator at his or her discretion and as circumstances require.

e) Confidentiality

Complainants, respondents, witnesses and others involved shall refrain from disclosing information about the case to anyone who does not have legitimate need or right to know. Violations of confidentiality may result in charges of unprofessional conduct.

f) Timelines

The date upon which a complaint is received shall be referred to as the case filing date. Time limits set forth in these procedures may be extended by the EOO director, at his or her discretion, or upon written request from the complainant, respondent, or the unit head. The director shall inform the parties when extensions of the time limits are made.

g) Filing

To facilitate resolution or investigation, complaints should be brought forward within 30 days, or as soon as possible after the alleged act of discrimination.

h) Complaint Procedure

Discrimination complaints shall be filed with the EOO. The written complaint must be signed by the complainant, identify the respondent(s), fully describe the alleged act(s) of discrimination, and authorize the EOO to proceed with an investigation.

i. Jurisdiction Decision. Within 15 working days after receiving the written complaint, the EOO will determine whether issues raised in the complaint fall within the purview of these procedures. The complainant will be notified in writing if the complaint is not within EOO jurisdiction and will be provided with recommendations for
other options to address the issue. No appeal may be made internally of this determination. If the complaint falls within the purview of these procedures, the EOO will meet with the complainant to discuss the investigative process and obtain additional information necessary for the investigation.

ii. *Informal Resolution.* The complainant may issue written authorization for the EOO to attempt informal resolution at any time during the process. Such attempts will focus on resolving the dispute, managing the conflict, and non-punitive counseling.

iii. *Preliminary Assessment of Allegations.* Upon determining that a complaint falls within its jurisdiction, the EOO may conduct an initial fact-finding to determine whether the allegations warrant an investigation. The complainant will be notified in writing if an investigation is not warranted. No appeal may be made internally of this determination.

iv. *Investigative Process.* The EOO will:

a) schedule a meeting with the respondent(s) to discuss allegations raised in the complaint, provide a copy of these procedures, and discuss the complaint process. When appropriate, the EOO may provide a written request for information, and establish a deadline for receiving the respondent’s written response to the information request. Refusal to answer a charge or participate in the proceedings will not prevent the investigation proceeding solely on the basis of complainant from occurring and may result in testimony and evidence;

b) provide notice of the complaint to the appropriate unit head(s);

c) consult with individuals who have direct knowledge of the alleged incidents and/or who are in a position to gather or generate information relevant to the allegations; prepare a written investigative report within 45 working days after determining jurisdiction;

d) review the report with appropriate University officials and when justified by the findings, initiate discussions with
appropriate individuals regarding the development of an administrative response; and
e) within five working days after the administrative review, provide the complainant, respondent and dean or vice chancellor with a written investigative summary and findings.

v. **Determination of Disciplinary Action.**

a) **Students.** Each school administers its own student conduct system and determines any disciplinary actions against students that might arise from a complaint of student misconduct. Procedures are detailed in the Student Handbook.

b) **Employees, Faculty and Residents.** Deans, vice chancellors or their designees are responsible for identifying an appropriate administrative response, including non-punitive corrective measures and, in consultation with the appropriate Human Resource Department, disciplinary actions. Disciplinary actions to be considered will vary in type, intensity and duration, depending on the specifics of each case. All disciplinary action, with the exception of termination or dismissal, may include mandatory training sessions.

vi. **Appeal of Disciplinary Action.** Should the administrative response result in disciplinary action for the respondent, he or she may seek review of the action through appropriate internal appeal procedures as provided in the Handbook for Faculty and Unclassified Staff, Graduate Medical Education Handbook for Residents, House Staff Manual, applicable Union contract, State Civil Service Procedures, or the Student Handbook.

vii. **Complaint Initiated by Administration.** The Executive Vice Chancellor, vice chancellors, deans, directors, supervisors or chairs, if given sufficient cause, may request that the EOO conduct an investigation. The administrator requesting the investigation will act as complainant and must specify the persons who are alleged to be the recipients of the questionable conduct. The EOO will use the same notification and process guidelines outlined in the discrimination complaint procedure.
The administrator initiating the complaint will not be involved in developing the administrative response and/or corrective action.

viii. **Records Management.** The EOO shall maintain all records for complaints filed pursuant to these procedures, including the complaint, the response, investigative summaries, materials considered in the course of the investigation, the administrative response, and any documentation that confirms that administrative actions were taken. Records shall be retained in the EOO or in archived files for at least five years.

ix. **Filing a False Complaint or Retaliating Against Participants in the Complaint Process.** Retaliating against participants in these proceedings is prohibited. The EOO will use the same notification and process guidelines outlined in the discrimination complaint procedure for claims of retaliation. Similarly, filing a false complaint is considered to be serious misconduct which is subject to sanction, including disciplinary action which shall be determined in conformance with Section F8-3.

x. **Alternative Complaint Procedures.**

  a) **Internal.** The complainant must use the Equal Opportunity Office complaint procedure for processing an internal claim of illegal discrimination unless another procedure is specifically required or permitted by union contract. Should the complainant elect to use any other internal grievance procedure, he or she may not use the procedure operated by the EOO for the same complaint.

  b) **External.** A person who believes that he or she has been the subject of discrimination prohibited by state or federal law may contact one of the following agencies for advice, assistance, and explanation of filing deadlines:

    Equal Employment Opportunity Commission
    (for employment matters only)
    400 State Avenue, Suite 905
    Kansas City, KS 66101
B. Financial Exigency  
(Approved October 1993)

A statement of policy and procedures concerning financial exigency was accepted by the Chancellor in December 1976 and revised. Financial exigency is a "condition, descriptive only of the University as a whole, a unique and compelling financial crisis that would jeopardize the ability of the University to maintain this position (as a quality institution of higher education) unless faculty positions are reduced by the release of one or more tenured faculty members other than 'for cause,' as defined in the . . . Handbook."

The procedures to be followed when a state of financial exigency is declared are found in Article VII of the Rules and Regulations of the University Senate.

The following are the policies and procedures concerning Financial Exigency:

1. Introduction
   a. Financial exigency is a grave threat to the survival of any university. Financial exigency can undermine academic freedom; it damages morale, and it encourages non-productive competition among units in the hope of protecting their faculty positions – all of which are detrimental to quality education. With preventive planning, financial exigency need never occur at the University of Kansas. The important activities that the University must undertake to protect its strength and vitality are best pursued prior to the occurrence of financial exigency. Therefore, steps should be taken toward preventing mandatory faculty reductions and the potential weakening of the University that such reductions would entail. Accordingly, the three basic considerations underlying all of this document are:
i. the maintenance of a strong and vigorous university;

ii. awareness of the implications for the entire university community of all procedures set forth here;

iii. due process not only for individual faculty members, but also for the various units which may be affected, as set forth in Article VII of the Rules and Regulations of the University Senate.

b. In the document that follows, the terms “University of Kansas,” and “University” refer to the University of Kansas Medical Center; the term "unit" refers to a budgetary unit such as a department or a program; the term "Chancellor" is to be interpreted to mean that although the Chancellor will ordinarily make use of his/her staff and consult with appropriate individuals, the responsibility and authority to act are the Chancellor’s.

2. Definition

a. The University of Kansas Medical Center is one of the quality institutions of higher learning in the nation. Only as a last resort, after all possible alternatives calculated to preserve the survival of the University of Kansas Medical Center as a quality institution of higher learning have been examined in good faith, and utilized or rejected, should the University of Kansas Medical Center consider the release of any tenured member of the faculty on the basis of financial exigency. Financial exigency would be a condition descriptive only of the University of Kansas Medical Center as a whole, a unique and compelling financial crisis that would jeopardize the ability of the University of Kansas Medical Center to maintain its status as a quality institution unless faculty positions are reduced by the release of one or more tenured faculty members other than "for cause," as defined in the Handbook for Faculty and Other Unclassified Staff (University of Kansas Medical Center).

b. The need for such reductions means that, considering its total resources, the University of Kansas Medical Center has demonstrated that it has no other reasonable alternative, including appropriate reductions in administrators and administrative support staff, and that such reductions will substantially alleviate its fiscal situation and give it the best opportunity to regain its status.

c. Where retention of untenured faculty or staff in some areas will demonstrably enhance the viability of the University of Kansas Medical Center, such
retention is not inconsistent with the reduction of tenured positions elsewhere to the same end. However, unlike financial stress or budgetary constraint, financial exigency is of such a magnitude that it precludes faculty or staff expansion in any area through new positions filled by appointments from outside the University of Kansas Medical Center, except in extraordinary circumstances where a serious distortion in the academic program of the University of Kansas Medical Center as a whole would otherwise result. The Chancellor will consult with the Faculty Assembly Steering Committee about these extraordinary circumstances and any resulting serious distortion in the academic program before taking such actions.

d. Financial exigency is a temporary condition and upon declaration the situation must be continually reevaluated.

3. Declaration of Financial Exigency

   a) University of Kansas Medical Center-Wide Declaration

      i. The Chancellor determines that a state of financial exigency is imminent. The decision to declare a state of financial exigency should be, insofar as is possible, arrived at by the Chancellor in consultation with the faculty and students at the University of Kansas Medical Center. The Chancellor shall, therefore, be in consultation with the Faculty Assembly Steering Committee and the KUMC Student Governing Council during all stages leading up to this decision.

      ii. In consultation with administrators and planning and technical staff, the Chancellor shall prepare documentation in support of the necessity for declaration of financial exigency consistent with definition above.

      iii. The Chancellor shall present a written summary of the documentation and decision, including a presentation of his/her efforts to avert financial exigency, to the Faculty Assembly Steering Committee and KUMC Student Governing Council prior to a special meeting at which the Chancellor shall document the necessity for the proposed declaration. If it appears that faculty members must be released with less than one full year's notice, the Chancellor shall present to the committee evidence that one-year notice is impossible.
iv. The Faculty Assembly Steering Committee and the KUMC Student Governing Council shall, within 30 working days of the meeting described above, jointly submit a written response for the Chancellor's proposal.

v. Having received the response and having decided to declare Medical Center-wide financial exigency, the Chancellor shall do so to the University of Kansas Medical Center community, documenting the reasons at that time, making public the joint report and the Faculty Assembly Steering Committee response.

b) Unit Designation and Unit Due Process

i. Following this declaration, the Chancellor, utilizing the most appropriate advice available, including the Faculty Assembly Steering Committee, shall designate one or more units within which tenured faculty members are to be released. In each unit so designated, the Chancellor shall indicate the total funds associated therewith. Supporting documentation shall include appropriate financial information, program evaluation, and evidence demonstrating that the proposed reduction, when contrasted with other possible solutions, will least seriously damage the University of Kansas Medical Center. The documentation shall indicate why the reductions have to come from the particular school(s) and, within any school, from the particular unit(s).

ii. The designation and documentation specified above shall be made available to all members of the Faculty Assembly.

iii. No later than seven working days after the Chancellor's action under Section VII of the University Senate Rules and Regulations, the chair of Faculty Assembly Steering Committee shall give notice to the members of the Faculty Assembly and to any unit(s) designated by the Chancellor under 3.b.ii above, that the Faculty Assembly Steering Committee, acting as a hearing body, will convene at a specified date and time. This date and time is to be no sooner than seven nor later than 21 working days from the date of the notice, at which time any member of the faculty or staff of the designated unit, or of any unit which claims to be significantly affected by the proposed action, or any student primarily identified with the designated unit, may submit written or oral evidence.
iv. The Faculty Assembly Steering Committee after hearing all appropriate evidence, and no later than seven working days after the hearing of evidence has been concluded, shall vote whether or not it concurs with the Chancellor’s designation of units and extent of proposed reductions in tenured faculty and shall report to the Chancellor and make public a written summary of the deliberations and a record of the vote on each issue. The Faculty Assembly Steering Committee may not recommend a reduction in a unit not previously designated by the Chancellor.

v. If possible within seven working days, the Chancellor shall respond in writing to the recommendations of the Faculty Assembly Steering Committee, documenting reasons for agreeing or disagreeing and the actions to be taken.

vi. A designated unit may propose a plan for fractional appointments as an alternative to the release of any tenured faculty member. Such a plan will not be recommended to the Chancellor if any faculty member whose position is regularly budgeted as a line item in that unit, and whose term of appointment would be affected by the plan, does not agree to it.

vii. If a plan for fractional appointments has been approved by all affected faculty members in a unit, the Chancellor shall normally accept it in lieu of releasing tenured faculty members. Otherwise, the Chancellor, utilizing the most appropriate advice available, shall designate the individual faculty members to be released, as specified in Individual Designation and Due Process in the following section.

c) Individual Designation and Due Process

i. After consultation with faculty, students and administrators of the designated unit, the Chancellor shall designate which individual tenured faculty members are to be released. The principal criterion shall be the ability of the unit to carry out its teaching, research and service mission most effectively. Faculty members to be released shall be given every opportunity to relocate internally, and all units throughout the University of Kansas Medical Center shall make every effort to assist released faculty to be relocated internally. If the faculty member(s) to be released cannot be
relocated within KUMC, the Chancellor shall communicate in writing the decision and the reasons for it to such designated individual(s) at least one full year, whenever possible, before the effective date of release. If it is not possible to give one full year's notice before the effective date of release, such notice shall be given as early as possible. (The "Faculty Assembly," in accord with the existing University of Kansas Medical Center policy and the national AAUP policy, considers a one-year notice to be the minimum acceptable period.)

ii. In addition, due process must be scrupulously followed either under or in anticipation of financial exigency. All of the rights and privileges of a faculty member to seek remedy for an alleged infringement of academic freedom or violation of established KUMC tenure policies and procedures that now provide him/her access to an appeal process [see Section III, Part 6] shall also apply to such allegations regarding actions taken by KUMC under or in anticipation of conditions of financial exigency. A faculty member who has received notice of release may appeal the Chancellor's decision to an Ad Hoc Appeals Committee appointed by the Faculty Assembly Steering Committee consisting of tenured faculty members. Appeal must be in writing, be filed within 30 working days of the date of notification, and may be based on any of the following grounds:

(a) The Chancellor had no reasonable basis in fact for selecting the appellant for release;

(b) The selection of appellant failed to follow procedures here prescribed; and

(c) The selection of appellant was based on age or on constitutionally impermissible reasons.

The Chancellor shall bear the burden of proof in appeals based on the first and second grounds. The faculty member shall bear the burden of proof in appeals based on the third ground. The faculty member shall have access to all relevant information in the possession of the administration to aid in preparing his/her case in an appeal based on any of the three grounds.
iii. If an appeal is received from a faculty member that meets the procedures set forth in 3.c.ii above, the Ad Hoc Appeals Committee shall afford the appellant a hearing within 30 working days of notice of appeal. Testimony and other evidence shall be taken in accordance with usual procedures of the committee as set forth at the time in the appropriate KUMC governance documents.

iv. After receiving testimony and other evidence, the committee shall make its determination of whether the notification of release received by the appellant was in violation of the standards set forth in 3.b.i above. The committee shall then issue a written opinion delineating its decision, the reasons therefore, and its recommendation for disposition. Copies shall be sent to the appellant and to the Chancellor. It is anticipated that the committee will issue its opinion within 30 working days of the date of hearing, but in no case shall the committee delay longer than 60 working days.

v. Within 14 working days the Chancellor shall respond in writing to the recommendations of the Faculty Concerns and Policy Committee documenting the reasons for agreeing or disagreeing.

4. Emergence from Financial Exigency

a) Annual Reappraisal and Reports

i. The Chancellor shall, during the period of financial exigency, report at least annually to the Faculty Assembly Steering Committee, updating the documentation presented at the time the initial declaration was made.

ii. The Faculty Assembly Steering Committee shall advise the Chancellor on reappraisal and termination of financial exigency and shall monitor the process of emergence from financial exigency, with particular regard to protection of reinstatement rights of individual faculty members as defined under Reinstatement Rights of Individuals [in this section, below].

iii. In any year in which the documentation fails to indicate that further reductions in tenured faculty positions are needed for the survival of KUMC as a quality institution, the Chancellor shall declare that the state of financial exigency, as defined above, no longer exists. Effective at the time of such a declaration, no additional release of tenured faculty
members may be accomplished except for cause (as defined in this handbook).

iv. The obligation of KUMC to units and individuals affected by financial exigency shall continue until fulfilled as provided below. The Chancellor shall promptly initiate the steps below to reinstate the released and the relocated tenured faculty.

b) Unit Allocation of New Positions
   i. Positions added after a period of financial exigency are to be assigned to units on the same basis as are new positions under ordinary circumstances, except as specified below.
   
   ii. Before any new positions are allocated by the University of Kansas Medical Center, units that have released tenured faculty members or have adopted a substitute plan to reduce positions under financial exigency shall be given the first opportunity to argue for the assignments of new positions to them. Affected units shall present their plea to the Faculty Assembly Steering Committee, which shall forward its recommendations to the Chancellor.

b) Reinstatement Rights of Individuals
   i. After a period of financial exigency, KUMC must honor the reinstatement rights of faculty members released or relocated under financial exigency as follows: except for an individual found to be unqualified for the new position, former faculty members applying for a position in their former unit shall be offered the position, with a reasonable time to accept or decline it; in other cases, once a unit is granted permission to recruit for a new faculty position, and as the position is advertised, the Chancellor shall formally invite all former faculty members of KUMC released under financial exigency to apply for the position.
   
   ii. So long as there remain any faculty released or relocated under financial exigency, KUMC shall follow the above procedures each time it allocates a new faculty position.
   
   iii. Faculty members released or relocated under financial exigency who claim that their reinstatement rights as defined herein have been infringed shall have access to the Ad Hoc Appeals
Committee appointed by the Faculty Assembly Steering Committee for the purpose of a hearing on such claims.

iv. The committee shall provide to the Chancellor and to the claimant a written recommendation and the basis for such recommendation. It is expected that KUMC will ordinarily accede to the findings of the committee.

d) Termination of Obligations Incurred Under Financial Exigency

The obligation of the University of Kansas Medical Center to released faculty members shall cease only when all tenured faculty members released under financial exigency have been reinstated, have exhausted recourse for reinstatement through due process proceeding, or have formally indicated that they no longer wish to be reinstated.

5. Timely Notice

a. As soon as possible, all units are to be furnished a documented estimate of anticipated financial support for unclassified positions for the following fiscal year.

b. The Chancellor shall make every effort to complete the proceedings of Section B, including due process for units and Declaration of Financial Exigency, if any, by March 15 of the year in which notice to a faculty member of non-reappointment is expected to be issued.

c. Individual faculty members must be notified according to the provisions of Individual Designation and Due Process [see this section, above].

C. Program Reviews

Regents’ Program Reviews, which began in 1983, follow the departmental structure of the institution and include all degree levels. Each department or division is scheduled for review once every five years. At the University of Kansas, Program Reviews are self-reviews by the departments involved. To quote from the Board of Regents, the Program Review is designed to:

.. enhance the ability of the Board of Regents to govern the institution under its jurisdiction; increase the Board's knowledge and understanding of the programs conducted at its institutions in order to make informed decisions in an ever-changing environment; provide for the periodic and system-wide review of all programs at each Regents institution; and provide for additional self-study of all programs in order to improve management at the institutional level.
The Regents’ Program Review policy is being modified in the 2005-06 academic year and will be re-instituted beginning in the 2006-2007 academic year.

D. Program Discontinuance

1. General Policies and Procedures

In the life of a university, as knowledge expands and new academic programs flourish, some programs may diminish or become outmoded. In the processes of growth and diminution, academic programs may be discontinued when there is no valid educational reason for their continuance. In the process of discontinuing programs, three basic considerations must prevail:

a. the maintenance of a strong and vigorous University;
b. the fulfillment of the commitments to students in the process of completing discontinued programs; and
c. the fulfillment of established faculty rights and due process to individual faculty and unclassified staff members on probationary or tenured appointments who may be subject to dismissal.

The determination that an academic program shall be discontinued because of bona fide academic and educational reasons shall be made by the Chancellor after careful investigation. To assure that such recommendations are reached by just and equitable means and to protect the rights and interests of programs, faculty, unclassified staff and students affected by such recommendations, the following procedures will be adhered to by all relevant units of the University.

To fall within the purview of this article, program discontinuance shall be based strictly upon educational considerations as determined by the faculty as specified in this article. "Educational considerations" must reflect long range judgments on the academic mission of the program and not cyclical or temporary enrollment variations. Long-range judgments shall be based upon such objective criteria as program reviews, accreditation studies and other instructional data.
2. Definitions and Exclusions

An "academic program" at the University of Kansas is a "course of study leading to a certificate or degree." "Program discontinuance" is the decision by the Chancellor, upon recommendation by the Executive Vice Chancellor that the University shall, for bona fide educational considerations, cease to offer such a program. Bona fide educational considerations are distinct from those of financial exigency. Programs subjects to discontinuance under these procedures are those programs listed in the “Degree and Certificate Program Inventory for Regents Institutions.” Program discontinuance may take the form of the abolition of the academic unit (school, department or division) in which the certificate or degree is offered, or it may take the form of the abolition of a particular certificate or degree program with no other change in the academic unit.

The term "program" is applied to a wide variety of other academic and administrative activities of the University. These include areas of emphasis or academic subspecialties within existing certificate or degree programs, interdisciplinary studies programs that do not offer a certificate or degree, and academic support services. Such "programs" are not subject to discontinuance under these procedures unless they are wholly contained within a program that is being discontinued.

If an academic unit offers more than one certificate or degree program, its faculty are not subject to dismissal for reasons of program discontinuance unless all degree and certificate programs offered by that unit are discontinued or unless the faculty member is demonstrably unqualified for appointment in the continuing program.

3. Recommendations for Program Discontinuance

The individual or academic unit initiating the Recommendation of Program Discontinuance shall present such recommendation to the dean. The recommendation shall be made in writing and shall include:

a. an explicit rationale for the recommendation; and
b. a description of the projected impact on the academic mission of the University and the students and faculty of the program.
If the dean concurs with the recommendations, copies of the recommendations together with the rationale, academic reviews of the program, and an impact statement shall be provided to the appropriate faculty and Executive Vice Chancellor at the time the recommendation is initiated. The Executive Vice Chancellor shall, upon receipt of the Recommendation for Program Discontinuance, refer the recommendation to the Faculty Assembly Steering Committee. Within 60 working days of the receipt of the recommendation, the Faculty Assembly Steering Committee shall submit, in writing, to the faculty of the program, the dean of the school, and the Executive Vice Chancellor its own recommendation for or against the Recommendation for Program Discontinuance. Its recommendation shall indicate whether the proposed program discontinuance is in the best academic interests of the University, makes adequate provisions for the present students in the program, and makes adequate provision for the rights of the faculty of the program. Such “adequate provision” may include, but shall not be limited to, relocation of faculty of the program in another academic unit of the University. The recommendation shall include appropriate supporting evidence and commentary, including adverse comments received.

The Executive Vice Chancellor shall report his/her recommendation for or against program discontinuance to the Chancellor and shall concurrently inform the appropriate faculty, dean, and governance bodies. Such recommendation shall be submitted in writing and shall include an explicit statement or rationale, including responses to the recommendation(s) of the Faculty Assembly Steering Committee.

The Chancellor shall evaluate the recommendations and communicate his/her final decision for or against program discontinuance to the appropriate faculty, dean, Council of Chief Academic Officers, and the Kansas Board of Regents, and shall, where appropriate, specify the subsequent date of discontinuance.

4. Notice to the Faculty of Non-Reappointment Due to Academic Program Discontinuance

Dismissal of an appointment with continuous tenure, or of a probationary or specified appointment before the end of a specified term, may occur as a result of program discontinuance. The Executive Vice Chancellor, upon the recommendation of the appropriate dean, shall recommend to the Chancellor which faculty members within
the discontinued program are to be dismissed. Before the notice of the intent to dismiss is given, every reasonable effort shall be made to place the faculty member in another suitable position within the University. If placement in another position would be facilitated by a reasonable period of retraining, financial and other support for such training will be proffered.

The Chancellor shall give written notice of the intent to dismiss the faculty member. Notice shall include:

a. a statement of the basis for the initial decision to dismiss;
b. a description of the manner in which the initial decision to dismiss was arrived at; and
c. a disclosure of the data upon which the Chancellor relied; and
d. a statement of the faculty member's right to respond to the dismissal.

Such notice shall be given:

a. not later than March 1 of the first academic year of service; or if the appointment terminates during an academic year, at least three months in advance of its completion;
b. not later than December 15 of the second academic year of service, or if the appointment expires at the end of the year; at least six months in advance of its termination;
c. at least 12 months before the expiration of an appointment after two or more years in the institution.

Faculty on continuous tenured appointments who are scheduled for dismissal for reasons of program discontinuance will be retained for the years in which their programs are being phased out in accordance with Impact on Students [see this section, below] and will receive their full salaries. During the time in which students in a discontinued program are permitted by Impact on Students to complete their degrees, tenured faculty members shall be continued in their previous duties, or shall, by mutual consent, be reassigned to other suitable positions within the University in accordance with Emergence From Financial Exigency [see this section, above].

Due process must be scrupulously followed during program discontinuance. All of the rights and privileges of the faculty member to seek remedy for an alleged infringement of academic freedom, or violation of
established University tenure policies and procedures that now provide faculty access to the Faculty Assembly Appeals Committee, shall also apply to such allegations regarding actions taken by the University under program discontinuance. A faculty member may appeal the Chancellor’s decision to dismiss. Such appeal shall be made in writing and shall be filed within 30 working days of the date of notification. The appeal may be based only on the grounds that:

a) the dismissal was based on a statutory or constitutionally impermissible reason; or

b) the procedure surrounding the dismissal was improper. Improper procedure includes (but is not limited to):

1. Violation of the procedures outlined in Declaration of Financial Exigency [see this section, above] for arriving at the recommendation of discontinuance of the program in question. Such appeal, however, shall not address the substance of the recommendation.

2. A violation of the procedures outlined in Emergence from Financial Exigency [see this section, above] for arriving at the recommendation of non-reappointment of the individual.

3. Use of incomplete or erroneous data or information in the decision-making process by the Chancellor that led to the dismissal; that is, that the Chancellor had no basis in fact for selecting the appellant for dismissal.

4. Lack of a reasonable effort to place the faculty member in another suitable position in the University before the Notice of Intent to Dismiss.

Where the basis of the appeal is statutory or constitutional impermissibility, the burden of proof is on the faculty member; where the basis of appeal is improper procedure, the burden of proof is on the Chancellor. The faculty member shall have access to all relevant information in the position of the administration to aid in preparing the case based on any of the grounds listed above.

The Faculty Assembly Ad Hoc Appeals Committee shall conduct an informal hearing within 30 working days of notice of the appeal. Testimony and other evidence shall be taken in accordance with usual procedures of the committee as set forth at the time in the appropriate University governance documents. The
parties may have an advisor of their choice present at the hearing. Within 30 working days of the hearing, the committee shall issue a written opinion stating its decision, the reasons for its decision, and its recommendation for disposition. Copies of the opinion shall be sent to the faculty member and the Chancellor.

Normally, the committee's decision shall be final and binding and the case shall be deemed closed. If, however, the Chancellor disagrees with that decision, he/she shall respond in writing to the recommendations of the Faculty Assembly Ad Hoc Appeals Committee within 15 working days, documenting the reasons for disagreement. It is understood that the final administrative authority resides with the Chancellor, who is the appointed representative of the Board of Regents.

If the program that has been discontinued should be reinstated within five years from the date of declaration as specified in Section D, faculty positions in that program shall not be filled unless the dismissed faculty member shall be offered reappointment at the same rank and tenure status as held previously, unless the faculty member is demonstrably unqualified for appointment in the reinstituted program. A reasonable time in which to accept or decline the offer must be afforded the faculty member. If, after the five-year period, a position in the area of previous service of a dismissed faculty member is advertised, the faculty member shall, if possible, be notified.

5. Impact on Students

Following a decision to discontinue a program under the process described herein, the program will be phased out over a maximum of three years immediately following the date of discontinuance announced by the Chancellor in accordance with Emergence From Financial Exigency [see this Section, above]. The students in the program shall be publicly so notified and shall be allowed to finish their course of studies. If it is not possible for students to complete their degree programs within three years, the University shall make reasonable efforts to accommodate such students. Such efforts should include, but not be limited to the following:

a. permitting the student to complete their degree program by taking work in related departments;

b. permitting the student to complete their degree program at another institution;
c. making provisions in the case of graduate students, for supervision of dissertations and administration of graduate examination by faculty at other institutions; and
d. honoring existing multi-year fellowships.

Once program discontinuance has been declared, no new students shall be admitted to the program.

E. Campus Speakers

The University Senate adopted the following policy statement on May 14, 1963:
Free trade in ideas is the fundamental operating principle of our democratic society. It would be expected, therefore, that every educational institution would support that principle. Such support, while only to be expected of education institutions generally becomes, however, in the case of the University of Kansas, mandatory. Precisely because the University is a public education institution, a branch of the organized political force of a democratic society, it is incumbent on the University not merely to support but indeed to foster the fundamental principles of that society. So the University of Kansas must, at all times, make of itself a competitive marketplace for the free interchange of ideas.

The assembly places of the University must, therefore, be open to any properly invited speaker who comes to persuade by the expression of ideas. Only the speaker who would use the free expression of ideas in such a manner as to incite immediate riot or rebellion could reasonably be excluded . . .

In opening its doors to any performer or speaker thus sponsored, the University in no way places any official stamp of approval on the quality of the performance or the reasonableness of the ideas expressed. Since, however, the University will be inevitably associated with that quality of performance or reasonableness of ideas, the University should be able to expect that the freedom of the sponsoring agency will be accompanied, as any freedom must, by a corresponding responsibility, to the end that the University will not be made a refuge for intentional violators of public or private law.

Over the years, the University of Kansas has generally operated in accordance with the principles stated above and, thereby, provided a setting for a wide variety of voluntary and officially sponsored forums, speeches, and performances. It is the hope of the Senate that affirmation of these principles may further strengthen the University's zealous dedication to them in the future.
F. Human Rights

A formal statement of the University's commitment to the furtherance of human rights was adopted by the University Senate on May 11, 1965. As amended on February 19, 1970, this statement reads as follows:

The University of Kansas, recognizing essential human dignity and the equality of all men, is dedicated to the principle that all benefits, privileges, and opportunities afforded by the University shall be accorded to each person—student, faculty member, or employee—according to . . . individual merits, accomplishments, and needs, and that no rights or benefits shall be denied to anyone by reason of race or creed or by reason of sex unless sex is a bona fide qualification. Furthermore, the University is pledged to the establishment of procedures necessary to ensure that no violation of these principles shall be present in its affairs and in keeping with the proud heritage of Kansas as a free state, the University of Kansas will lead the way in promoting equality of opportunity in every form.

In amplification of the original policy statement, this directive was issued by the Chancellor on November 24, 1969:

This statement covers all areas of University activity. When groups of students are taken to other communities to speak, to perform, or to participate in any University-related activity, the school, department, or division involved must ascertain before accepting any such engagement that students will be treated with equal consideration in housing, meals, and every other aspect of the visitation. In case of any doubt, written assurance must be obtained from the community visited that the University's principles will be honored.

G. Recruitment and Selection

The best source of current information regarding Recruitment and Selection policies/procedures can be found on the Medical Center Human Resources website:

http://www.kumc.edu/human-resources/employment/recruitment-policy.html (link modified 10/2011)

http://www.kumc.edu/human-resources/employment/hiring-guide.html (link modified 10/2011)
H. Drug-Free Workplace Regulations

The following policy is effective March 18, 1989, and is adopted pursuant to the requirements of the Drug-Free Workplace Act of 1988:

*It is the policy of the University of Kansas that the unlawful manufacture, distribution, dispensing, possession or use of controlled substances is prohibited in buildings, facilities or grounds controlled by the University (hereafter referred to as “workplace”). Any officer or employee of the University, including faculty, other unclassified staff, classified staff, and student employees, found to be illegally manufacturing, distributing, dispensing, possessing or using controlled substances at the workplace of the University regardless of the site of the workplace, shall be subject to disciplinary action in accordance with applicable policies of the State of Kansas, the Board of Regents, and the University of Kansas. Officers and employees are reminded that illegal manufacture, distribution, dispensing, possession or use of controlled substances may also subject individuals to criminal prosecution.*

As a condition of employment, all employees of the University of Kansas Medical Center shall abide by the terms of this policy statement and will notify the University of any criminal drug statute conviction for a violation occurring in the workplace no later than five days after such conviction. The University will, in turn, notify as appropriate, the applicable federal agency of the conviction within 10 days of its receipt of notification of the conviction. The University will take appropriate personnel action, up to and including termination, within 30 days of receiving notice of such conviction. Employees may also be required to satisfactorily participate, at their expense, in a drug abuse assistance or rehabilitation program before being allowed to return to work. For purposes of this policy, “conviction” means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the federal or state criminal drug statutes. The term “controlled substances” as used in this policy means those substances included in Schedules I through V as defined by section 812 of Title 21 of the United States Code and as further defined by regulation 21 CFR 1300.11 through 1300.15. The term does not include the use of a controlled substance pursuant to a valid prescription or other uses authorized by law.
This policy statement is an integral part of the University of Kansas Medical Center's drug-free awareness program. This policy shall be given to all employees.

I. University of Kansas Medical Center Policy on Substance Abuse

The University of Kansas Medical Center recognizes that substance abuse is a major health problem in the United States and the State of Kansas. The costs to society are immense in terms of health care; lost productivity; in loss of life (of both innocent and impaired people); in spouse, child and sexual abuse; in violence, homicide and suicide; in the etiology of crime and the fear caused by crime at all levels; in death and injury from accidents on the road; in the work place and in the home; and in the dollars spent on legal costs and the cost of law enforcement.

The University of Kansas Medical Center is a major research institution for the state, nation and the world and assumes leadership in the discovery of new knowledge and the development of programs in research, education and patient care. As the major resource in the Kansas Board of Regents system for preparing health care professionals, the programs of KUMC must be comprehensive and maintain the high scholarship and academic excellence on which the reputation of the University is based. Within the framework of this mission, the Medical Center must be comprehensive and maintain the high scholarship and academic excellence on which the reputation of the University is based. Within the framework of this mission, the Medical Center recognizes its responsibility to educate health care students on the prevention, identification and treatment of substance abuse (and dependence), and to provide information that can improve student lives and the lives of their families. The University of Kansas Medical Center also recognizes its responsibility to provide education and information to classified and unclassified staff relative to prevention, identification and treatment of substance abuse and dependence so that employees have sufficient information to make decisions for themselves and their families.

The Medical Center also serves as a role model for the University of Kansas and the State of Kansas, and as such expects its students, staff, faculty and other employees to obey all federal, state and local laws with respect to alcohol and other drugs. Finally, the Medical Center recognizes that the illness of substance abuse and dependence does not stop at the walls of the institution but that some of our students, staff, faculty and other employees are at risk to develop the illness. Therefore, the Medical Center commits to a policy of supporting those who seek and participate in treatment while providing assurance that student status or employment status will not be
affected provided there is no potential for harm to patients or other individuals of the Medical Center.

The University of Kansas Medical Center Policy on Substance Abuse is as follows:

SECTION I: Prevention, Identification and Intervention Policy for Students and Employees

1. Students: The policy for handling substance abuse among students is intended to enhance cooperative effort and to protect both the individual and the Medical Center's substantial interest in the welfare of the Medical Center students.

a. Prevention: Each school in the Medical Center shall develop and implement an ongoing primary prevention program designed to teach their students healthy lifestyles, major health risks, strategies to reduce risks, and to identify and manage personal behaviors that could lead to acute or long-term illness or disability. The primary effort of the substance abuse policies of KUMC will be in the prevention of substance abuse (and dependency). The prevention programs shall be part of an overall program to enhance student well-being at the University of Kansas Medical Center. The dean or dean's designee in each school shall be responsible for overseeing the development, implementation and evaluation of the primary prevention program. Each program must be reviewed by an expert on prevention of substance abuse (and dependency) and is subject to evaluation for effectiveness.

b. Identification: It is assumed that, regardless of the prevention program, substance abuse and dependence will occur. Substance abuse experts agree that early identification and intervention can modify the course of the disease. Therefore, early identification and intervention will be the goal of the Medical Center policy. The dean or dean's designee from each school will conduct workshops and training for faculty and students in substance abuse/dependency identification.

c. Intervention:

i. The dean or dean's designee from each school shall establish a joint faculty-student group for student well-being and provide training in and appropriate means of intervention for individuals with substance abuse problems, as well as a confidential process by which concern for a student's well-being can be reported.

ii. The dean or dean's designee from each school shall establish a process of referral for confidential evaluation and, if needed, treatment of substance abuse/dependency. This process must be non-punitive based on the
In summary, prevention, identification and intervention procedures for students will be available within each school at KUMC.

2. Employees: The policy for handling substance abuse problems among all employees (classified and unclassified) is intended to enhance cooperative effort and to protect both the individual and the Medical Center's substantial interest in the welfare of Medical Center employee

   a. Prevention: All employee members, especially department chairs and supervisors, shall work to engender a Medical Center-wide enlightened attitude and a realistic recognition of the nature of substance abuse, that will encourage employees to take advantage of available treatments whenever needed. The department chair and supervisor will assume leadership in developing and implementing an ongoing primary prevention program designed to outline healthy lifestyles, major health risks, and identify and manage personal behavior that could lead to acute or long-term illness or disability. The primary effort of the substance abuse policies of KUMC will be in the prevention of substance abuse (and dependency). The prevention program shall be part of an overall program to enhance employee well-being at the University of Kansas Medical Center. The department chair and supervisor shall be responsible for overseeing the development, implementation and evaluation of the primary prevention program. Each program must be reviewed by an expert on prevention of substance abuse (and dependency) and subject to evaluation for effectiveness.

   b. Identification and Intervention: It is assumed that, regardless of the prevention program, substance abuse and dependence will occur. Substance abuse experts agree that early identification and intervention can modify the course of the disease. Therefore, early identification and intervention will be the goal of the Medical Center policy. Identification and intervention procedures for employees are referenced in the KUMC Policy on Prevention of Illegal Drug and Alcohol Use on Campus and in the Workplace. (link modified 10/2012)

In summary, prevention, identification and intervention procedures for employees will be available from their department, unit or school.
SECTION II: Educational Programs for Student and Employees

1. Students: Each school in the Medical Center will be responsible for the inclusion of state-of-the-art information relative to substance abuse and dependency in the curriculum of the students in that school.
   a. The dean or dean's designee from each school will work with the faculty of the school to insure that the curriculum of each school is current with content relative to substance abuse and dependency relative to etiology, prevention, identification and diagnosis, treatment and follow-up.
   b. Each school will provide mechanisms whereby the curricular content relative to substance abuse/dependence is reviewed and updated on a biannual basis.

2. Employees: Each department in the Medical Center will be responsible for the inclusion of state-of-the-art information relative to substance abuse and dependency in the education materials used for hiring, orientation and on-going evaluation of all employees.
   a. The director/supervisor of each department/unit of the Medical Center will work with KUMC administration to ensure that each department is current with content relative to substance abuse and dependency relative to prevention, identification and diagnosis, treatment and follow-up.
   b. Each department/unit will provide mechanisms (published and in training settings) whereby the content relative to substance abuse and dependence is reviewed and updated on a bi-annual basis.
   c. The director/supervisor of each department/unit will obtain needed materials relative to substance abuse and dependence, from all external licensing boards/agencies whose members are located within his or her department/unit. Those materials will be incorporated with the KUMC policies and full information on the interaction of those external and internal policies will be provided to employees. Wherever possible, the policies will be similar in content, impact and outcomes.

SECTION III: Compliance with National, State and Local Laws

The University of Kansas Medical Center prohibits the unlawful possession, use, manufacture, or distribution of alcohol or drugs by students and/or employees on its property, or as part of any of its activities. Any student or employee of the University of Kansas Medical Center found to be abusing alcohol or using, possessing, manufacturing or distributing of controlled substances on University property or at University events will be subject to legal action in accordance with applicable federal, state, county, and/or local laws, and to disciplinary action in accordance with applicable policies of the State of Kansas, the Board of Regents, the University of Kansas, and the University of Kansas Medical Center and/or its constituent schools and departments.
SECTION IV: Drug-Free Workplace Regulations

KUMC Policy on Prevention of Illegal Drug and Alcohol Use on Campus and in the Workplace (link modified 10/2012) outlines the Drug-Free Workplace Regulations effective March 18, 1989, and is adopted pursuant to the requirements of the Drug-Free Workplace Act of 1988.

SECTION V: The Use of Alcohol at the Medical Center by Student and Employee Groups

[The term “alcohol” as used in this policy means any product of distillation of a fermented liquid that is intended for human consumption and that is more than 3.2% alcohol by weight as defined in Chapter 41 of the Kansas Statutes].

1. Cereal Malt Beverages: Use and sale of cereal malt beverages (3.2%) may be permitted under authorized and appropriately controlled conditions and regulations to be determined by the administration of each school. Each institution shall maintain a current copy of said conditions and guidelines with the Executive Director of the Board of Regents (10-15-71; 10-17-75; 10-15-87).

2. Service of Alcohol in Non-Classroom Areas: Consumption of alcoholic liquor may be permitted under authorized and appropriately controlled conditions and guidelines to be determined by the administration of each school and set forth in an institutional policy on service of alcoholic liquor. Alcoholic liquor may only be served at luncheons, dinners or receptions which honor individuals and which occur in connection with official University events and/or fund-raising activities for University programs. The service of alcoholic liquor at such events must be approved, in advance, by the chief executive officer of the institution and may only be held in those non-classroom areas, and outside grounds immediately adjacent thereto, which are specifically designated for such activities in the institutional policy on service of alcohol. Each institutional chief executive officer shall also be prepared to provide information to the Board of Regents of Executive Director (6-26-87; 2-18-88). [Authorized by K.S.A. 41-719]

3. Purchase of Alcohol: No state money nor student fee money may be used to purchase alcohol.

J. Policy and Prevention Concerning Sexual Assault/Student Right to Know and Campus Security Act

Refer to the University of Kansas Medical Center Student Handbook and http://www.kumc.edu/police/crime_reports_act.html (modified 10/2011).
K. Policy on Employee and Student Assistance Program

The University of Kansas Medical Center is interested in the health and well-being of its faculty, staff and students. At some time, members of the University community may be faced with a variety of personal problems that may affect their wellness and job performance. While some people attempt to deal with such problems on their own, there can be times when professional assistance can be helpful.

It is in the best interests of the University, its employees and its students to provide assistance to those with personal problems involving alcohol, drugs, family, marriage, finances, emotions or other conditions that may interfere with work attendance, productivity and the ability to get along with co-workers. The University believes that an effective Employee and Student Assistance Program encourages wellness and promotes efficiency of its faculty, staff and student members.

The University has a policy to maintain a drug-free workplace because drug abuse in the workplace may cause serious harm to an employee's or student's health, work performance and social interactions. Accidents and injuries in the workplace are more likely to occur if drugs are used at work. Drug abuse is against the law, and the University may institute disciplinary proceedings for the use of controlled substances in the workplace or other violations of the drug-free workplace policy. To avoid these adverse situations, the University encourages its employees and students to seek counseling and assistance from on-campus and community resources.

The KUMC's Employee and Student Assistance Program is designed to provide information, assessment and referral services to help faculty, staff and students identify problems and develop lifestyles that are physically and emotionally healthy. The University wants to encourage identification of problems at the earliest possible stage to motivate faculty, staff and student members or their family to seek assistance.

There are a number of resources available to KUMC employees and students for personal problems:

1. The Department of Psychiatry offers a full range of inpatient, outpatient and emergency services for the diagnosis and treatment of personal problems, including dependency; the department is professionally staffed by psychiatrists, psychologists and social workers, and appointments may be made through the Psychiatry Clinic or individually through the private practices of these faculty members. Information about these services can be obtained by calling the Department of Psychiatry.
2. Student Counseling & Educational Support Services provide psychological services and educational assistance to students and house staff. Services such as personal, individual, group, couples, and academic counseling are provided by qualified professional staff and are confidential and free of charge to students enrolled at the University of Kansas Medical Center. Services are provided in the strictest of confidence as mandated by the American Psychological Association and State law. The office also provides students with housing referral information.

3. The Kansas Medical Society offers confidential assistance to physicians, medical students and residents suffering from chemical dependency as well as other forms of impairment through their Impaired Physician Program and Impaired Medical Students and Resident Program. Informational brochures about these programs can be obtained from the Student Center or the Dean's Office, School of Medicine.

4. Also available to KUMC employees and students are two counseling centers located on the Lawrence campus; the University Counseling Center and the Psychological Clinic. Counseling may be provided without cost or on a sliding-fee basis depending on the facility used. These resources are staffed by professional-level or practicum counselors.

5. The Kansas State Board of Nursing has entered into a contract with the Kansas Nurses Assistance Program, Inc. (KNAP), a not-for-profit corporation and professional association. KNAP works with all RNs, LPNs, CRNAs and LMHTs in the state with alcohol or drug problems or illness, or physical or psychological difficulties that has or could impair their practice. KNAP offers an opportunity for a person to obtain confidential assistance and if patient care has been jeopardized, it is an alternative to disciplinary action by the Kansas State Board of Nursing. Information on the program is available in the Student Affairs Office or the Office of the Dean in the School of Nursing.

6. An additional source of assistance for employees is the State Lifeline, a 24-hour, toll-free assistance line. If referred through the lifeline, the first counseling session is paid by the state. All contacts are kept in strict confidence.

   Faculty, staff and student members may also contact or be referred to off-campus resources as appropriate. Counseling costs are often covered by health insurance with proper referral from the employee's or student's primary health care provider.
The decision to seek counseling may be that of the employee or student, or there may be situations where referral is recommended by a supervisor, instructor or advisor when performance or behavior problems have been observed. A supervisor, instructor or advisor should not attempt to diagnose a problem when a problem affecting productivity has been observed. Supervisors should encourage the faculty, staff or student member to correct any employment deficiency and to seek professional assistance.

L. Legislative Appearances and Committee Hearings
   The Board of Regents policy on legislative appearances and committee hearings is as follows:
   
   Legislative committees often request faculty and administrators to provide expert testimony on proposed legislation which may or may not affect the Regents and higher education. Faculty and administrators should make every effort to accommodate such requests and shall notify the executive director of the board of the invitation so that the board office will be aware of such appearances.
   
The Executive Vice Chancellor's Office must be notified and in turn they will notify the Chancellor and Board of Regents office. Additionally, legislative appearances by employees of the Medical Center that are not a product of a legislative "request" should be reported, in advance, to the KUMC Vice Chancellor for External Affairs.

M. Treatment of Patients with Infectious Diseases
   When a patient is admitted who has an infectious disease such as AIDS, or who is suspected by the admitting physician of having such an illness, the patient is entitled to receive quality care and the University hospital shall provide appropriate arrangements for isolation or other precautionary procedures. Efforts shall be made by the University hospital to provide to employees potentially assigned to work with such patients adequate education and training regarding the handling of patients with infectious diseases.
   An employee shall deliver normal patient care to the patients with infectious diseases to whom he or she is assigned. Failure to do so shall be considered insubordination and may be grounds for severe discipline up to and including termination.
   Employees with special health problems or needs who are assigned to work with patients having infectious diseases shall have the responsibility for discussing the issue with their supervisor and of providing such medical history or information as is requested of them.
N. Employment of Individuals with an Infectious Disease

All health care practitioners employed by KUMC will be informed of the infection control policies (which are in compliance with the CDC recommendations) by the Executive Vice Chancellor's office. This policy directs each individual health care practitioner to determine whether he or she engages in "exposure prone procedures" as defined in the MMWR, July 12, 1991, Vol. 40., No. RR-8 (Exhibit A).

Each individual will be responsible to determine whether they engage in such procedures and if so, to obtain testing as suggested by the guidelines. The Medical Center, through the infection control coordinator, will suggest sites at which confidential and anonymous testing can be obtained. Such sites could include county health departments, the private physician of the health care practitioner, independent labs, employee health services of the University of Kansas, or the Department of Health and Environment. Any health care worker who engages in high-risk procedures and becomes aware that they are positive for HIV antibody and/or hepatitis surface antigen and e-antigen should notify the infection control coordinator. The infection control coordinator will refer such persons to a review committee selected by the Executive Vice Chancellor that should be comprised of individuals in the institution with expertise in infection control, infectious disease and surgical procedures. The committee will review the health care worker's activities and make a recommendation regarding the advisability of the health care worker's continued involvement in "exposure prone procedures" based on the individual's physical and mental competence, their ability to comply with body substance precautions, and their individual skills at performing invasive procedures. Due process procedures will be clearly formulated, described and provided by legal staff. Confidentiality about the health care provider's serologic status will be strictly enforced, although it cannot be guaranteed.

Health care providers who have patient care contact should obtain a hepatitis vaccine (if not previously infected) and determine their serologic status afterwards.

All employees will have annual infection control training by the Infection Control Office and will be required to observe Body Substance Precautions.

1. Students

The deans of the schools are responsible for ensuring that students of the Medical Center are given instructions on "body substance precautions" before starting their formal studies at the Medical Center, as well as for reviewing these recommendations again just before students start clinical activities. Each student is now required to obtain a TB test, and each medical student is required to obtain a hepatitis vaccination unless a medical waiver from their
personal physician or Student Health is obtained. The students will be informed about the lifestyle activities and behaviors that may increase their risk for HIV or hepatitis. Any student who has reason to feel they may be infectious or previously exposed to hepatitis or HIV will be requested to present to the student health physician. The student health physician will decide whether further testing or evaluation is needed, reinforce the Body Substance Precautions Policy of the University, and verify that the student understands and agrees to follow these precautions. No student should be required to engage in "high-risk procedures" (defined by the CDC) as a requirement for graduation, and students should not perform these procedures because of their inexperience and lack of training. Therefore, every faculty member engaged in clinical teaching at the Medical Center will be informed of the CDCs definition of "high-risk procedures" and will be informed that no student at any time should engage in such procedures regardless of whether they are considered to be high risk for hepatitis carriage or HIV infection. Tasks that students commonly perform (e.g., phlebotomies, IV starts) are not considered high risk by the CDC or other organizations involved in the formulation of the Kansas Department of Health and Environment (KDHE) guidelines.

Department heads and supervisors of the Medical Center will be responsible for monitoring compliance with KDHE safety regulations and ongoing education of the employees about these guidelines. The Infection Control Office will notify the deans of any changes that occur in these guidelines that may have impact upon these policies or the need for further education of the students.

Students visiting from other institutions who are participating in "exposure-prone procedures" will be counseled by their supervising faculty about risk factors associated with HIV infection and hepatitis infection. The faculty will request students to determine whether they may have HIV or hepatitis infection and report to the infection control coordinator for further counseling, testing and referral to the "review committee," which will then determine if they may participate in educational activities at KUMC.

O. University of Kansas Medical Center Electronic Mail (E-mail) Policy

1. Background

The University of Kansas Medical Center continually strives to improve the efficiency of information flow with electronic communication services such as local and wide area computer networks, voice mail, facsimile transmission, and electronic mail (e-mail). This policy memorandum is intended to establish general guidelines regarding use of electronic mail and protection of University information.
2. **Scope**

   This policy applies to all students, faculty and staff of the KU Medical Center, foundation employees, and remote users authorized to access the Medical Center's e-mail system. This policy also applies to all electronic mail originating through the KU Medical Center and any internal bulletin boards or e-mail lists accessed through the use of the Medical Center's e-mail system.

1. **Policy**

   First and foremost, Medical Center faculty, students and staff are strongly encouraged to sign up for and use electronic mail. It is an ideal tool for sharing and disseminating information on any scale. Since the Medical Center's e-mail system is linked to the Lawrence and Wichita campuses (and directly to the Internet as well), e-mail users can communicate with colleagues worldwide. The existence of literally thousands of e-mail discussion groups on the Internet allows users to share information with others in the same field of work, research or study. This electronic communication promotes professional growth.

   As with all Medical Center assets, the electronic mail system is to be used in ways consistent with overall University policy. Generally, e-mail should be used for mission-related purposes. The system may not be used in a way that is disruptive to the operation of the Medical center or offensive to others. The use of e-mail for transmission of information disparaging to others based on race, origin, sex, sexual orientation, age, disability, religion or political beliefs is not permitted under any circumstances. Likewise, electronic mail cannot be used to solicit or proselytize others for commercial ventures, religious or political causes or outside organizations, or personal gain (as in the use of "chain letters" requesting donations to individuals). The use of broadcast mail (sending the same note to groups of employees or students) places stress on the e-mail system and has the potential for generating undesirable volumes of junk mail; it should be selectively used for compelling mission-related reasons only.

   Confidential information should never be transmitted or forwarded to outside companies or individuals not authorized to receive such information, or to Medical Center employees who have no business reason for such information.

   It is emphasized that the privacy and confidentiality of e-mail transmissions cannot be guaranteed. E-mail transmissions may be subject to disclosure through legal proceedings or otherwise through various laws that may be held to apply to such transmissions.
Although patient information transmitted through e-mail may not be subject to state disclosure law, transmission of patient information using e-mail should be used with extreme caution given the Medical Center's affirmative obligation to protect patient confidentiality.

In addition, authorized personnel must have unrestricted access to e-mail and related information stored on University-owned equipment. This access is required for reasons that include retrieving business-related information, trouble-shooting hardware and software problems, preventing unauthorized access and system misuse, assuring compliance with software copyright and distribution policies, and complying with legal and regulatory requests for information. Given these facts, the Medical Center cannot guarantee the privacy or confidentiality of documents and messages stored on University-owned equipment.

Despite these considerations, KU Medical Center employees should never attempt to gain access to any e-mail messages not addressed to them. Normal disciplinary processes related to privacy and confidentiality apply, up to and including dismissal.

2. Conclusion
As the technology for communication and information processing evolves, the Medical Center will continue to examine and refine its information management policies. Electronic mail used in accordance with this policy will allow the Medical Center user community to work together and more productively. Any questions about the Medical Center's policy on electronic mail should be directed to the Department of Information Resources.

P. Methods for Amending this Handbook
Suggestions for procedural changes and amendments shall be forwarded to the Vice Chancellor of Academic Affairs and decisions will be made conjointly by the Faculty Assembly Steering Committee and the Executive Vice Chancellor. These proposed revisions shall be forwarded to the Chancellor for review and approval. Board of Regents' guidelines are to be followed in the development of all proposed changes.

Revisions in this handbook are coordinated by the Vice Chancellor for Academic Affairs, with the assistance of the Faculty Assembly Steering Committee, vice chancellors, deans, University General Counsel, faculty and others. Recommendations for changes or additions to this handbook may be communicated to the dean or the KUMC Faculty Assembly Steering Committee chair.

When a major reorganization of this handbook is contemplated, a committee including representatives of all areas of the Kansas City and Wichita campuses shall be convened by the Vice Chancellor of Academic Affairs. Comments and recommendations for changes shall be invited from
all interested parties. All proposed changes, additions, and deletions shall be reviewed by the
Faculty Assembly Steering Committee and by the appropriate administrative offices. Such changes
in policies and procedures shall be made only after their adoption through appropriate channels,
such as the Kansas Board of Regents, the University Faculty Organization, and/or the Chancellor.

Changes in policies and procedures that are adopted after the publication of any edition of this
handbook are effective upon adoption and will be included in the next revision. The best source of
current information is KUMC's homepage on the Internet.

The official version of this handbook will be online at www2.kumc.edu/aa/fa. Hard copies of the
official handbook will be available in Dykes Library, the Office of the Executive Vice Chancellor, the
Office of General Counsel and the Office of the Vice Chancellor for Academic Affairs.
XI. LIST OF SOURCES OR MATERIAL REFERENCE

AAUP American Association of University Professors Policy Documents and Reports (1984)
Bylaws of the Medical Staff of University of Kansas Medical Center and Hospital (July 1994)
Handbook for the Use of Animals in Research and Education (KUMC)
Kansas Board of Regents Policy Manual
KU Medical Center Safety and Health Programs and Policies: An Overview (November 1990)
KUMC Research Institute – Articles of Incorporation and Bylaws (1992-1993)
Medical Staff Bylaws Rules and Regulations
Our Commitment to You – Patients’ Rights
Patient’s Bill of Rights
Policy Statement on Interaction of Students and Staff at KUMC with Patients (November 1994)
Statement of Patient Rights
The Bylaws of the Health Professions* Faculty (July 1993)
The Bylaws of the School of Nursing (May 1988)
The University of Kansas Medical Center Hospital Ethics Handbook (4th edition) admin. office
The University of Kansas Medical Center Student Health Services Handbook (July 1987)
The University of Kansas Medical Faculty Bylaws (amended 1994)
The University of Kansas Senate Code (October 1993)
University of Kansas Medical Center Infections Control Manual (September 1993)
University of Kansas Medical Center Student Planner and Handbook (1994-95)
What You Should Know – Annual Security Report (September 1993)
## Appendix A. Summary Guidelines for Faculty Appointments on the Medical Center Campus

<table>
<thead>
<tr>
<th>Appointment types</th>
<th>Tenure track / Tenured</th>
<th>Clinical Scholar Track</th>
<th>Affiliate Track</th>
<th>Term appointment (full time)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Appointment titles</strong></td>
<td>Professor, Associate Professor, Assistant Professor or Instructor</td>
<td>Professor, Associate Professor, or Assistant Professor</td>
<td>Professor, Associate Professor or Assistant Professor</td>
<td>Professor, Associate Professor, Assistant Professor or Instructor</td>
</tr>
<tr>
<td><strong>Tenure track - Maximum seven year probationary period.</strong></td>
<td>Initial appointments may be one to three years for a total combination not to exceed four years. At the discretion of the School, the initial or subsequent appointment may be a 3 year rolling contract. Unless specifically terminated by KUMC, rolling contracts will annually roll over to create a new three year contract.</td>
<td>Probational Status - 1 year, renewable up to 6 times at the Assistant Professor rank.</td>
<td>One year maximum for each term.</td>
<td></td>
</tr>
<tr>
<td><strong>Appointment duration</strong></td>
<td>Tenure - Permanent except under extraordinary circumstances. Refer to Handbook for Faculty and Unclassified Staff for complete policy.</td>
<td>Permanent Status - Continuous except under extraordinary circumstances or termination of employment with affiliated institution.</td>
<td>Permanent Status - Continuous appointment</td>
<td></td>
</tr>
<tr>
<td><strong>Appointment frequency</strong></td>
<td>Tenure - Renewable annually for a maximum length of 7 years.</td>
<td>Probational Status - Renewable annually for a maximum length of 7 years at the Assistant Professor rank.</td>
<td>Maximum of four appointments total. Each new offer requires submission of new paperwork.</td>
<td></td>
</tr>
<tr>
<td><strong>Faculty most often included</strong></td>
<td>Faculty pursuing careers in all three aspects of academia including teaching, research, and service.</td>
<td>Full-time faculty who serve the Medical Center in a clinical capacity and have a commitment to clinical education and scholarship.</td>
<td>Faculty whose salary is derived through an approved, affiliated institution, which has a contractual agreement with KU or KUMC for joint or collaborative research and/or teaching.</td>
<td></td>
</tr>
<tr>
<td><strong>Transfer between appointments</strong></td>
<td>1) If mutually agreed, a onetime, one-way transfer allowed to contract (Regents) appointment prior to the end of the 5th year. 2) May make application to any other appointment category.</td>
<td>May make application to any other appointment category.</td>
<td>May make application to any other appointment category.</td>
<td></td>
</tr>
<tr>
<td><strong>Academic FTE allowed</strong></td>
<td>100%</td>
<td>100%</td>
<td>0%</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Academic employee status</strong></td>
<td>Full time only</td>
<td>Full time only</td>
<td>Volunteer</td>
<td>Full time only (For less than 100% option see “Part time, unmodified title” category on this document.)</td>
</tr>
<tr>
<td><strong>Notice of non-reappointment required</strong></td>
<td>Yes</td>
<td>No</td>
<td>Probational Status - No</td>
<td>Permanent Status - Yes</td>
</tr>
<tr>
<td>Appointment titles</td>
<td>Faculty affiliated through VA</td>
<td>Part time, unmodified title</td>
<td>Title modified with clinical</td>
<td>Title modified with research</td>
</tr>
<tr>
<td>-------------------</td>
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</tr>
<tr>
<td>Appointment duration</td>
<td>Appointment covers no more than one academic year at a time.</td>
<td>Appointment covers no more than one academic year at a time.</td>
<td>Appointment covers no more than one academic year at a time.</td>
<td>Appointment covers no more than one academic year at a time.</td>
</tr>
<tr>
<td>Faculty most often included</td>
<td>Faculty whose salary is mostly or entirely derived through VA which has a contractual agreement with KUMC.</td>
<td>Faculty who spend 50% or greater but less than full time service.</td>
<td>Faculty who spend the majority of their time providing clinical service.</td>
<td>Faculty who spend the majority of their time conducting research.</td>
</tr>
<tr>
<td>Transfer between appointments</td>
<td>May make application to any other appointment category.</td>
<td>May make application to any other appointment category.</td>
<td>May make application to any other appointment category.</td>
<td>May make application to any other appointment category.</td>
</tr>
<tr>
<td>Academic FTE allowed</td>
<td>0-100% (Academic FTE may exceed budgeted FTE)</td>
<td>50-99.99%</td>
<td>0-100%</td>
<td>0-100%</td>
</tr>
<tr>
<td>Academic employee status</td>
<td>Full time, part time or volunteer</td>
<td>Part time only</td>
<td>Full time, part time or volunteer</td>
<td>Full time, part time or volunteer</td>
</tr>
<tr>
<td>Notice of non-reappointment required</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Appointment titles</td>
<td>Visiting Professor, Visiting Associate Professor, Visiting Assistant Professor, Visiting Instructor.</td>
<td>Adjunct Professor, Adjunct Associate Professor, Adjunct Assistant Professor and Adjunct Instructor.</td>
<td>Courtesy Professor, Courtesy Associate Professor, Courtesy Assistant Professor and Courtesy Instructor.</td>
<td>Teaching Associate.</td>
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</tr>
<tr>
<td>Appointment duration</td>
<td>Short period of time, not to exceed one year.</td>
<td>Appointment covers no more than one academic year at a time.</td>
<td>Appointment covers no more than one academic year at a time.</td>
<td>Appointment covers no more than one academic year at a time.</td>
</tr>
<tr>
<td>Faculty most often included</td>
<td>Faculty who are only here on a short term basis with intent to return to another academic institution at the end of their term of appointment. May return to KUMC on a semi-regular basis.</td>
<td>Faculty who provide voluntary or part time salaried service (less than 50%).</td>
<td>Faculty who are otherwise employed by the University and are not paid for their faculty position.</td>
<td>Faculty who do not hold a terminal degree in their field.</td>
</tr>
<tr>
<td>Transfer between appointments</td>
<td>May make application to any other appointment category.</td>
<td>May make application to any other appointment category.</td>
<td>May make application to any other appointment category.</td>
<td>May make application to any other appointment category.</td>
</tr>
<tr>
<td>Academic FTE allowed</td>
<td>0-100%</td>
<td>0-49.99%</td>
<td>0</td>
<td>0-100%</td>
</tr>
<tr>
<td>Academic employee status</td>
<td>Full time, part time or volunteer</td>
<td>Part time or volunteer</td>
<td>Volunteer only</td>
<td>Full time, part time or volunteer</td>
</tr>
<tr>
<td>Notice of non-reappointment required</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Appointment titles</td>
<td>Summary Volunteer appointment</td>
<td>Joint (secondary) appointment</td>
<td>Phased retirement</td>
<td></td>
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<tr>
<td>--------------------</td>
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<td></td>
</tr>
<tr>
<td>Title must be modified by: Clinical, Research, Adjunct or Courtesy. Titles available: Professor, Associate Professor, Assistant Professor, Instructor and Teaching Associate (only title that does not require modifier).</td>
<td>Academic rank for the secondary appointment cannot be greater than the primary appointment and is usually identical.</td>
<td>Same title as held before retirement.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appointment duration</td>
<td>The initial volunteer appointment may cover from one month up to a maximum of 3 years. Actual length of appointment is dependent on the date the next 3 year appointment cycle is scheduled to begin. (see below for more information on cycle)</td>
<td>The secondary appointment can be made for terms of 3 years subject to annual review by the department chairperson and faculty member.</td>
<td>Cannot exceed 5 years. Actual time specified in Phased Retirement Program Agreement.</td>
<td></td>
</tr>
<tr>
<td>Appointment frequency</td>
<td>All volunteer appointments are reviewed and new appointments generated on a set 3 year cycle. The effective date for all subsequent appointments is July 1. The first 3 year appointment cycle began July 1, 2003.</td>
<td>Successive appointments upon new offer. Each new offer requires submission of new paperwork.</td>
<td>Does not apply.</td>
<td></td>
</tr>
<tr>
<td>Faculty most often included</td>
<td>Faculty who provide voluntary service and are not paid for their faculty position.</td>
<td>Faculty who already hold a primary appointment in another Medical Center department or in another academic department on any of the KU University campuses.</td>
<td>Faculty who have been employed at least ten years full time and are 55 years or older are eligible. Allows flexibility for faculty who wish to retain their benefits (as specified by BOR policy on phased retirement) while less than full time at end of their career. Tenured faculty may also retain their tenure while less than full time.</td>
<td></td>
</tr>
<tr>
<td>Transfer between appointments</td>
<td>May make application to any other appointment category.</td>
<td>Does not apply.</td>
<td>Does not apply.</td>
<td></td>
</tr>
<tr>
<td>Academic FTE allowed</td>
<td>0&lt;sup&gt;1&lt;/sup&gt;</td>
<td>FTE is with primary appointment.</td>
<td>FTE must be less than full-time and at least 25%. FTE specified in Phased Retirement Program Agreement.</td>
<td></td>
</tr>
<tr>
<td>Academic employee status</td>
<td>Volunteer only</td>
<td>Does not apply.</td>
<td>Does not apply.</td>
<td></td>
</tr>
<tr>
<td>Notice of non-reappointment required</td>
<td>No&lt;sup&gt;5&lt;/sup&gt;</td>
<td>Does not apply.</td>
<td>Does not apply.</td>
<td></td>
</tr>
</tbody>
</table>

1 Handbook for Faculty and Unclassified Staff, Section III, B, 1, 3 - Basis of Appointment and Faculty Ranks
2 Handbook for Faculty and Unclassified Staff, Section III, B, 6 - Guidelines and Criteria for Tenure, Promotion and Appeals
3 Handbook for Faculty and Unclassified Staff, Section IV, H - Retirement
4 Handbook for Faculty and Unclassified Staff, Section III, B, 4 - Policy on Joint Appointments
5 Handbook for Faculty and Unclassified Staff, Section III, B, 6, c, (4) - Non-Reappointment for Non Tenure-Track Faculty
<table>
<thead>
<tr>
<th>Appendix B. Summary Guidelines for Selection of Administrator Vacancy</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Center Director</strong></td>
</tr>
<tr>
<td>1. Announce vacancy</td>
</tr>
<tr>
<td>2. Position description</td>
</tr>
<tr>
<td>3. SEARCH COMMITTEE</td>
</tr>
<tr>
<td>3a. Starts process</td>
</tr>
<tr>
<td>3b. Appointed by</td>
</tr>
<tr>
<td>3c. Membership</td>
</tr>
<tr>
<td>3d. Committee Chair</td>
</tr>
<tr>
<td>3e. Convene 1st meeting</td>
</tr>
<tr>
<td>3f. Charge &amp; Scope</td>
</tr>
<tr>
<td>3g. Clerical help from:</td>
</tr>
<tr>
<td>3h. Search funding from:</td>
</tr>
<tr>
<td>3i. Top Candidates shall Interview with:</td>
</tr>
<tr>
<td>3j. Recommendation:</td>
</tr>
<tr>
<td>4. If search fails:</td>
</tr>
<tr>
<td>5. Decision</td>
</tr>
<tr>
<td>6. Approval</td>
</tr>
</tbody>
</table>

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| 7. Public announcement | On EVC’s instructions | On EVC’s instructions | On EVC’s instructions | On EVC’s instructions | EVC & inform KS-BOR |
### Appendix C. Appeals Committees

<table>
<thead>
<tr>
<th>Appeal Issue</th>
<th>Proposed Committee</th>
<th>Comments</th>
</tr>
</thead>
</table>
| Denial of promotion and/or tenure                 | The Medical Center Hearing Committee  
VCAA or designee – Chairs committee and votes in case of tie. 7 voting, tenured faculty selected by Faculty Assembly Steering Committee  
(1nursing, 1health professions*, 1KU medicine, 1Wichita medicine all having served on P&T committee of respective school; in addition 1nursing, 1health professions*, 1 medicine) | Committee only considers appeals based on the claim that improper procedures were followed in the decision making process that led ultimately to the decision to deny promotion and/or tenure. |
| Alleged violation of academic freedom             | An Ad Hoc Appeals Committee  
Consists of The Medical Center Appeals Committee* plus 1 member chosen by the complainant and 1 member chosen by respondent. One of the four members of The Medical Center Appeals Committee will be chairperson and cannot vote. | The ad hoc committee hears an appeal only after prior review of the issue by the VCAA and FASC and a decision by the FASC that academic freedom is an issue. |
| Recommendation for suspension and/or dismissal based on 1) a for- cause disciplinary sanction arising from a finding of scientific or personal misconduct, or illegal discrimination, 2) demonstrated, sustained failure to meet academic and/or teaching responsibilities, 3) program discontinuance, 4) financial exigency Others | An Ad Hoc Appeals Committee  
Consists of The Medical Center Appeals Committee* plus 1 member chosen by the complainant and 1 member chosen by respondent. One of the four members of The Medical Center Appeals Committee will be chairperson and cannot vote. | The ad hoc committee hears appeals related to a variety of issues. Many of these will be the appeal of an administrative recommendation to suspend or terminate a continuous appointment of a tenured faculty or a probationary faculty before the end of the specified term. This committee will also hear appeals related to proposed sanctions related to misconduct (scientific, scholarly or otherwise). |
APPENDIX C. Proposed Faculty Appeal and Grievance Committees

*A committee of 4 tenured faculty members. The three voting members will represent each of the three schools; i.e., 1 health professions*, 1 nursing and 1 KU medicine. The fourth (nonvoting) will be chairperson and must have a school affiliation different from the complainant. The members of this committee will come from a standing committee selected by Faculty Assembly Steering Committee with approval of Vice Chancellor of Academic Affairs. The standing committee will consist of 9 tenured faculty members (3 health professions*, 3 nursing, and 3 KU medicine). Three members of the standing committee would comprise a quasi-permanent, acting committee. The remaining six are alternates. The fourth member of the acting committee, chosen from the alternates, will act as chairperson of the Ad Hoc Appeals Committee. The nine members of the standing committee will have 3 year, renewable appointments.
<table>
<thead>
<tr>
<th>Investigative Issue</th>
<th>Proposed Committee</th>
<th>Comments</th>
</tr>
</thead>
</table>
| Unacceptable academic performance that, if sustained, could lead to dismissal      | **Ad Hoc Investigating Committee** appointed by Steering Committees of AH, N or the Executive Co,mittee of M in consultation with the respective Dean.  
(Need to define membership)                                                      | Investigating committee initiated at the request of the faculty member involved.                                                                                                                         |
| Research misconduct (including fraud, fabrication or falsification of data, plagiarism, or violation of federal, state, university or funding source compliance requirements. | May or may not involve an investigative committee, depending on the nature of the misconduct, whether or not the issue is subject to an inquiry or a full investigation, and the facts associated with the allegation. Inquiries and investigations may be conducted by an internal compliance officer, an external investigator, and/or an internal committee established on a case-by-case basis. | Covers allegation that a faculty member and/or research group under his/her direction knowingly presented falsified and/or plagiarized research data and/or information, committed research fraud, or violated regulations governing the conduct of research. |
| Academic and/or scholarly misconduct                                               | **Ad Hoc Investigating Committee** appointed by VCAA  
6 tenured KUMC or Lawrence faculty (with knowledge of academic area being investigated but without conflict of interest) Chairperson (nonvoting) designated by VCAA (or designee)  
VCAA is ex-officio member (nonvoting)                                               | Covers allegation that a faculty member knowingly presented false and/or plagiarized information in published material.                                                                                  |
| Personal misconduct and/or alleged violation of KUMC policy on consenting relationship | **Ad Hoc Investigating Committee** appointed by VCAA  
6 tenured KUMC or Lawrence faculty (without conflict of interest) Chairperson (nonvoting) designated by VCAA (or designee)  
VCAA is ex-officio member (nonvoting)                                               | Covers allegation that a faculty member conducted himself/herself in a manner deemed by normal societal standards to be inappropriate and/or which violates the KUMC policy that governs consenting relationships in the workplace. |
| Student complaints against faculty                                                 | **Ad Hoc Investigating Committee** appointed by VCAA  
6 tenured KUMC or Lawrence faculty (without conflict of interest) Chairperson (nonvoting) designated by VCAA (or designee)  
VCAA is ex-officio member (nonvoting)                                               | Covers allegation by a student that a faculty member conducted himself/herself in a manner deemed by normal standards of the profession to be nonprofessional and likely to result in academic, physical or emotional harm to the student. |
APPENDIX D. Tenure Policy

a. After the expiration of a probationary period, teachers or instructors should have permanent or continuous tenure, and their services should be terminated only for adequate cause, except in the case of a program or unit discontinuance or under extraordinary circumstances because of financial exigency. (2-19-97)

b. In the interpretation of the principles contained in Section a. of this policy, the following is applicable:

(1) The precise term and conditions of every appointment should be stated in writing and be in the possession of both institution and teacher before the appointment is consummated.

(2) Beginning with appointment to the rank of full-time instructor or a higher ranker, the probationary period should not exceed seven years, including within this period full-time service in all institutions of higher education; but subject to the proviso that when, after a term of probationary service of more than three years in one or more institutions, a teacher is called to another institution it may be agreed in writing that this new appointment is for a probationary period in the academic profession is extended beyond the normal maximum of seven years; except when the interests of both parties may be best served by mutual agreement at the time of initial employment, institutions may agree to allow more than four years of probationary service at the employing institution provided the probationary period at that institution does not exceed seven years. Notices should be given at least one year prior to the expiration of the probationary period if the teacher is not to be continued in service after the expiration of that period.

(3) If an untenured faculty member becomes a parent through birth, adoptive placement, or adoption of a child under the age of 5 prior to May 1st of the fifth year of the probationary period, that faculty member, upon notification to the institution’s chief academic officer, shall be granted a one-year delay of the tenure review. Notification must occur within 90 days of the birth, adoptive placement or adoption. Faculty members retain the right to opt out of this interruption policy. (3-20-06)

(4) Under unexpected special and extenuating circumstances, prior to the sixth year of service, and at the request of the faculty member and the appropriate dean, the Chief Academic Officer of the university may grant an extension of the tenure clock for a maximum of one year (9-18-97).

(5) No more than two extensions of the tenure clock may be granted to a faculty member for any reason. Nothing in this provision shall be construed to guarantee reappointment of an untenured faculty member (3-20-06).

c. Within this general policy, each Regents institution may make such operating regulations as it deems necessary, subject to the approval of the Board.

d. Any tenure approved by the institution shall be limited to tenure for the recommended individual at the institution consistent with the tenure policies of that institution. (Effective 11/14/2002)

e. In exceptional cases, the chief executive office at a Regents institution may hire a faculty member with tenure without their having completed a probationary period (6-24-99).

f. Decisions of the chief executive officer shall be final and are not subject to further administrative review by any officer or committee of the institution by the Board of Regents (4-18-47; 2-15-80; 5-15-81; 4-16-82; 1-20-84; 2-16-89; 6-29-95).