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COLLEGE OF ALLIED HEALTH SCIENCES

All policies and procedures are in accordance with University System of Georgia Board of Regents and Augusta University policies and procedures. Faculty are encouraged to use the library policy as a reference. Policies may be viewed here.

Faculty Handbook revised August 2012
Updated February 2017
ADMINISTRATIVE POLICIES

ANNUAL EVALUATION and REVIEW for FACULTY and ADMINISTRATIVE LEADERSHIP

PURPOSE
This procedure ensures standardization for the evaluation and review of faculty and administrative leadership across the program departments within the College of Allied Health Sciences in accordance with accreditation and governance requirements.

GUIDING POLICIES
Southern Association of Colleges and Schools, Commission on Colleges
Standard 3.7.2, Faculty Evaluation: “The institution regularly evaluates the effectiveness of each faculty member in accordance with published criteria, regardless of contractual or tenured status.”

University System of Georgia, Board of Regents Policy Manual
Section 8.3.5.1 Faculty: here

University System of Georgia, Board of Regents Academic Affairs Handbook
Section 4.7 here

Augusta University, Academic, Research, and Student Affairs Policy Library
Policy 7.13.4 here

Also referenced in the AU Faculty Handbook here

SCOPE
This procedure describes the process for the standardized evaluation of effectiveness for faculty members and administrative leadership in accordance with published criteria and is applicable to paid faculty appointed within the College of Allied Health Sciences.

PROCEDURE
• CAHS departmental faculty will be evaluated on an annual basis in accordance with overarching requirements for the evaluation of all faculty.
• The annual faculty evaluation process occurs between July and September of each year.
• The criteria for faculty evaluation in all CAHS departments will include:
  o percent of effort regarding teaching, research/scholarship, and service;
• teaching evaluations;
• quantity and quality of research/scholarship and service;
• professional development;
• administration (as appropriate); and
• faculty member’s progress towards promotion and tenure (as appropriate).

• Previous goals and development plans for each faculty member should also be reviewed.

• Future professional growth and development goals should be identified and the availability of resources to fulfill designated responsibilities and enhance areas of teaching effectiveness, research, scholarship, and service should be discussed.

• Each CAHS faculty member will perform, and submit to the Department Chair, a self-evaluation using the appropriate Annual Faculty Evaluation Summary form and assess progress towards meeting individual goals from the previous evaluation period by July 31. Department Chairs and Administrative Deans will perform their self-evaluations, using the appropriate Executive Performance Management form, by Aug. 15.

• The Department Chair will review self-evaluation documents and meet with individual faculty members in August to review performance during the evaluation period and agree on new goals for the next evaluation period. Department Chairs and Administrative Leadership will review their self-evaluation documents when meeting with the Dean in August/September.

• When applicable, CAHS criteria for Promotion and Tenure should be reviewed with the faculty member to identify areas of need or adequate progress towards promotion and tenure success. Specific action steps must be identified with expected timelines by which the faculty member should achieve these goals.

• Department Chairs (or Dean for Department Chair and Administrative Deans) will complete an Annual Performance Evaluation Summary form for individual faculty members. Areas for potential faculty development or improvement will be discussed and included in a narrative summary.

• In instances where areas of deficiency are noted at the annual review and further action is required, the Chair (or Dean for Department Chair) is responsible, in consultation with the faculty member, for establishing a Faculty Development Plan (FDP) directly related to the findings of the annual review. The FDP will:
  - specify goals or outcomes that would help the faculty member overcome identified deficiencies;
  - outline the activities that can be undertaken to achieve the goals or outcomes;
  - set appropriate time within which the goals or outcomes should be accomplished (which should not exceed one year); and
  - indicate the criteria and timeframe in which progress will be monitored.

• A faculty member who disagrees with the FDP, or any subsequent actions resulting from the evaluation process, has the right to appeal as outlined in MCG Policy 7.13.4.

• Faculty members will receive a final copy of their evaluation for review and signature.
• Completed faculty evaluations are to be submitted to the Dean’s office no later than **Aug. 15**. The Dean will review all faculty evaluation documentation through an annual meeting with each Department Chair in **August/September**.

• A final copy of the faculty evaluation forms signed by the Dean, Department Chair, and faculty member will be kept in the Dean’s office as well as in the department’s faculty files.

• All annual evaluation reviews will be completed by **Sept. 15**.

**SCHEDULE**

*Dates represent the current academic calendar and may be subject to change.*

<table>
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<tr>
<th>Date</th>
<th>Event Description</th>
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<tr>
<td>July 31 *</td>
<td>Faculty member submits self-evaluation form to Department Chair</td>
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<tr>
<td>Aug. 1-15 *</td>
<td>Department Chair meet with individual faculty members</td>
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<tr>
<td>Aug. 15</td>
<td>Department Chairs submit faculty evaluations to Dean’s office</td>
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<tr>
<td>Aug. 15–Sept. 15</td>
<td>Dean meets with Department Chairs to review individual, department, and faculty evaluations</td>
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*Department Chairs with more than twelve faculty members may request earlier due dates for self-evaluations and individual meetings.*

Approved by CAHS Interim Dean, April 1, 2010
DISTRIBUTION of FACILITIES and ADMINISTRATIVE FUNDS

PURPOSE
This memorandum establishes a uniform procedure for distributing Facilities and Administrative (F&A) funds awarded to the college, and provides guidelines to the departments for use of their allotted share of the funds.

Departmental use of funds:
- The primary use of F&A funds should be to compensate for departmental resources expended in the conduct of the research project. This might involve salary for faculty or staff effort, supplies, or equipment maintenance not covered by the direct costs awarded in the grant.
- The funds might also be used to enhance the departmental infrastructure in ways that can promote or facilitate future research projects, such as the purchase of new equipment.
- If the Principal Investigator of the research project has not been awarded funds through the AU Research Incentive Program, the chair may elect to allow this individual to use the funds to enhance their research program. This might involve purchasing supplies, travel costs to research conferences, or publication costs for research manuscripts.

SCOPE
This procedure applies to all departments within the College of Allied Health Sciences.

PROCEDURE
Distribution of funds:
For each research project generating F&A, 20 percent of the funds will be retained by the Dean for use at the college level, and the remaining 80 percent will be passed on to the Chair of the department in which the Principal Investigator of the project is based. The only exception will be for projects using college-wide (not departmental) resources and conducted by faculty who report directly to the Dean. In such cases, the Dean will retain 100 percent of the funds. In circumstances of fiscal exigency, the funds retained at the level of the college may increase to 70 percent of the F&A generated based on the discretion on the Dean.

1. Provost’s office will notify the Dean’s office of the availability of F&A funds with distribution proportions based on the percentage generated by each department.
2. The Dean’s office will provide CFC (expense account) to the Provost’s office in order to transfer funds.
3. Once funds have been transferred to Dean’s office, they will be distributed (described above) and transferred to the department.
4. The Dean’s office will notify the department via email once the final transfer has occurred.

Approved by: CAHS Interim Dean, April 1, 2011
TRAVEL GUIDELINES and POLICIES

BACKGROUND and RATIONALE
Department Chairs have very few resources to reward faculty during these times of unprecedented fiscal restraints. Travel to professional meetings is one of the few ways a department, college or institution can both reward faculty for their efforts and also promote continued professional development. Unfortunately, there are insufficient resources to fully support the continuing education and licensure requirements of faculty. Therefore, it is necessary to adopt travel guidelines and policies to ensure maximum use of limited resources and a transparent process for making travel decisions, ultimately rewarding our faculty and advancing the mission of our college. This document specifies travel guidelines to be used within the College of Allied Health Sciences, effective July 1, 2004. These guidelines and policies will not apply to travel needs related to grants, study sections, distance learning, clinical affiliation rotations/agreements, faculty recruitment, student recruitment, program marketing or other required travel needs for operations of an approved program.

GUIDING PRINCIPLES
1. These policies apply to all faculty, including Department Chairs and Associate Deans.
2. Departmental and college budgets cannot accommodate travel for every faculty member each year.
3. It is primarily the faculty member’s responsibility to obtain sufficient continuing education to maintain their professional credentials and/or license.
4. Faculty who receive travel funds to present papers or posters at professional meetings will be expected to subsequently publish their work in a peer-reviewed journal.
5. Faculty, especially experienced faculty at higher rank, should be encouraged to pursue national involvement in professional associations, especially those activities that are fully or partially funded by the organization to conduct its business.
6. Faculty should pursue sponsorship, grants, and practice opportunities to support travel to professional meetings.
7. Travel budgets must support faculty presentations at national/international meetings to enhance the national reputation/visibility of our faculty and programs.
8. Travel budgets should support faculty attendance at professional meetings when awarded fellowships in a professional association or other type of significant achievement brings national recognition to the faculty, program(s), college and institution.
9. In some cases, a specific professional meeting or activity may provide great benefit to the faculty member or the department and such cases can be considered for partial or full reimbursement with justification by the Department Chair (or Dean) with the travel request.
10. There are insufficient college and departmental travel funds to fully support faculty travel to state meetings related to professional work of state professional associations.
11. The effectiveness of Department Chairs will be determined in part by their ability to maximize the departmental budget, including travel, to achieve the greatest overall impact on their program(s) and faculty.
12. These travel policies will not apply to travel needs related to grants, distance learning, clinical affiliation rotations/agreements, faculty recruitment, student recruitment, marketing or other required travel needs for operations of an approved program.

TRAVEL POLICIES
1. During the annual review process, faculty should discuss their annual plans with their Department Chairs including plans to submit papers or posters for presentation at national/international meetings during the upcoming year. Department Chairs and Associate Deans will discuss similar plans during their annual review with the Dean.
2. The Department Chair and faculty (or Department Chair and Dean) will agree to the annual plan for faculty presentations at national professional meetings and the expected travel request that would be submitted if such plans materialize.
3. Faculty should submit travel request forms to their Department Chair with an attachment showing official acceptance of the paper or presentation they will be giving at a national meeting. Department Chairs would follow the same process with the Dean.
4. The Department Chair or Dean will not necessarily approve travel requests or reimbursement to present at a national/international professional meeting if it was not previously addressed with the annual plan. Approval can be granted if the Department Chair or Dean determines that the travel fits with the budget, guiding principles, and other travel policies.
5. Faculty who receive reimbursement for travel to present a paper or poster at a professional meeting will be expected to submit a manuscript for publication in a peer-reviewed journal within 12 months of the meeting. Outcomes other than manuscripts may be approved in writing by the Department Chair or Dean, but must coincide with promotion and tenure criteria and approved annual plans.
6. Faculty, including Department Chairs and Associate Deans, who receive travel funds for making a presentation and do not submit a peer-reviewed manuscript within 12 months will not submit travel requests for additional funding to present at another professional meeting until this goal is achieved.
7. Faculty who do not have their manuscripts (from presentations) accepted for publication within a reasonable timeframe (as determined with their Department Chair or Dean) will not be eligible to request travel funds for professional meetings until this goal is achieved.
8. Faculty will be expected to continue working on any submitted manuscript until it is accepted for publication by a peer-reviewed journal and will be a consideration for approval of funding for further travel for additional presentations.
9. Faculty who receive travel reimbursement to attend a national/international meeting to receive fellowship or other significant national awards will be exempt from the manuscript requirement for this specific travel.

10. The manuscript requirement for approved travel will not pertain when a specific professional meeting or activity may provide great benefit to the faculty member or the department and such cases were approved for partial or full reimbursement with justification by the Department Chair (or Dean) with the travel request.

11. Faculty travel related to state or national professional involvement will be evaluated on a case-by-case basis and whenever possible these costs should not be incurred by GRU.

12. Department Chairs will determine the extent to which the travel budget may support junior faculty involvement in state professional organizations as it fits with faculty annual plans, including professional development, promotion, and tenure.

13. Department Chairs will provide a table with their annual report showing how the travel budget was used to support the faculty and program needs within their department with annual updates on the progress of each presentation, poster, or abstract.

14. These policies are in addition to the travel policies specified by the Board of Regents and Georgia Regents University.

**TRAVEL PROCEDURES**

1. The travel procedures are those specified by Georgia Regents University.

2. For the College of Allied Health Sciences, faculty will attach a memo to the travel request form, stating why the funds are requested and how the request fits with these college policies and the approved faculty annual plan.

*Approved by CAHS Dean, July 1, 2004*
NON-PERSONNEL FUNDING ALLOCATIONS

PURPOSE
This procedure provides guidelines for the direction of funding for non-personnel funding for a fiscal year. Funding may be limited and will be disbursed in accordance with priorities and in support of strategic initiatives of the college as determined by the Dean and as available by the institution. Other needs may be met through proper use of faculty practice funds, foundation funds, and sponsored funding.

SCOPE
This procedure applies to all departments within the College of Allied Health Sciences. All requests should be made in accordance with AU Travel Guidelines and Business Process and the University System of Georgia Travel policies found here.

GUIDING PRINCIPLES
1. These standards apply to all staff and faculty, including Department Chairs, Assistant Deans and Associate Deans.
2. All travel funding requests must be made in accordance with current USG Board of Regents and AU travel policies.
3. College budgets cannot accommodate travel for every faculty member each year.
4. It is primarily the faculty member’s responsibility to obtain sufficient continuing education to maintain their professional credentials and/or license.
5. Faculty who receive travel funds to present papers or posters at professional meetings will be expected to subsequently publish their work in a peer-reviewed journal.
6. Faculty, especially experienced faculty at higher rank, should be encouraged to pursue national involvement in professional associations, especially those activities that are fully or partially funded by the organization to conduct its business.
7. Faculty should pursue sponsorship, grants and practice opportunities to support travel to professional meetings.
8. Travel budgets will primarily support faculty presentations at national/international meetings to enhance the national reputation/visibility of our faculty and programs.
9. Travel budgets should support faculty attendance at professional meetings when awarded fellowships in a professional association or other type of significant achievement brings national recognition to the faculty, program(s), college and institution. In some cases, a specific professional meeting or activity may provide great benefit to the faculty member or the department and such cases can be considered for partial or full reimbursement with justification by the Department Chair (or Dean) with the travel request.
10. There are insufficient college and departmental travel funds to fully support faculty travel to state meetings related to professional work of state professional associations.
11. The effectiveness of Department Chairs will be determined in part by their ability to maximize the budget, including travel, to achieve the greatest overall impact on their program(s).
12. Additional travel will be accommodated related to grants, distance learning, clinical affiliation rotations/agreements, faculty recruitment, student recruitment, marketing, or other operations of an approved program. Such travel may be considered as supporting teaching or research, not necessarily as part of professional development.
13. Funding for supplies/equipment may be requested for accreditation fees, books, clinical supplies, computer parts, computer software, copy center, freight, lab supplies, membership dues, maintenance contracts, office supplies, postage, printing, registration, repairs, teaching supplies, telephones, work study, recruitment, office furnishings, gases, computer systems, and other equipment.

RESPONSIBILITIES

1. During the annual review process, faculty should discuss their annual plans with their Department Chairs including plans to submit papers or posters for presentation at national/international meetings during the upcoming year. Department Chairs and Associate Deans will discuss similar plans during their annual review with the Dean.
2. The Department Chair and faculty (or Department Chair and Dean) will agree to the annual plan for faculty presentations at national professional meetings and the expected travel request that would be submitted if such plans materialize.
3. Faculty should submit travel request forms to their Department Chair with an attachment showing official acceptance of the paper or presentation they will be giving at a national meeting. Department Chairs would follow the same process with the Dean.
4. The Department Chair or Dean will not necessarily approve travel requests or reimbursement to present at a national/international professional meeting if it was not previously addressed with the annual plan. Approval for partial funding can be granted if the Department Chair and Dean determine that the travel fits with the budget, guiding principles, and other travel policies.
5. Faculty who receive reimbursement for travel to present a paper or poster at a professional meeting will be expected to submit a manuscript for publication in a peer-reviewed journal within 12 months of the meeting. Outcomes other than manuscripts may be approved in writing by the Department Chair or Dean, but must coincide with promotion and tenure criteria and approved annual plans.
6. Faculty, including Department Chairs and Associate Deans, who receive travel funds for making a presentation and do not submit a peer-reviewed manuscript within 12 months may not submit travel requests for additional funding to present at another professional meeting until this goal is achieved.
7. Faculty who do not have their manuscripts (from presentations) accepted for publication within a reasonable timeframe (as determined with their Department Chair or Dean) will not be eligible to request travel funds for professional meetings until this goal is achieved.
8. Faculty will be expected to continue working on any submitted manuscript until it is accepted for publication by a peer-reviewed journal and will be a consideration for approval of funding for further travel.

9. Faculty who receive travel reimbursement to attend a national/international meeting to receive fellowship or other significant national awards will be exempt from the manuscript requirement for this specific travel.

10. The manuscript requirement for approved travel will not pertain when a specific professional meeting or activity may provide great benefit to the faculty member or the department and such cases were approved for partial or full reimbursement with justification by the Department Chair (or Dean) with the travel request.

11. Faculty travel related to state or national professional involvement will be evaluated on a case-by-case basis and whenever possible these costs should not be incurred by MCG.

12. Department Chairs will consider the extent to which the requested travel may support junior faculty involvement in state professional organizations as it fits with faculty annual plans, including professional development, promotion, and tenure.

13. Department Chairs will provide an annual report to the Dean showing how the travel budget was used to support the faculty and program needs within their department, including updates on the progress of each presentation, poster, or abstract.

14. These policies and guiding principles are in addition to the travel policies specified by the Board of Regents and Georgia Regents University.

15. Department Chairs/Office Managers are responsible for maintaining expenses within the fiscal year budget parameters allocated by the college. The Department Chair/Office Manager will be responsible for addressing budget checking errors that result from overspending. The Dean’s office will not provide additional funding for these errors.

**PROCEDURE**

1. Dean requests non-personnel budget proposals from Department Chairs in **February**.

2. Department Chairs evaluate fiscal year spending needs and submit budget proposal form to Dean in **March**.

3. Dean reviews departmental requests and allocates funding to the departments during the original budget process according to available institutional funding and strategic initiatives.

4. Upon notification by the institution of an approved budget, the Dean notifies Department Chairs of their fiscal year budget allocation.

5. Department Office Managers reconcile the departmental budget spreadsheet and submit results to the CAHS Business Manager by the **5th of each month**.

6. Department Chair submits to the Dean an annual travel report confirming adherence to travel guidelines at the **end of the fiscal year**.
FORMS
The CAHS Dean’s office will provide Department Chairs and Office Managers with forms for fiscal year budget proposals, department budget spreadsheet, and annual travel reporting.

ADMINISTRATIVE POLICIES continued

DISTRIBUTION OF SALARY RELEASE FUNDS

PURPOSE
This memorandum establishes a uniform procedure for distributing Salary Release Funds awarded through extramural (and sometimes intramural) research grants.

1. The direct costs (or personnel costs) of a funded research project compensates for the time of project personnel and generates corresponding salary release for their department.
2. The salary release funds should be primarily used to pay for replacing the effort of the faculty and staff while participating in the research project.

SCOPE
This procedure applies to all departments with the College of Allied Health Sciences.

PROCEDURE

Distribution and use of funds

1. The salary release funds generated by a research project remain in the department in which the investigator whose effort is covered by the salary release is based.
2. There is no need to submit an application for these funds or to justify how the funds will be used. The only stipulation is that they must be used for personnel -- not supplies, equipment, or other expenses.
3. The chairs are encouraged to work with the investigator to determine the best use of the funds to meet the needs of the department as well as those of the investigator.
4. The compensated effort that the investigator devotes to research must be offset by an equivalent reduction in effort in the areas of teaching, clinical, service, unfunded research, and/or administration.
5. For each research project generating salary release, 10 percent of the funds will be transferred to the Dean’s office for research and educational initiatives at the college level. This will occur when the Distribution Change ePAR is submitted through the college’s Director of Business Operations. The Department should submit a Budget Amendment Form to the Dean’s Office for the 10 percent being transferred to the Dean. Conversion from personnel to non-personnel may need to have additional approval.
6. Release funds must be utilized in the current fiscal year.

Approved by CAHS Dean, February 2017
DEAN’S PROMOTION and TENURE COMMITTEE

INTRODUCTION
The quality of Georgia Regents University is determined in large measure by the quality of the faculty. The decision to promote or tenure a faculty member is therefore a key decision which has long range consequences for defining that quality. It follows that the decisions made at the department, college, and university levels are among the most important made each year.

The quality of a candidate’s portfolio should be consistently evaluated based on their specific areas of assigned responsibility. The role of members of the Dean’s Promotion and Tenure Committee, the review committee for the College of Allied Health Sciences, is a demanding one: To provide a dispassionate and careful review which considers each case solely on its merits and which ultimately contributes to the quality of the School.

Both Georgia Regents University and the College of Allied Health Sciences Guidelines for Appointment, Promotion, and Tenure should be reviewed prior to evaluation of nominations for promotion and/or tenure. Because these are critical long-range decisions, particular attention should be paid to the Guidelines as they pertain to recommendation for tenure and to the rank of Associate Professor.

COMMITTEE DESCRIPTION
The definition and role of the Dean’s P&T Committee is provided in the Guidelines. As noted, it is not the principal function of members to serve as disciplinary experts. The Chair recommending promotion and/or tenure has the responsibility of making the case. The Dean’s P&T Committee is responsible for evaluating whether or not the case made meets GRU and CAHS criteria. Tenure and promotion are earned and are not obligatory.

The Dean’s P&T Committee will have a portfolio at their disposal which includes the record of the individual applicant, the advice of outside experts, and decisions from the departmental level. Were there a single question to be asked, it would be this:

*Is there a compelling case that the person recommended for promotion or tenure will increase the quality of the department at the rank recommended or as tenured faculty?*

This question implies that an applicant is doing more than just a competent, responsible job, for that is what is assumed when a person is invited to join the faculty. This question also implies that the promotion and tenure process is designed to improve the quality of the university by assuring quality enhancement at critical decision points. The responsibility of the Dean’s P&T Committee, in its overall
evaluation, is to advise against promotion and/or tenure in borderline cases and in cases where departmental reviews have been inadequate.

**OPERATIONAL CONSIDERATIONS**

1. **Composition and terms**
   The Dean’s P&T Committee determines its own Chair using a rotating schedule by department. The prior year’s Chair becomes the recording secretary. One representative from each department is appointed by the Dean for a minimum of three (3) years. Each member can serve consecutive terms. A member of the Dean’s P&T Committee may not serve simultaneously on their departmental review committee.

2. **Affirmative action compliance standards**
   In keeping with commitments made under the Equal Employment Opportunities and Affirmative Action Program, matters of age, race, disability, color, gender, national origin, or religious beliefs must not be considered in any decision regarding promotion or tenure.

3. **Principle of flow**
   Consistent with the principle of flow, the Dean’s P&T Committee considers recommendations from the Department Chair. In making its recommendation, the Dean’s P&T Committee will evaluate cases
   - to assess the strength of the substantive evaluation of the candidate made by the Department Chair and departmental review committee, thus ensuring that the prior evaluation meets the criteria embodied in the Guidelines; and
   - to assure uniformity of standards across the disciplines represented.

4. **Conflict of interest**
   No members of the Dean’s P&T Committee may recuse themselves, absent a conflict of interest. Members who recuse themselves are not considered eligible voters and may not participate in consideration and discussion of a candidate’s portfolio.
   - Dean’s P&T Committee members from the department of a candidate should abstain from participating in any form of evaluation of that candidate. Similarly, members who have a close personal or professional relationship with the candidate that would preclude an unbiased vote should abstain from participating in any form. Members of the Dean’s P&T Committee may not offer letters of recommendation on behalf of applicants for promotion and/or tenure.
   - If the Dean’s P&T Committee needs further clarification or information on a candidate, it should be sought from the CAHS Dean.

5. **Specifications of the vote**
   After full consideration of all available information, the Dean’s P&T Committee should vote on the candidate by secret ballot and record the number of yes and no votes (exception noted above). No absentee ballots are allowed. The result of the vote, including the tally, must be reported to the committee before the meeting adjourns.
In addition, the Dean’s P&T Committee must record the rationale for its decision regarding the candidate’s application for promotion and/or tenure. All such statements must be in writing and must be transmitted, along with the tally of the vote, to the Dean.

6. **Reconvening**
The Dean’s P&T Committee may be reconvened at the discretion of the Dean.

7. **Confidentiality**
It is essential that the deliberations of the Dean’s P&T Committee be kept confidential. The deliberations of the committee should not be divulged by anyone. Should anyone—faculty or administration—approach a member concerning any candidate, that person should be referred to the CAHS Dean.

Approved on March 28, 2007

**FACULTY POLICIES**

**FACULTY APPOINTMENT, DEVELOPMENT, PROMOTION and TENURE POLICIES (FADPT)**

It is expected that all faculty are familiar with the Faculty Appointment, Development, Promotion and Tenure Policy located in the GRU Faculty Manual. The following guidelines were developed to assist faculty in interpreting the (Promotions and Tenure) academic performance components as they pertain to the College of Allied Health Sciences.

**I. APPOINTMENT**
Full-time faculty in the College of Allied Health Sciences may be appointed to the tenure track at the rank of Instructor, Assistant Professor, Associate Professor, or Professor, or to the non-tenure track at the rank of Instructor, Assistant Professor, Associate Professor, or Professor. In accordance with GRU statutes, the responsibility of initiating recommendations for appointments resides at the departmental/unit level. All appointments must comply with GRU and USG policies.

**II. FACULTY DEVELOPMENT**
CAHS embraces and supports faculty activities aimed at obtaining excellence, distinction, or merit in teaching, learning, scholarship, and areas required for obtaining a national reputation within the
specified priorities of the college and department. Developmental activities that require travel should abide with the CAHS Travel Guidelines.

III. TENURE
Tenure track is established at the time of initial appointment. Significant performance is expected in all three areas of academic appointment: teaching, research/scholarly achievement, and service. Outstanding performance is expected in at least two areas that must include research/scholarly achievement.

The CAHS faculty views tenure as an important safeguard of accountability and quality in higher education. Tenure ensures that the institution’s academic mission will be guided by professionals who possess a deep, lasting commitment to collectively shape institutional decisions through their actions in departments, colleges, or the institution as a whole.

While the general performance indices are similar for those needed for promotion (GRU P&T Guidelines Section 1.3), faculty members seeking tenure must also demonstrate through teaching, research, and service a contribution to the mission and to the anticipated future needs of the institution. Tenure track faculty should review their progress toward tenure with their Department Chair on no less than a yearly basis.

IV. ELIGIBILITY FOR TENURE
Faculty in the tenure track are eligible for consideration for tenure after serving a probationary period of a minimum five (5) years of full-time service at the rank of Assistant Professor or higher.

The 5-year period must be continuous with one exception: A maximum two (2) years’ interruption due to a leave of absence or part-time service may be permitted.

A maximum three (3) years’ credit toward the minimum probationary period may be allowed for service in tenure track professional positions at other institutions or for full-time service at the rank of Instructor at Georgia Regents University. (GRU FADTP Policy, 1/18/90, p. 17)

Under certain circumstances, tenure can be awarded at the time of appointment.

Tenure will be granted at the rank of Associate Professor or higher.

V. ELIGIBILITY FOR PROMOTION
The Board of Regents requires strong justification based upon performance criteria for accelerated promotion or promotion with a terminal degree in the candidate’s discipline. Promotion at the first year of eligibility should be based upon exceptional performance (GRU FADPT Policy).

Requirements for promotion:
• 5.2.1. Assistant Professor – At least three years of full-time academic experience or its equivalent at the Instructor level or non-teaching postdoctoral experience.

• 5.2.2. Associate Professor – At least four years of full-time academic experience at the Assistant Professor level or equivalent responsibilities. Doctorate or its equivalent in training or experience is expected.

• 5.2.3. Professor – At least five years of full-time academic experience at the Associate Professor level or equivalent responsibilities. Doctorate or its equivalent in training or experience is required.

VI. TENURE TRACK PROMOTION

Competence in all three areas with outstanding achievement in two of the three areas, one being research/scholarly achievement, is expected of all tenure track faculty.

• Assistant Professor shall indicate satisfactory performance of all academic duties and demonstrated potential for further professional development. The candidate should be recognized locally as an expert in their field.

• Associate Professor shall indicate a sustained record of professional achievement. The candidate shall have achieved regional recognition for accomplishments in their field. Outstanding achievement should be demonstrated in both areas of research/scholarly achievement and in teaching.

• Professor shall be reserved for those who have been accepted and recognized nationally or internationally for distinction and excellence in their professional achievements. Outstanding achievement should be demonstrated in all three areas: research/scholarly achievement, teaching, and service, as defined in 4.C.3 above. (Specific expectations shall be outlined in the College FADPT documents).

In addition, it is expected that the general level of performance at each rank will be higher than at lower ranks.

VII. NON-TENURE TRACK PROMOTION

Competence in all three areas, with outstanding achievement in at least one of the three areas, is expected of all non-tenure track faculty. The area of outstanding achievement should be determined by the job assignment. Conditions and expectations for any faculty appointment (tenure or non-tenure) shall be agreed upon in writing at the time of appointment and adjusted if necessary in accordance with the GRU guidelines below (1.1).

• Assistant Professor shall indicate satisfactory performance of all academic duties and demonstrated potential for further professional development. The candidate should be recognized locally as an expert in their field. (Specific expectations shall be outlined in the college FADPT documents.)
• Associate Professor shall indicate a sustained record of professional achievement. The candidate shall have achieved regional recognition for accomplishments in their field. (Specific expectations shall be outlined in the college FADPT documents.)
• Professor shall be reserved for those who have been accepted and recognized nationally or internationally for distinction and excellence of professional achievement, and who show evidence of continued professional growth. (Specific expectations shall be outlined in the college FADPT documents.)

In addition, it is expected that the general level of performance at each rank will be higher than that of lower ranks.

GUIDELINES AND PROCEDURES
Refer to Guidelines and Procedures in the GRU Faculty Manual under Faculty Appointment, Development, Promotion, and Tenure for specific information pertaining to guidelines and procedures.

CRITERIA FOR PROMOTION TO ASSISTANT PROFESSOR

TEACHING
Competence
Evidence should include an assessment on each of the teaching criteria emphasized below indicating that there are no uncorrected serious faults or deficiencies. Evidence of growth as a teacher beyond the level attained as an Instructor should be provided.

Outstanding achievement
Local visibility for contributions to teaching should be attained in order to earn a rating of growth in teaching for promotion to Assistant Professor. Appropriate evidence should include dissemination of scholarly publications in the area of expertise. Other forms of evidence sustained over a period of years may include:

Professional growth and development
• Evidence of relevant professional continuing education
• Member of accreditation site visit teams
• Member of appropriate professional organization
• Appointment to state and regional education boards

Teaching load
• Appropriate growth in teaching at designated level(s) and in more than one form (e.g., lecturing to large groups, conducting discussion groups and seminars, directing laboratory or clinical experiences, guiding independent study or research)
• Course development and management
• Advising, mentoring, nurturing students
• Number and level of courses taught

**Effectiveness of teaching/learning activities**
• Awards in recognition of contributions to or performance in teaching
• Faculty course evaluations
• Student performance on external examinations/evaluations
• Local impact of scholarship on teaching, including published materials, conference presentations, and related activities (e.g., textbooks, videos, web pages)
• Peer evaluation of teaching
• Student performance on external examinations/evaluations

**RESEARCH**

**Competence**
Evidence that the candidate has continued to grow in those aspects of research that relate to their area of excellence (teaching or service), either by original inquiries or by interpretation, synthesis, or evaluation of the work of others. Evidence of such growth in scholarship may be found in scholarly publication or in publications on teaching and/or service that indicate scholarly qualities.

**Outstanding achievement**
Evidence of having established a reputation for research by other authors and public acknowledgment of the importance of the faculty member’s contributions are common forms of evidence of national prominence in research.

**Primary scholarly activities are:**
• Scholarly work that is peer reviewed, disseminated, and retrievable. Consideration is given to percentage of FTE allocated to scholarship, authorship, and impact of journal. The primary scholarly activity is publication of original research studies in peer-reviewed journals. Number and type of publications should be determined as part of the annual faculty development plan.
• Writing/obtaining extramural/intramural funding as PI or SI.

**Additional examples of research scholarly activity include but are not limited to:**
• Books or chapters of books that have not been peer reviewed
• Proceedings or chapters in proceedings that have been peer reviewed
• Abstracts that have been peer reviewed and lead to publications and/or grants. Abstracts alone are insufficient to demonstrate a record of scholarly work and in fact may work against a faculty member if they do not materialize into a full publication and/or funded grant.
• Audiovisual materials that have been peer reviewed and made available to the public
• Computer courseware that has been peer reviewed and made available to the public
• Invited/Peer-Reviewed professional presentation (oral/poster) at state or regional meetings
• Invited continuing education presentations in which you are an acknowledged expert in the field
• Distinguished lecturer and/or visiting professor
• Awarding of patent

SERVICE
Competence
A record of a greater range of service than is considered satisfactory for level of Instructor. The evidence shall also include assessment of the quality of service.

Outstanding achievement
Evidence of outstanding performance over a period of years and a local reputation for leadership and innovation in professional service. There must be clear evidence of the exceptional nature of service far above and beyond routine expectations of professional educators. Additional forms of evidence sustained over a period of years may include:

Public service
• Innovative approach to health care delivery
• Innovative approach to public health education
• Awards/recognition for public service
• Community/state committee activity involving public health delivery
• Interdisciplinary activity involving public health care
• Regional consultant involving public health care

Service to the institution
• Member of departmental or institutional committees
• Development of and/or participation in continuing education/in-service programs within the institution
• Awards/recognition for institutional service
• Interdisciplinary activity supporting institutional health care delivery
• Clinical or professional practice
• Service on government and agency boards and commissions

CRITERIA FOR PROMOTION TO ASSOCIATE PROFESSOR
TEACHING
Competence
Evidence should include an assessment on each of the teaching criteria emphasized below, indicating that there are no uncorrected serious faults or deficiencies. Evidence of growth as a teacher beyond the level attained upon promotion to Assistant Professor should be provided.

Outstanding achievement
Regional visibility for contributions to teaching should have been attained in order to earn a rating of growth in teaching for promotion to Associate Professor. Appropriate evidence should include dissemination of scholarly publications about area of expertise. Other forms of evidence sustained over a period of years may include:

Professional growth and development
- Evidence of relevant professional continuing education
- Member of accreditation site visit teams
- Member of appropriate professional organization and activity within that organization and/or professional group(s)
- Appointment to state, regional, and national education boards

Teaching load
Appropriate growth in teaching at designated level(s) (undergraduate, graduate) and in more than one form (e.g., lecturing to large groups, conducting discussion groups and seminars, directing laboratory or clinical experiences, guiding independent study or research)
- Course development and management
- Advising, mentoring, and nurturing students and early career faculty
- Number and level of courses taught

Effectiveness of teaching/learning activities
- Awards in recognition of contributions to or performance in teaching.
- Faculty course evaluations
- Peer evaluation of teaching
- Student performance on external examinations/evaluations
- Regional or national impact of scholarship on teaching, including published materials, conference presentations, and related activities (e.g., textbooks, videos, web pages)

RESEARCH
Competence
Evidence that the candidate has continued to grow in those aspects of research that relate to their area of excellence (teaching or service), either by original inquiries or by interpretation, synthesis, or evaluation of the work of others. Evidence of such growth in scholarship may be found in scholarly publication or in publications on teaching and/or service that indicate scholarly qualities.
**Outstanding achievement**
Evidence of having established a regional reputation for research contributions. In addition to publication in refereed journals, citations by other authors and public acknowledgment of the importance of the faculty member’s contributions are common forms of evidence of national prominence in research.

**The primary scholarly activities are:**
Scholarly work that is peer reviewed, disseminated, and retrievable. Consideration given to percentage of FTE allocated to scholarship, authorship, impact of journal. The primary scholarly activity is publication of original research studies in peer-reviewed journals. Amount and type of publications should be determined as part of the annual faculty development plan. A minimum of one (1) peer-reviewed publication every 18 months is expected for faculty promotion at the Associate Professor and Professor ranks. Writing/obtaining extramural/intramural funding as PI or SI.

**Additional examples of research scholarly activity include but are not limited to:**
- Books or chapters of books that have been peer reviewed
- Proceedings or chapters in proceedings that have been peer reviewed
- Abstracts that have been peer reviewed and lead to publications and/or grants
- Abstracts alone are insufficient to demonstrate a record of scholarly work and may work against a faculty member if they do not materialize into a full publication and/or funded grant
- Audiovisual materials that have been peer reviewed and made available to the public
- Computer courseware that has been peer reviewed and made available to the public
- Invited/peer reviewed professional presentations (oral/poster) at state or regional meetings
- Invited fellowships sponsored by recognized professional agencies
- Successful patent submission or intellectual agreements that lead to technology transfers

**SERVICE**

**Competence**
A record of a greater range of service than is considered satisfactory for promotion to Assistant Professor. The evidence shall also include assessment of the quality of service.

**Outstanding Achievement**
Evidence of outstanding performance over a period of years and a regional reputation for leadership and innovation in professional service. There must be clear evidence of the exceptional nature of service far above and beyond routine expectations of professional educators. Additional forms of evidence sustained over a period of years may include:

**Public service**
- Innovative approach to health care delivery
- Innovative approach to public health education
- Awards/recognition for public service
- Community/state/national committee activity involving public health care
- Interdisciplinary activity supporting public health care delivery
- Regional or national consultant involving public health care

**Service to the institution**
- Member of departmental or institutional committees
- Development of and/or participation in continuing education/in-service programs within the institution
- Awards/recognition for institutional service
- Interdisciplinary activity supporting institutional health care delivery
- Clinical or professional practice
- Service on government and agency boards and commissions

**CRITERIA FOR PROMOTION TO PROFESSOR**

**TEACHING**

**Competence**
Evidence should include an assessment on each of the teaching criteria emphasized below indicating that there are no uncorrected serious faults or deficiencies. Evidence of continuing growth as a teacher beyond the level attained upon promotion to Associate Professor should be provided.

**Outstanding Achievements**
National/international visibility for contributions to teaching should have been attained in order to earn a rating of excellence in teaching for promotion to Professor. Appropriate evidence should include dissemination of scholarly publications about teaching. Other forms of evidence sustained over a period of years may include:

**Professional growth and development**
- Evidence of relevant professional continuing education
- Member of accreditation site visit teams
- Leadership positions in appropriate professional organizations
- Appointment to state, regional, national, or international education boards

**Teaching load**
- Versatility, meaning excellence in teaching at more than one level (undergraduate, masters, advanced graduate) and in more than one form (e.g., lecturing to large groups, conducting discussion groups and seminars, directing laboratory or clinical experiences, guiding independent study or research)
• Excellence in course or program development
• Advising, mentoring, and nurturing students and early career faculty
• Number and level of courses taught

**Effectiveness of teaching/learning activities**
• National awards in recognition of contributions to/or performance in teaching
• Faculty course evaluations
• Exemplary and unique student achievement
• International impact of scholarship on teaching, including published materials, conference presentations, and related activities (e.g., textbooks, videos, web pages)
• Widespread reputation for excellence in teaching (e.g., testimony from former students and colleagues, from client groups, data and various awards or other recognition relevant to this category)
• Concerted effort to engage colleagues, locally and nationally, in conversations about teaching and learning (e.g., organizing or leading teaching workshops, teaching-related conference presentations)

**RESEARCH**

**Competence**
Evidence that the candidate has continued to grow in those aspects of research that relate to their area of excellence (teaching or service), either by original inquiries or by interpretation, synthesis, or evaluation of the work of others. Evidence of such growth in scholarship may be found in scholarly publication or in publications on teaching and/or service that indicate scholarly qualities.

**Outstanding Achievement**
Evidence of having established a national or international reputation for research contributions. In addition to first-author publications and other authorship in refereed journals, citations by other authors and public acknowledgment of the importance of the faculty member’s contributions are common forms of evidence of national prominence in research. The quality and significance of scholarship and research shall be supported by written evaluations by outside recognized experts in the field.

**The primary scholarly activities are:**
Scholarly work is peer reviewed, disseminated, and retrievable. Consideration given to percentage of FTE allocated to scholarship, authorship, and impact of journal. The primary scholarly activity is publication of original research studies in peer-reviewed journals. Outstanding achievement at the rank of full Professor includes number and type of publications as first author published in peer-reviewed journals and obtaining research grant funding. Number and type of publications should be determined as part of the annual faculty development plan. A minimum of one (1) peer-reviewed publication every
18 months is expected for all faculty to demonstrate competence. Outstanding achievement would exceed this goal. Writing/obtaining extramural funding as PI or SI.

Additional examples of research scholarly activity include, but are not limited to:
- Books or chapters of books that have been peer reviewed
- Proceedings or chapters in proceedings that have been peer reviewed
- Abstracts that have been peer reviewed and lead to publications and/or grants. Abstracts alone are insufficient to demonstrate a record of scholarly work and in fact may work against a faculty member if they do not materialize into a full publication and/or funded grant.
- Audiovisual materials that have been peer reviewed and made available to the public
- Computer courseware that has been peer reviewed and made available to the public
- Invited peer reviewed professional presentations (oral/poster) at state or regional meetings
- Invited continuing presentations in which you are an acknowledged expert in the field
- Distinguished lecturer and/or visiting professor.

SERVICE

Competence
A record of a greater range of service than is considered satisfactory for promotion to Associate Professor. The evidence shall also include assessment of the quality of service.

Outstanding achievement
Evidence of outstanding performance over a period of years and of a national or international reputation for leadership and innovation in professional service. There must be clear evidence of the exceptional nature of service far above and beyond routine expectations of professional educators. Additional forms of evidence sustained over a period of years may include:

Public service
- Innovative approach to health care delivery
- Innovative approach to public health education
- National awards/recognition for public service
- National/state committee activity involving public health care
- Interdisciplinary activity supporting public health care delivery
- Regional consultant involving public health care
- Participation as member of site visitor team, service on accreditation boards, study sections, and grant review committees

Service to the institution
- Leadership of institutional and national level committees
- Development of and/or participation in continuing education/in-service programs within the institution
• National awards/recognition for service
• Interdisciplinary activity supporting institutional health care delivery
• Clinical or professional practice
• Leadership roles on government and agency boards and commissions

APPENDICES
GRU CV FORMAT (Template and Guidelines)

GRU PORTFOLIO GUIDELINES

GRU PROMOTION AND TENURE PROCESS

GUIDELINES for ASSIGNING FACULTY WORKLOADS

This document provides common guidelines that can be applied by Department Chairs in assigning workloads to faculty so that optimum use of their varied talents can be made to accomplish the mission and goals of their respective departments, our college, and the university. The guidelines were developed in accordance with existing university and college policies. Departure from these guidelines must be approved by the Dean. The intent is to provide a guiding framework that is equitable and consistent for the assigned amount of effort in each area—teaching, research/scholarship, institutional service, professional service, and directed professional activity—performed by each faculty member. There will, of course, have to be good judgment exercised in implementing these guidelines, so that the end result is a fair and consistent process for all concerned.

GUIDELINE 1

Faculty workload assignments, as well as changes in the workload that occur after initial assignments are made, should emanate from discussion between faculty members and their department head. Highest priority for the work assigned should be given to work:

1. that is most central to the mission, goals, and strategic directions of the department, college and university;
2. for which the faculty member is most qualified;
3. that is consistent with the criteria used to evaluate faculty during annual and post-tenure review; and
4. that promotes the status of the department, college and university.
GUIDELINE 2
For the purpose of determining faculty workload, more than one faculty may be credited for a course if multiple sessions or team teaching models are required. Considerations should be given to:

1. number of students in the class;
2. faculty requirements to implement instructional methodologies that are appropriate for course objectives;
3. Accreditation guidelines; and
4. Department Chair’s approval as specified within the annual plan.

GUIDELINE 3
The recommended teaching load for all full-time faculty is 24 course hours per academic year (1 FTE at 100 percent teaching effort). Course hours are defined as the credit hour value of courses taught. The potential exists for a reduced teaching load for faculty members who are active in research, substantial service, and/or administrative activities. However, the teaching load for tenured faculty and faculty seeking tenure should not be less than six credit hours per academic year unless approved by the Department Chair and the Dean.

The recommended contact hours for all full time faculty is up to 20 hours per week during the semester of formal class meetings in a lecture/lab format. Contact hours may potentially increase for faculty members involved in clinical supervision of students.

GUIDELINE 4
The workload assigned for research/scholarship varies as a function of the planned research/scholarship activities and the teaching, advising, service, and directed professional activity assigned. Ordinarily, non-tenure track faculty members are not assigned a research workload.

GUIDELINE 5
All faculty members are expected to engage in institutional service, with greater involvement at the college and university levels at higher ranks. Tenured faculty members are expected to assume a greater institutional service leadership and workload than faculty who are untenured or not on the tenure track.

GUIDELINE 6
When assigning faculty workloads, service to the profession should be encouraged, but it should not conflict or interfere with teaching, research/scholarship, and service to the department, college and university.

GUIDELINE 7
Directed professional activity should be well defined, and its purpose and significance clearly stated. The faculty member, Department Chair and Dean must discuss and agree upon the faculty member's involvement in directed professional activity following university guidelines and any pertinent requirements (i.e., faculty practice guidelines). Further, the scope and documentation of directed professional activity should follow the guidelines specified in the University Guidelines for Promotion and Tenure.

Revisions approved by CAHS Faculty Council, March 9, 2007, in accordance with CAHS Dean April 3, 2007

FACULTY FUNDING and EFFORT REVIEW

PURPOSE
This procedure provides guidelines for the annual review of Board of Regents Funding and Effort for all CAHS faculty.

SCOPE
This procedure applies to all departments within the College of Allied Health Sciences. All faculty review and changes to funding and effort must be made in accordance with current USG Board of Regents and GRU Human Resources and Faculty Affairs policies.

RESPONSIBILITIES
Business Manager: Remind department office managers to complete annual faculty review by May 30.
Department Chairs: Review effort with each faculty member during annual performance/objectives and goals review process.
Department Office Managers: Complete BOR Breakdown of Funding and Effort panels for changes to faculty funding and effort and submit for appropriate approval.
Faculty: Notify Department Chair if funding or effort changes during the timeframe between annual review cycles.

PROCEDURE
1. Department Chairs will review faculty effort annually by Aug. 15, during regular annual review of performance/objectives and goals.
2. Notification of any changes to faculty effort will be given to department office managers by the Department Chair after review.
3. Department office managers will submit a BOR Breakdown of Funding and Effort ePAR (via PeopleSoft) for appropriate approval to change the effort by Sept. 15, to be effective Sept. 1.
4. Department office managers should monitor funding and update the ePAR funding panel if a major change in funding occurs (i.e. loss of sponsored funding).

Approved by CAHS Interim Dean, April 1, 2010
FACULTY LICENSURE MAINTENANCE PROCEDURE

PURPOSE
This procedure provides guidance to ensure that all College of Allied Health Sciences faculty maintain appropriate and active licensure/registration credentials requisite to their duties and obligations at Georgia Regents University. This procedure is in accordance with all effective University System of Georgia Board of Regents and GRU Human Resource/Faculty Affairs policies.

SCOPE
This procedure describes the process for confirming the maintenance of licensure/registration credentials applicable to faculty within CAHS and applies to all departments within the college.

PROCEDURE
GRU Human Resources has established a list of all applicable credentials for CAHS faculty within the PeopleSoft Manage Faculty Events (PS MFE), the enterprise-wide data repository for faculty information.

1. GRU Human Resources will record faculty member credentials and licensure/registration requirements in the PS MFE system upon employment contract origination.
2. CAHS Department Office Managers, under the direction of the CAHS Business Manager, will maintain an annual calendar, or reminder system, of credential renewal dates for all faculty in their department.
3. Department Office Managers will notify faculty members of pending renewal dates through written correspondence.
4. Individual faculty members are responsible to meet all requirements of the appropriate credentialing body within the deadline given.
5. Upon completion of appropriate requirements, the individual faculty member will provide their Department Office Manager with documentation to verify completion of all requirements.
6. If applicable, Department Office Managers will notify Department Chair of any noncompliance issues.
7. Department Office Managers will input the appropriate status into the PS MFE system, communicate official documentation to MCG Human Resources/Faculty Affairs and notify the CAHS Business Manager that individual faculty requirements have been met.

Approved by CAHS Interim Dean, April 1, 2010
CAHS REVIEW BODY

Policy Statement
The CAHS Review Body (CAHS-RB) is a centralized subcommittee of the College of Allied Health Sciences Faculty Council (Council) utilized at the Dean’s discretion to review the due process afforded to a student who has received an academic sanction or who has a grievance against a faculty for perceived infringement on their right to freely express themselves. As necessary, the CAHS-RB may hold hearings during the process to assist in rendering an appellate decision. It is the responsibility of the faculty and the CAHS-RB to evaluate the records of academic performance and professional behavior of students in accordance with the policies of each department and/or program.

Reason for Policy
The CAHS Review Body serves in an advisory capacity to the Dean of the College of Allied Health Sciences to ensure that students who have been imposed an academic sanction or who have a grievance against a faculty (as defined below) are provided the appropriate due process.

Entities Affected by this Policy
All students in the College of Allied Health Sciences at Georgia Regents University are affected by this policy. This policy shall supersede any applicable CAHS departmental policies.

Who Should Read this Policy?
All Students and faculty in the College of Allied Health Sciences at Georgia Regents University should be aware of this policy.

Contacts
College of Allied Health Sciences
Office of the Dean EC-3423
Phone: 706-721-2621

DEFINITIONS
These definitions apply to these terms as they are used in this policy:

- Administrative Sanction
  A sanction imposed on a student by the department or program based on student’s failure to meet the academic standards or requirements of their college or program. Such sanctions may include (1) academic dismissal from CAHS; (2) academic suspension; or (3) the requirement that
a student repeat a given course or year. Receipt of a failing grade in a given course shall not constitute an academic sanction for purposes of this policy.

- **Conduct Sanction**
  A sanction imposed on a student by a college or program for unprofessional or unbecoming conduct including, but not limited to violation(s) of the Student Conduct Code, Student Housing Agreement, and/or local, state, or federal law. Conduct sanctions are imposed following or resulting from a hearing at the college or campus level. Students of the College of Dental Medicine and the Medical College of Georgia are subject to the authority of both college and campus codes of conduct; therefore, they may face disciplinary hearings at the college or campus level depending on the nature of the conduct infraction. Students of the College of Graduate Studies, the College of Nursing, and the College of Allied Health Sciences are subject to the Campus Code of Conduct; therefore, they may face disciplinary hearings conducted by the Campus Judicial Committee.

- **Grievance**
  A student’s complaint or grievance against a faculty for perceived infringement on his/her right to freely express themselves as a protection granted to them by academic freedom/intellectual diversity policies via the Board of Regents.

**PROCESS**

**Authority**
The CAHS-RB has no inherent authority and serves as needed in an advisory capacity to the Dean.

**Composition**
The CAHS-RB shall consist of three members and will be formed from the larger Faculty Council, excluding the student member, the council president, and the Dean or designee. Three (3) council members from the available voting and non-voting members will be identified and oriented to the process and responsibilities of the CAHS-RB. The council president will coordinate the team and appoint one member as chair, who shall be a voting member of the council. Faculty from the department where the sanction originated will not participate as members of the CAHS-RB for that particular hearing. Upon election, all council members must review all published information regarding CAHS-RB policies and procedures. It is the responsibility of the council member to be prepared to fulfill any role of the CAHS-RB.
PROCEDURE

Departmental Level
1. Department chair or program director recommends dismissal or suspension from the program as a result of student action or behavior. Notification of this decision is forwarded to the student and to the CAHS Dean.

2. Student may appeal department chair decision following the department’s guidelines for appeal. This should include a departmental review committee that can uphold the chair’s recommendation, remove the student sanction, or offer alternative consequences. The departmental review committee will provide a report to the department chair and the CAHS Dean.

3. If a department within CAHS has recommended dismissal or suspension during a clinical rotation, the student will be removed from the rotation site and from that course until they have been reinstated at a higher level of the appeal process. If the student is placed on suspension or recommended for dismissal during the didactic phase of their program, then the student will be removed from the classroom at the time dictated by the department’s policy; if there is no departmental policy, the student will be removed from the course(s) once the decision for suspension or dismissal has been upheld by the CAHS Review Body.

College Level
1. After the appellate time frame expires, or after the departmental review committee has moved to uphold the chair’s recommendation, the Dean will communicate his decision to support or deny the recommended sanction in writing to the student and the department chair.

2. The student shall have five (5) working days from receipt of the Dean’s decision letter to file an appeal. The Dean’s written decision will include a notice of the student’s right to appeal to the CAHS-RB and notice that the student should submit any additional documentation to support their appeal request.

3. If the student files an appeal, the CAHS-RB will hold a hearing to review the student’s case. The CAHS-RB may uphold the Dean’s decision or recommend an alternative outcome for the student to the Dean.

4. After the appellate time frame expires, or after the CAHS-RB has moved to uphold the Dean’s decision, the withdrawal or other paperwork is submitted to the GRU Registrar’s Office for withdrawal from CAHS.
Institutional Level
1. The student may appeal the CAHS-RB decision by appealing to the institutional level in accordance with the applicable appeal or grievance policy.

CAHS-RB GUIDELINES
1. If the student files an appeal at the college level, the Dean’s office will notify the council president or the president-elect if the president is absent, within one (1) working day, that the CAHS-RB will need to be activated. Upon notification from the Dean’s office, the council president/president-elect will charge the CAHS-RB and appoint the CAHS-RB chair. Each member of the CAHS-RB must review all published information regarding CAHS-RB policies and procedures.

2. The Dean will appoint an associate dean to inform the student of their rights and the appeal procedures throughout the CAHS-RB process, including hearing procedures.

3. The CAHS-RB will evaluate the documentation from the Department Review Body submitted to the Dean by the department chair and from the student regarding grievance response. The CAHS-RB will convene a hearing within ten (10) working days from the date of the student’s written appeal/grievance response notification.

4. The CAHS-RB Chair will contact the CAHS-RB members, department chair, student, and the associate dean to schedule the hearing. The hearing date must be scheduled to allow the student a minimum of five (5) working days from receipt of the student’s request for appeal to prepare. The CAHS-RB Chair will confirm the date/time/location of the hearing via email.

5. The department chair and student must submit any additional documentation to be considered in the hearing process within five (5) working days of receiving the hearing announcement from the CAHS-RB chair.

6. The student must notify the associate dean in writing – preferably with a signature – if they choose to waive their right to a hearing.

7. The hearing procedure will be conducted in accordance with the hearing script provided below.

8. Within three (3) working days after the hearing, the CAHS-RB chair will prepare and distribute the CAHS-RB’s collective recommendation to the Dean. The CAHS-RB recommendation to the Dean shall:
   a. confirm that due process was followed at the departmental level and the recommended sanction was appropriate; or
   b. establish that due process was not provided at the departmental level, therefore a new hearing may be indicated; or
c. note that new information about the student was discovered that may warrant a new hearing or even a modification of the recommended sanction.

9. Within two (2) working days after receipt of the CAHS-RB recommendations, the Dean will convey the CAHS-RB’s decision to the department chair and the student. The Dean’s final decision letter will include information about the student’s right to appeal at the institutional level, and the student will have five (5) working days from receipt of the Dean’s decision to appeal (see GRU Campus Review Body Policy).

**STUDENT RIGHTS**

Any student upon whom an academic sanction has been imposed by their department or program shall be entitled the following rights:

1. Written notice from the department of the specific academic standards or program requirements that have not been met.

2. Access to the student’s own academic record, including graded assignments.

3. Written notice of the time, date, and location of a hearing (if granted by the Dean) and a minimum of five (5) working days to submit evidence and prepare for the hearing.

4. The right to present and question evidence and witnesses before the CAHS-RB (a fair and impartial group of faculty) if a hearing is granted.

5. A support person of the student’s choice. This person may not be an attorney. The support person may advise the student but can only participate in the hearing with the permission of the CAHS-RB chair.

6. Within five (5) working days after the hearing, written notice of the Dean’s final decision, including information about the student’s right to appeal to the GRU President within five (5) working days of receipt of the Dean’s final decision.

**ADDITIONAL INFORMATION**

- The time periods set forth in this policy may be waived by mutual consent and with the approval of the Dean.

- All records will be considered confidential to the extent allowed by law and maintained in the Dean’s office, the designated custodian of CAHS-RB records. Proceedings of the CAHS-RB hearing
will be electronically recorded and made available upon request. Copies of electronic recordings may be provided at the cost of duplication.

- The CAHS associate dean appointed to guide the student through the appeal process will continue to follow the appeal process should it go beyond the college level. The associate dean (or designee) will be responsible for keeping the student, department, and dean apprised of further opportunities for appeal and deadlines for submission of papers regarding the appeal for both the student and department.
GEORGIA REGENTS HEALTH PROFESSIONS ASSOCIATES, INC.
(Practice Plan)

SECTION I: PURPOSE
Georgia Regents Health Professions Associates, Inc. has the following goals:

1. To provide a mechanism for CAHS faculty to advise and recommend practice in their respective professions to the Dean. This practice supports the professional development of the individual faculty member as well as the service, education, and research missions of the institution.

2. To create an opportunity to share expertise with patients, other health care providers, students, and clients at Georgia Regents Health System and other facilities and organizations.

3. To enhance the college’s ability to recruit and retain highly qualified faculty by offering a means to supplement income/benefits.

4. To provide an efficient system for the accounting, disbursement, and reporting of income generated by Plan members.

SECTION II: PLAN DEFINITIONS
The CAHS encompasses 11 different disciplines, including dental hygiene, health informatics, medical illustration, medical/clinical laboratory science, nuclear medicine technology, occupational therapy, physician assistant, physical therapy, public health, respiratory therapy, and radiation therapy. It is recognized that some faculty within CAHS practice in disciplines not specifically named above. The practice of these health care disciplines in which the faculty member is licensed, certified, or otherwise authorized to practice (e.g., nutrition, athletic training, neuropsychology, social work) would also fall under the auspices of the GRHPA Practice Plan.

Regulatory agencies, certifying and licensing boards, and professional organizations define practice within the specific disciplines. The following definition of practice is broad in nature and includes practice within any of the aforementioned disciplines as well as any disciplines that are added to CAHS through new program development.

Practice
For the purpose of this plan, practice encompasses multiple roles along the continuum of professional services including, but not limited to, clinical services, consultation, and continuing education. All professional services rendered by CAHS faculty that generate supplemental income, regardless of where or when those services are delivered, are considered practice unless otherwise
exempted. This includes all clinical practice. All such activities will be pre-approved and governed by Georgia Regents University either through the Practice Plan or Outside Activity policies.

Practice activities are considered service within the tripartite mission of the institution, and as such can be included in documentation for promotion and tenure purposes.

Practice arrangements typically exchange services through a contractual agreement for some form of revenue generation. CAHS practice shall not be limited to any one geographical location or collaborating entity.

**Full-time Faculty**

Faculty (academic and calendar year) of all ranks with a regular appointment of 1.0 FTE in CAHS regardless of funding sources.

**Part-time Faculty**

Faculty of all ranks who have a commitment less than a 1.0 FTE in CAHS.

**Credentialed Staff**

Professionals within CAHS who are appropriately licensed, registered, or otherwise credentialed to practice their discipline but do not hold a faculty rank.

**Collaborating Agency**

An organization outside CAHS with a contractual agreement with the Georgia Regents Health Professions Associates, Inc. for the provision of professional services rendered by college faculty or credentialed staff.

**Supplemental Income**

Any income paid to faculty or credentialed staff derived from professional services in addition to the salary associated with the CAHS appointment.

**Professional Income Exclusions**

The following types of income derived by faculty or credentialed staff are excluded from the provisions of this plan:

1. Stipends, income, or expense reimbursements associated with grant reviews, editorial reviews, accreditation activities or service for professional organizations.
2. Royalties.
3. Income derived from presentations or publications for professional organizations unless paid by the entity to provide continuing education or promote a specific service, product, or device.
4. Revenue of $500 or less derived from an isolated and/or non-recurring professional activity.
5. Income derived from presentations/service associated with GRU’s Division of Continuing Education.
6. Monetary awards for professional or personal achievement.
7. Income from providing professional consultation services pursuant to a lawsuit or contemplated legal action.
8. Income derived from non-professional activities.

SECTION III: MEMBERSHIP
All full-time faculty (calendar and academic year) will be members of the GRHPA Practice Plan. Part-time faculty and credentialed staff have the option to participate.

Membership does not necessitate clinical practice by a member.

All Plan members shall have one vote on issues proposed for consideration by the President of the Georgia Regents Health Professions Associates, Inc. Board of Directors.

There will be one general membership meeting of the Plan annually. The president of the GRHPA Board of Directors will conduct this meeting. Other meetings may be called by the president as needed.

SECTION IV: GOVERNANCE
Governance of the Practice Plan will be administered by Georgia Regents Health Professions Associates, Inc. as described in the Articles of Incorporation and Bylaws of that corporation.

The Practice Plan will select four members to serve on the Board of Directors of the Georgia Regents Health Professions Associates, as stated in the Bylaws of that corporation.

SECTION V: PLAN OPERATING POLICIES
The CAHS Assistant Dean for Faculty Practice will oversee the financial, personnel, and daily operations of the Practice Plan, and is the chief administrator of the Plan. As the Plan administrator, the Assistant Dean conducts business on behalf of the Plan under the direction of the GRHPA Board of Directors.

Faculty will initiate discussions with their Chair regarding participation in professional services. Typically this discussion will be a component of the annual performance plan, especially for ongoing activities. The Chair will determine if the proposed professional activity comes under the policies of the Plan (either income inclusions or exclusions) or the Outside Activity policy. The Chair may allow time for professional service to be rendered during the workweek based on the needs of the department at that time. The Chair and the individual faculty member will jointly decide the percentage of work commitment that will be dedicated to Practice Plan activities. The Chair has the prerogative to change approved commitments, with thirty-day notification of faculty, within and between contract periods depending on the needs of the department. Input from the CAHS Assistant Dean for Faculty Practice will be available if requested to assist in this process. The missions of the institution shall guide all decisions regarding the allocation of time for practice.
Once the Chair grants departmental approval, the faculty member will submit a Request to Practice Form to the CAHS Assistant Dean for Faculty Practice who evaluates the request on behalf of the Plan. This analysis will include the anticipated effects of the practice on the department, the college, the Plan, and the individual faculty in terms of career development and income potential. If the request to practice is approved, the Assistant Dean will oversee the process of negotiating a contract with the collaborating agency for that faculty member. Approval is required by the Assistant Dean for any exception from the Plan for income derived from professional services. Members may submit a written appeal of the Assistant Dean’s decisions to the CAHS Dean.

Once a contract is agreed upon and executed, GRHPA will bill the collaborating agency for predetermined fees on behalf of the Plan. GRHPA will collect these fees and deposit the associated revenue into their accounts. Disbursements will then be made from this account according to Section VI of this document, Collection and Disbursement of Funds.

The CAHS Assistant Dean for Faculty Practice will submit an annual Plan budget to the CAHS Dean and the GRHPA Board of Directors, as well as biannual reports summarizing Plan revenues and expenses. The Assistant Dean for Faculty Practice will apprise the BOD of changes in administrative costs prior to changes in member disbursements. The CAHS Assistant Dean for Faculty Practice may initiate special called meetings of the BOD.

All contracts will be reviewed and/or renewed annually to coincide with the annual budget planning process. The Assistant Dean for Faculty Practice may negotiate a contract for a new service at any time during the year. Either GRHPA or the collaborating agency can change the terms of a contract as needed with the proper notification of the other party as stipulated in the individual contracts.

Participation in the Plan will terminate following the cessation, for whatever reason, of a member’s employment by the CAHS at Georgia Regents University, or upon a change in a member’s status from full-time to part-time, except that part-time faculty and credentialed staff are eligible to continue participation in the Plan upon request.

**SECTION VI: COLLECTION and DISBURSEMENT of PLAN FUNDS**

Georgia Regents Health Professions Associates, Inc. will support contractual arrangements by billing and collecting for all professional services that generate income on behalf of the Plan. GRHPA will also support receipt and disbursement of gifts and other non-service generated funds on behalf of the Plan. All income derived from these services will be deposited in GRHPA accounts.

The primary and typical disbursement pattern of faculty income is:

a. *Administrative Costs:* Administrative expenses will be paid from the total income collected by GRHPA. These costs include and vary with expenses related to billing and collection, legal fees,
insurance, administrative and clinical support, office expenses, and 7.65 percent FICA (Social Security and Medicare) payments. Disbursements b-d will be paid after administrative costs are paid. Net income is defined as service payment(s) less administrative costs.

b. **Deans Fund:** 7.5 percent of net income will be deposited into the CAHS Dean’s Fund to be used at the discretion of the Dean for the growth of the College.

c. **Department Fund:** 7.5 percent of net income will be deposited into the faculty member’s Department Fund to be used at the discretion of the Chair to support the growth of the department. These funds will typically be utilized for departmental service-related travel, continuing education, meeting registrations, instructional resources, and professional dues and fees.

d. The remaining income (collected amount for the individual faculty minus deductions a-c) will be available to the faculty member who generated it as supplemental income. This income will be part of the member’s paycheck, dispersed quarterly, and as such the income will be taxed.

**SECTION VII: MALPRACTICE INSURANCE for PLAN MEMBERS**

Malpractice insurance is provided as a component of employment at GRU, and applies to faculty practice by members of the Plan regardless of the location of that practice.

**SECTION VIII: MODIFICATIONS in ESTABLISHED PLAN**

The CAHS Practice Plan may be modified by a two-thirds majority vote of the voting members of the Board of Directors as well as an affirmative vote by the majority of the membership. Modifications require the signed approval of the Dean of the CAHS as well as the President of Georgia Regents University to ensure compatibility with the missions of the institution.

1/28/04

*Plan revised and adopted by Board of Directors on 2/29/08*

*Plan revised and adopted by Board of Directors on 8/29/08; affirmed by general membership on 11/19/08*

*Revisions proposed 7/25/11*

*Updated 6/2/2014*
GEORGIA REGENTS HEALTH PROFESSIONS ASSOCIATES, INC.

BYLAWS

ARTICLE I: PURPOSE
The purpose of the Corporation are as stated in the Articles of Incorporation of the Georgia Regents Health Professions Associates, Inc., as heretofore stated or as hereafter amended.

ARTICLE II: SEAL
The corporation seal shall have inscribed thereon the name of the corporation, the year of its organization and the words “Corporate Seal.” The seal may be used by causing it or a facsimile thereof to be impressed or affixed to a document. In the event it is inconvenient to use the seal at any time, the authorized signature of an officer of the corporation, followed by the word “Seal” shall be deemed the seal of the corporation.

ARTICLE III: BOARD of DIRECTORS
Section 1
All business and affairs of the corporation shall be administered by, or under the authority of, the Board of Directors (hereinafter referred to as “Board”). The Board shall be named or elected pursuant to these Bylaws. Each voting Director shall have one vote and may vote on any question before the Board. Voting Directors may not appoint proxies but may participate in meetings via electronic attendance. The Provost may assume the voting and other BOD responsibilities of the President of Georgia Regents University (GRU) as needed. Guests may attend Board meetings by invitation of the Board.

Section 2
The Board shall consist of eleven (11) voting members and one (1) non-voting member, to be selected as follows:

A. The President of Georgia Regents University shall be a voting member, ex officio; with permanent appointment;

B. The Dean of the GRU College of Allied Health Sciences shall be a voting member, ex officio; with permanent appointment;

C. The Assistant Dean for Faculty Practice for the GRU College of Allied Health Sciences shall be a voting member, ex officio; with permanent appointment;
D. Four (4) members selected by the Dean of the College of Allied Health Sciences of GRU;

E. Four (4) members shall be full-time employees of the College of Allied Health Sciences selected by a vote of the members of the CAHS Practice Plan. The method and timing of election for members selected in this category shall be as specified in the GRU CAHS Practice Plan; and

F. A representative of GR Health System, Inc., to be designated by GRHS and upon approval of the Dean of the College of Allied Health Sciences, shall serve as a non-voting member of the Board.

Section 3
The term of office of each non ex-officio member of the Board shall be three (3) years. Non ex-officio Board members may succeed themselves via appointment or election.

Section 4
No member of the Board shall receive any compensation from the corporation for services performed in their capacity as a Board member. Members may be reimbursed their reasonable expenses actually and necessarily incurred by them in the performance of their official duties as members of the Board.

Section 5
If a vacancy should occur on the Board by reason of death, resignation, removal, disqualification or otherwise, the vacancy shall be filled by the selection of a new member in the same manner as for the previous member for the completion of that member’s term.

ARTICLE IV: MEETINGS of the BOARD
Section 1
A regular meeting of the Board, which shall be the annual meeting, shall be held within the first six (6) months of each fiscal year of the corporation at such time and place as the President of the Board shall determine. Quarterly meetings shall be held at such times and places as the Board shall determine. Notice of every regular meeting, specifying the time and place thereof, shall be given by mail, including electronic mail, to each director at his/her usual address not less than five (5) working days before the meeting.

Section 2
Special meetings of the Board may be called either by its President or by any four (4) or more voting directors. Notice of a special meeting, specifying the time, place and objects thereof, shall be given in the same manner as notices of regular meetings. No business shall be transacted at a special meeting other than on matters specified in the notice.
Section 3
At all Board meetings an attendance of the majority of all voting directors shall constitute a quorum, and a majority of such quorum may take any action which the Board is empowered to take, excepting alterations or amendments to the Bylaws or Articles of Incorporation as provided in Article XI hereof. Attendance at a meeting by a director shall serve as a waiver of notice of such meeting as to such director attending.

ARTICLE V: OFFICERS
Section 1
The officers of the corporation shall consist of a President, a President-Elect, and a Secretary/Treasurer. Officers shall not hold more than one office concurrently, and are expected to complete their term of office.

Section 2
The officers of the corporation shall be elected by the directors at the annual meeting. Officers shall serve one-year terms. If a vacancy should occur in an office, the President shall appoint a successor to serve until the next annual meeting when a new officer shall be elected to serve the remaining period of that term.

ARTICLE VI: DUTIES of OFFICERS
Section 1
The President of the Board shall preside at all meetings. The President shall be responsible to and report to the Board of Directors and shall have general supervision of the corporation and shall be the medium of communication between GRU and the Board of Directors.

Section 2
The President-Elect of the Board shall, in the absence of the President, perform all of the duties and exercise the powers of the President. In the event of the absence of both the President and President-Elect, another member of the Board shall be selected by the Board to act as temporary President of the meeting. The President-Elect will assume the office of Presidency at the annual meeting each year when officers of the BOD are elected.

Section 3
The Secretary/Treasurer of the Board, in the role of Secretary, shall ensure that full minutes of the Board meetings are maintained, shall issue all calls for meetings, and shall notify all officers and directors of their election. The Secretary/Treasurer shall have custody of the corporate seal and the corporate records and shall be responsible for their safekeeping. The Secretary/Treasurer shall serve as Parliamentarian.
The Secretary/Treasurer, in the role of Treasurer, shall review and ensure accuracy of the corporate funds and shall keep, or cause to be kept, full and accurate accounts in books belonging to the corporation showing the transactions of the corporation, its accounts, receipts, expenditures, assets, liabilities, and financial condition; shall see that all expenditures are duly authorized and are evidenced by proper vouchers and receipts; and shall review deposits of all monies and other valuable securities in the name of and to the account of such corporation in such depositories as may be named by the Board.

The Secretary/Treasurer shall make a full report of the financial condition of the corporation for the annual meeting of the Board and shall make such other reports and statements as may be required by the Board, by the Bylaws or Articles of Incorporation or by the laws of the State.

ARTICLE VI: COMMITTEES

Section 1
The Board may from time to time appoint such standing or special committees as it may deem appropriate for the efficient operation of the corporation. Members of such committees shall be appointed by the Board and the President shall designate a Chair for each committee.

ARTICLE VIII: FINANCES

Section 1
The fiscal year of the corporation shall be from July 1 through June 30.

Section 2
The Assistant Dean for Faculty Practice of the College of Allied Health Sciences shall prepare and submit to the Board for approval a proposed annual administrative budget and estimate of expenditures for the ensuing fiscal year. Such budget shall be ready for submission prior to May 31 of each year.

Section 3
The financial records and accounts of the corporation shall be audited or reviewed annually or at such other times as may be directed by the Board. Such audits or reviews shall be by a certified public accountant or firm designated for that purpose by the Board. A copy of such audit/review shall be delivered to the President of Georgia Regents University, consistent with Section 1905 of the Policies of the Board of Regents for the University System of Georgia.

Section 4
All records and accounts of the corporation shall be open to inspection by any director or any officer at any reasonable time.
Section 5
Officers of the corporation may execute contracts, agreements, notes, bonds, checks, drafts, and like instruments on behalf of the corporation and as authorized by the Board, provided, however, that at least two officers must sign each such instrument disbursing funds in excess of $10,000 unless such instruments are made payable to Georgia Regents University. All contracts and agreements shall be submitted to the Dean of the College of Allied Health Sciences, or their designee, for review and comment prior to execution on behalf of the corporation.

ARTICLE IX: INTERESTED DIRECTORS and OFFICERS
No contract or transaction between the corporation and one or more of its directors or officers, or between the corporation and any other corporation, partnership, association or other organization in which one or more of its directors or officers are directors or officers or have a financial interest, shall be void or voidable solely for this reason, solely because the director or officer is present at or participates in the meeting of the Board or committee which authorized the contract or transaction, or solely because their votes are counted for such purpose if:

A. The material facts of their interest as to the contract or transaction are disclosed in writing to the Board or committee and the Board or committee in good faith authorizes the contract or transaction by the affirmative votes of a majority of the disinterested members of the Board or committee; or
B. The contract or transaction is fair as to the corporation as of the time it is authorized, approved, or ratified by the Board of committee.

ARTICLE X: NON-DISCRIMINATION POLICY
The corporation shall not discriminate on the basis of age, disability, gender, national origin, race, religion, sexual orientation, or status as a Vietnam War-era Veteran in employment, clientele, or the provision of services in any manner.

ARTICLE XI: AMENDMENTS
These Bylaws may be altered or amended in whole or in part by a two-thirds majority vote of the voting members of the Board, provided that notice of the character of the proposed alteration or amendment shall have been given to every director at least ten days prior to the meeting at which such alteration or amendment is voted upon.

Bylaws adopted by MCG Allied Health Sciences Practice Group, Inc. Board of Directors, Sept. 6, 2005
Bylaws revised and adopted by MCG Allied Health Sciences Practice Group, Inc. Board of Directors, Feb. 29, 2008
Bylaws revised and adopted by MCG Allied Health Sciences Practice Group, Inc. Board of Directors, Aug. 29, 2008
Proposed Bylaws Amendment June 23, 2011
Bylaws updated June 3, 2014