



## COLLEGE GOVERNANCE CHARTER

### ARTICLE I OFFICERS OF ADMINISTRATION

#### A. The Dean

**Powers and Responsibility:** The Dean is the senior administrative officer and chief academic officer of the University of Utah School of Medicine (SOM).<sup>1</sup> The Dean reports to the Senior Vice President for Health Sciences of the University of Utah (University).

##### 1. *Dean responsibilities:*

- a. Demonstrate positive, constructive leadership.
- b. Oversee the development of the strategic plan for the SOM aligned with health sciences and health system goals, guided by national benchmarks, and successfully carry out the strategy.
- c. Oversee the effectiveness of the leadership team and engage in effective succession planning.
- d. Oversee the development and implementation of SOM and University policies.
- e. Nominate to the University President all SOM Department Chairs and Chiefs of freestanding divisions, after advice by appropriate faculty search committees or the SOM Executive Committee.
- f. Oversee the preparation of the annual SOM operating budget.
- g. Ensure the efficient use of SOM space and resources.
- h. Report to the cognizant Vice President the work and needs of the SOM as part of the annual budget review process.
- i. Oversee the admission and education of SOM students and trainees.
- j. Oversee programs that review and provide professional development for faculty and staff.

##### 2. *In addition, the Dean or the Dean's designee shall:*

- a. Serve as the Chair or designate the Chair of the SOM College Council.
- b. Appoint the Chair of the SOM Executive Committee of the College Council, and serve as an *ex-officio* member of College Council standing committees.
- c. Oversee the review, analysis, and implementation of educational, research, clinical and administrative programs of the School of Medicine;
- d. Appoint members of committees of the School of Medicine.

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<sup>1</sup> The School of Medicine is considered a College within the academic governance structure of the University. See University Policy 2-004.

- e. Approve all applications for grant monies for the support of teaching, training, and research sponsored by the School of Medicine prior to submission.
- f. Appoint Vice, Associate, and Assistant Deans.

**3. Selection:**

The Senior Vice President for Health Sciences shall select the Dean from a panel recommended by a search committee appointed by the Senior Vice President for Health Sciences of the University. The search committee will be made up of SOM faculty and others, as determined by the Senior Vice President. If the Senior Vice President for Health Sciences and the Dean of the School of Medicine are a combined position, then the University President appoints the Dean. (See University policy 2-005)

**B. Department Chairs**

**Selection:** The department chair is appointed by and reports to the Dean of the School of Medicine.

**1. Department chair responsibilities:**

- a. Demonstrate positive, constructive leadership.
- b. Define strategic direction of the department aligned with system goals, guided by national benchmarks, and successfully carry out the strategy.
- c. Oversee the effectiveness of the departmental leadership team and engage in effective succession planning.
- d. Oversee the work, space, and resources assigned to the Department.
- e. Oversee the implementation of University policies that affect the Department, and the budgeting and expenditure of Departmental resources.
- f. Represent the Department in its official business.
- g. Nominate Department faculty for promotions, awards, and committee service.
- h. Oversee the Departmental Practice Plan and faculty salary adjustments.
- i. Oversee the research, educational and clinical activity of the Department.
- j. Oversee the professional development and the formal and informal review of faculty members.
- k. Collaborate with other SOM and Health Sciences leaders in support of overall system goals.

**ARTICLE II  
THE SCHOOL OF MEDICINE EXECUTIVE COMMITTEE**

**A. School of Medicine Executive Committee (SOMEK)**

**Powers and Responsibility:** The SOM Executive Committee 1) provides oversight of faculty governance and develops policy for review and approval by the College Council; and 2) serves as an advisory body to the Dean for SOM strategy, budget, academic, research, and clinical affairs. The SOMEK reports to the Dean.

**1. SOMECE Responsibilities:**

- a. Oversee activities of standing committees.
- b. Prepare the SOM College Council agenda.
- c. Present to the Council at each regular meeting.
- d. Create *ad hoc* committees and assume other duties as assigned.
- e. Faculty Appointments and Promotions: Except for volunteer faculty adjunct appointments, consider and make recommendations to the Dean for initial faculty appointments to the rank of instructor and above.
  - i. Appointments approved with unanimous support by the SOM Faculty Appointment, Review, and Advancement Committee (FARAC) will be presented to Executive Committee via consensus electronic ballot for review and vote.
  - ii. Appointments not approved with majority vote of the FARAC, or any appointment flagged for further discussion by a department chair or member of the Executive Committee will be scheduled for presentation at a SOM Executive Committee meeting. A majority vote is required to pass.
  - iii. Award of Tenure at the time of appointment: Tenured appointments will be presented to Executive Committee. A majority vote is required to pass.
- f. Complete an annual review of faculty diversity efforts and effectiveness.
- g. Budget and alignment: Oversee SOM Departmental and Unit annual operating budgets, including budget structure, distribution of state funds, salary equity, and alignment with Health System goals.

**2. Composition: Voting members of the Executive Committee shall include**

- a. At least 8 Department Chairs or Free-standing Division Chiefs (4 elected by the Chairs and 4 appointed by the Dean);
- b. Vice Deans of Education, Academic Affairs & Faculty Development, and Research;
- c. One full-time tenure-line faculty member of Associate Professor or Professor rank appointed by the Dean;
- d. One career-line faculty member of Associate Professor or Professor rank appointed by the Dean.

SOM Executive Committee members shall serve a three-year term, with terms staggered. The 8 Chair members of the SOMECE shall include at least one representative from among the Basic Science Departments, one from the E&M Based Clinical Departments (Dermatology, Family & Preventive Medicine, Internal Medicine, Neurology, Pediatrics, Psychiatry), one from the Procedure-Based Clinical Departments (Obstetrics & Gynecology, Orthopaedics, Ophthalmology & Visual Sciences, Neurosurgery, Physical Medicine & Rehabilitation, Surgery), and one from the Hospital-Based Clinical Departments (Anesthesiology, Pathology, Radiation Oncology, Radiology).

The SOM Dean's Office will manage an election for Chair / Chief Representatives to the SOMECE.

3. **Non-Voting Members of the SOM Executive Committee:** Non-voting *ex officio* members shall include the Dean, a representative of the Health Care Executive Committee (HCEC), the CFO of Health Sciences, the University of Utah Hospitals and Clinics CEO, and the SOM Associate Dean of Finance. Associate Deans of the School of Medicine may attend the meetings of the Executive Committee, without voting privileges. The Dean may invite other persons, including Hospital and UUMG leaders, as needed.

The composition of the SOMECE may be adjusted by majority vote of the SOMECE, with approval by the Dean.

4. **Committee Chair:** The Dean shall appoint a Chair and Vice Chair of the SOMECE. The Chair shall serve for one year and serve in a non-voting capacity the second year. The goal is for the Vice Chair to become Chair the following year, and for the Chair to be from a Basic Science Department and a Clinical Department in alternating years.

**Meetings:** The SOM Executive Committee shall meet regularly. An agenda shall be prepared by the EC SOM Chair and distributed to the Executive Committee members and all chairs in advance of regular meetings.

Executive Committee meeting minutes shall be recorded and distributed to SOMECE members and all department chairs following each meeting. Minutes of non-closed sessions shall be made available to all faculty members.

### **ARTICLE III THE SCHOOL OF MEDICINE COLLEGE COUNCIL**

#### **A. Functions**

The University of Utah School of Medicine (SOM) College Council ("the Council") shall formulate policies and make decisions relating to College and department affairs to the extent authorized by University Regulations. It advises the administration of the University and the College of the views of the faculty and the SOM, and receives and disseminates information to the faculty and students of the SOM, directly and through their elected representatives on the Council.

#### **B. Membership**

##### **1. Eligibility and representation**

- a. Chair: The SOM Dean or his/her designee shall serve as Chair.
- b. Faculty member representatives: Faculty members on the Council are the SOM representatives to the Academic Senate and the voting chairs and faculty members of the SOM Executive Committee. If there are fewer

than 4 Career-line faculty representatives who are SOM representatives to the Academic Senate, an election for additional Career line faculty to serve three year terms on the SOM College Council will take place to get the number to four. The SOM Dean's Office will coordinate such election. Through the nominating process for Academic Senators, the SOM will strive to have each rank of faculty and a broad set of departments represented on the Academic Senate and College Council.

- c. Student and House Staff representatives will consist of the SOM representative of the ASUU Student Senate and the SOM FARA (ARPT) house staff member.

#### **D. Meetings**

##### **1. Regular and Special Meetings**

- a. *Regular Meetings:* Regular meetings of the Council will be held at least once a year. Meetings are open to all faculty members, unless the Council votes to go into closed session, as permitted by University Regulations and applicable law.
- b. *Special Meetings:* Special meetings of the Council will be held at the request of the SOM Dean, the Chair of the Council, or any five members of the Council.

#### **E. Procedures**

The Council may adopt any rules necessary for the orderly conduct of its business, consistent with University policy.

#### **F. Minutes and Records of the Council**

The Council Chair, or designee, will notify SOM faculty members of meetings, notify appropriate committees and individuals of actions taken by the Council, and distribute the agenda and minutes for each Council meeting.

#### **G. Agenda**

The agenda shall be developed by the SOM Executive Committee. A Council member, the Chair of a Council committee, or any faculty member may suggest agenda items.

#### **H. Voting**

A quorum is one more than half the voting members. Once a quorum is present, a simple majority of those voting is required to carry a motion.

### **ARTICLE III COLLEGE COUNCIL STANDING COMMITTEES**

## **A. Structure Organized by MISSION (Vice Dean Reporting Line)**

Committees required by University regulations will adhere to University policy. Full-time College faculty members in the career or tenure lines are eligible for committee membership.

## **B. Admissions Committee**

Chair: Assistant/Associate Dean of Admissions

1. **Function:** The Admissions Committee is committed to selecting a medical school class that will ultimately produce excellent physicians who will contribute to the welfare of the profession and serve the health care needs of the community.
2. **Authority:** The committee members are recommended by the Dean of Admissions and appointed by the Dean. The Dean of Admissions reviews all interview reports and chairs the Selection Committee but does not vote.
3. **Responsibility:** There are four subcommittees of the Admissions Committee:
  - a) Review Committee: determines which applicants are invited for an interview;
  - b) Interview Committee: conduct interviews to explore applicants' motivation for seeking a medical degree; awareness and understanding of the medical profession; leadership; problem solving skills; understanding of medical ethics; and interpersonal skills;
  - c) Selection Committee: discusses and ranks applicants;
  - d) Executive Committee: Reviews and resolves discrepancies, as needed.
4. **Composition:** Admissions Committee members are SOM physicians, investigators, administrators and community representatives as well as volunteers from the fourth year medical school class. Full time SOM faculty will make up the majority of the voting members of all Admissions Committee meetings.

## **C. Curriculum Committee**

1. **Authority and Responsibility:** The Curriculum Committee holds sole authority and responsibility for creating, overseeing and managing the medical student education program, and ensuring compliance with all LCME accreditation standards. This authority is derived from the dean and through this College Council Charter. Changes in curriculum may require approval by the Academic Senate Executive Committee or other University body, in compliance with University Policy.
2. **The Curriculum Committee, with its various subcommittees:**
  - a. Defines the objectives and competencies for medical student education.

- b. Faculty from the SOM (and Health Sciences, for inter-professional education) determine curricular content, order, and workload, as well as the goals and competencies addressed by each curricular component.
- c. With clerkship directors, determines the types of patients, conditions, settings for educational experiences and the level of medical student responsibility.
- d. In collaboration with faculty, determines pedagogy and methods of teaching appropriate for each curricular component, including inter-professional education.
- e. Develops, implements and evaluates innovative teaching methods in the curriculum.
- f. Ensures that curriculum methods optimize opportunities for the integration of content and concepts across disciplines.
- g. Reviews all feedback and recommendations, and utilizes information to improve the curriculum.
- h. Creates educational policies that advance the curriculum and meet LCME and compliance standards; where all policies are sent to the Executive Committee for approval.
- i. Reviews, revises if needed, and approves roles and responsibilities for curriculum directors and teaching faculty.
- j. Sets expectations for professional attributes that medical students are expected to attain through the medical student education program.
- k. Ensures a coordinated and coherent curriculum.

**3. Composition:**

- a. Membership on the SOM Curriculum Committee shall be as follows:
  - i. The Associate Dean for Curriculum will Chair the Curriculum Committee. The Chair may appoint a deputy or Co-Chair.
  - ii. Chairs of subcommittees that define, create, and manage curricular content (and may be included in 'iii' and 'iv' of this section).
  - iii. Two to three Ph.D. faculty members selected and appointed by the Vice Dean for Education and the Curriculum Committee Chair(s) with Department chair approval.
  - iv. Three to four clinical teaching faculty selected and appointed by the Vice Dean for Education.
  - v. Curriculum Committee Chair(s) with Department Chair approval.
  - vi. One Ph.D. faculty member selected by vote of all Career-line and Tenure-line full time faculty (0.5 FTE or greater).
  - vii. One M.D. faculty member selected by vote of all Career-line and Tenure-line full time faculty (0.5 FTE or greater).
  - viii. Medical students (up to two from each class).
  - ix. Two House Staff from ACGME accredited residency programs.

**D. Student Promotions Committee**

1. **Authority and Responsibility:** This committee monitors medical students' academic performance, ethical conduct, and progress through the medical school curriculum. If a student fails (F) or receives an incomplete (I) in a unit, course, longitudinal clinical experience, clerkship, rotation or learning experience, or fails to uphold the Code of Ethics, or demonstrates lapses in professionalism, s/he will be presented to the Promotions Committee. Students with delayed course completion may also be so presented.

The Student Promotions Committee has the authority to impose an academic action based on a student's performance in a unit, course, clerkship or rotation, a USMLE licensing examination, failure of more than one NBME Subject examination, delayed course completion, or failures in attitude, failure to uphold the Code of Ethics or lapses in professionalism. The Committee has the authority to consider and approve remediation recommendations made by a unit, course, or clerkship director, faculty member or department in response to a student failing a unit, course, clerkship or rotation. No unit, course, or clerkship director may offer or implement remedial procedures without approval of this Committee.

The Promotions Committee considers a student's entire academic record, overall professional development, behavior and attitude in deciding the appropriate academic action. The Committee has the authority to impose academic actions, including, but not limited to, clerkship remediation, additional educational activities, repeat of an academic year or Phase, extended curriculum, leave of absence, academic probation, formal reprimand, and/or dismissal from medical school.

Should the Promotions Committee decide that a student's lapse in professionalism or failure to uphold the Medical Student Code of Ethics warrants action, academic action options include, but are not limited to, formal reprimand, probation, suspension, and/or dismissal from medical school.

The standing committee on academic progress of the School of Medicine shall evaluate the overall performance of each medical student at the end of each academic year and recommend to the Executive Committee the promotion to the next educational phase; and nominate medical students for certification of graduation upon review and certification that they have satisfactorily completed the medical school curriculum.

2. **Composition:** Membership shall be as follows:
  - a. Chair, Associate Dean of Professionalism, Evaluation & Learning, voting
  - b. Associate Dean of Curriculum, voting
  - c. Faculty: Basic Science and Clinical Faculty, voting
  - d. Resident: voting, not in quorum count (n=1)
  - e. Medical Students, voting, not in quorum count (one representative from each class year)
  - f. Education Specialists, nonvoting, invited by the Chair

3. ***Student Promotions Committee Academic Actions:*** Some academic actions are automatic. With regard to actions that are *not automatic*, the Promotions Committee has broad discretion. It may impose but is not limited to any of the following:
- a. *Leave of Absence:* Students are expected to complete their medical education in four consecutive years. However, the Promotions Committee may impose a leave of absence as an academic action so that a student may address a personal or health issue that impacts his or her academic success.
  - b. *Dismissal:* The Promotions Committee may dismiss a student when the student:
    - i. Has demonstrated a consistent pattern of substandard academic performance. This would include, for example, a history of delayed course completion, unit/course/clerkship/rotation failure(s), and/or failure(s) of a USMLE examination.
    - ii. Has demonstrated character, personality or behavior unsuitable for the practice of medicine, lacks motivation or is emotionally unstable. This includes, but is not limited to, dishonesty, substance abuse, aggression, abusiveness, and/or cheating.
    - iii. See automatic actions below.
  - c. The following academic actions are *automatic* and shall be imposed by the Promotions Committee after confirming that the facts that serve as the basis for the automatic action actually occurred, e.g., a student did in fact fail an NBME licensing exam three times.
    - i. *Academic Probation:* Academic probation is automatic when a medical student receives an incomplete (I) or failure (F) in a required unit, course, clerkship, or rotation, or fails a USMLE licensing examination (Step 1, Step 2 Clinical Knowledge, Step 2 Clinical Skills) or fails more than one NBME Subject examination.
    - ii. *Dismissal for USMLE Licensing Exam Failures:* Dismissal is an automatic action imposed by the Promotions Committee if a student fails three times any one USMLE licensing exam (Step 1, Step 2 Clinical Knowledge, or Step 2 Clinical Skills).

Neither course directors nor clerkship directors may implement remedial actions without approval of the Student Promotions Committee.

#### **E. Academic Appeals Committee (AAC)**

A student who believes that an academic action imposed by the AP Committee is arbitrary or capricious may pursue their appeal to the Academic Appeals Committee.

The Academic Appeal Committee process, as well as the Student Behavior Committee authority, responsibility and composition are prescribed in the University of Utah Regulations Library under Part 6: Academics, Student Code. Specifics related to the academic appeals committee appear in Section 4. The link is provided below:

<http://www.regulations.utah.edu/academics/6-400.html>

At the request of the Dean or the Dean's designee, the terms of faculty on the AAC may be extended.

## **F. Graduate Medical Education Committee**

1. ***Chair:*** Associate Dean for Graduate Medical Education.

2. ***Function:***

The Graduate Medical Education Committee (GMEC) oversees and monitors all aspects of resident education in accordance with ACGME Institutional, Common, and specialty-specific Review Committee Requirements<sup>2</sup>. The GMEC is responsible for establishing and implementing policies and procedures regarding the quality of education and the learning and work environment for residents in all University of Utah ACGME-accredited and non-accredited graduate medical education programs to assure that residents achieve the ability to practice the highest standard of care in their specialties as independent physicians upon graduation.

3. ***Authority and Responsibility***

- a. Establish policies and procedures consistent with ACGME Institutional, common, and specialty-specific requirements for resident duty hours and the working environment, alertness management/fatigue mitigation, supervision, selection, evaluation, promotion, dismissal, and moonlighting;
- b. Establish policies and procedures for ensuring and monitoring effective, structured hand-over processes to facilitate continuity of care and patient safety;
- c. Establish and maintain liaison with Program Directors, Department Chairs, and appropriate administrative personnel. The GMEC will also assure that Program Directors establish and maintain proper oversight of and liaison with appropriate personnel of affiliated institutions participating in University of Utah graduate medical education programs;
- d. Establish policies and procedures for dealing with grievances brought by residents related to their graduate medical education programs. The GMEC will ensure that such policies and procedures satisfy the requirements of due process, and that they are applied equally to all residents;
- e. Review and approve annual proposals for resident stipends and benefits;
- f. Review the qualifications of faculty members who are not eligible for ABMS board certification but who supervise residents/fellows in ACGME-accredited programs. The GMEC will determine if these qualifications are acceptable in lieu of board certification;
- g. Review and monitor program support, resident participation in scholarly activities, and resident participation in interdepartmental patient safety and quality improvement efforts;

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<sup>2</sup> The term resident in this policy refers to both specialty residents and subspecialty fellows.

- h. Coordinate and conduct accreditation mid-cycle internal reviews of all residency programs to ensure compliance with Institutional, common, and specialty-specific requirements;
- i. Regularly review Institutional and Program accreditation letters (ACGME Letters of Notification) and monitor action plans for correction of concerns and areas of non-compliance;
- j. Assure that each program provides a curriculum and evaluation system to ensure that residents demonstrate achievement of the ACGME General Competencies;
- k. Communicate with the [\*University of Utah Hospitals and Clinics?] Medical Staff (MS) regarding the safety and quality of patient care that includes the annual report to the MS; description of resident participation in patient safety and quality activities; accreditation status of programs; and any citations regarding patient care issues;
- l. Review and approve the following prior to submission to the ACGME:
  - i. All applications for ACGME accreditation of new programs;
  - ii. Changes in resident complement;
  - iii. Major changes in program structure or length of training;
  - iv. All requests for changes in the program that would have significant impact, including financial, on the program or the institution;
  - v. Additions or deletions of participating Institutions;
  - vi. Appointments of new Program Directors;
  - vii. Progress reports requested by any Review Committee;
  - viii. Responses to all proposed adverse actions;
  - ix. Requests for appeal of an adverse action;
  - x. Requests for increases or any change to resident duty hours;
  - xi. Requests for voluntary withdrawal, inactive status, or reactivation of any ACGME accredited program;
  - xii. Appeal presentations a Board of Appeal or the ACGME; and
  - xiii. Proposals to ACGME for approval of innovative educational approaches.

#### ***4. Composition:***

GMEC membership shall include representative program directors, peer-selected residents, and peer-selected program coordinators, representative of the Sponsoring Institution, the DIO, and appropriate representatives of major participating institutions. Appointments are recommended by the Chair of the GMEC and voted on by the GMEC membership. Membership is reviewed annually.

#### ***Voting members of the GMEC include:***

- a. GMEC Chair;
- b. ACGME Designated Institutional Official (DIO);
- c. GME Director or designee;
- d. University Hospital Chief Medical Officer (CMO) or designee;

- e. University Hospital Chief Medical Quality Officer (CMQO) or designee;
- f. Dean of the School of Medicine or designee;
- g. Representatives of Major Participating Institutions, for example:
  - i. Department of Veterans Affairs Medical Center;
  - ii. Intermountain Health Care;
  - iii. Primary Children's Hospital.

***Program Directors or designees from core Residency Programs<sup>3</sup>:***

- a. Family Medicine;
- b. General Surgery;
- c. Internal Medicine;
- d. Neurology;
- e. Obstetrics and Gynecology;
- f. Pathology;
- g. Pediatrics;
- h. Psychiatry.

***Program Directors or designees from three (3) additional residency programs:***

- a. Emergency Medicine;
- b. Medicine/Pediatrics;
- c. Neurosurgery;
- d. Orthopaedic Surgery;
- e. Otolaryngology;
- f. Physical Medicine and Rehabilitation.

***Program Directors or designees from three (3) advanced Residency Programs or Fellowships:***

- a. Anesthesiology;
- b. Dermatology;
- c. Occupational Medicine/Preventive Medicine;
- d. Radiology;
- e. Urology.

***Up to eight (8) Peer-Selected residents***

***Two (2) Peer-Selected Program Coordinators***

***One (1) medical student***

The GMEC will meet monthly, with a goal of ten meetings per year.

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<sup>3</sup> Core programs may be entered without prior GME training and lead to credentialing by a recognized professional board.

Term of appointments to the GMEC will be for one year with the potential for automatic reappointment of individuals who continue in the roles listed above and meet minimum meeting attendance records.

With advanced notification to the GMEC Chair, GMEC members may occasionally designate a proxy. Proxies may exercise the Committee member's voting privileges. Members may also participate electronically.

For purposes of voting, a quorum of the GMEC shall consist of 50% of the voting members. Matters brought to the GMEC will be decided by a simple majority of all voting members who are in attendance.

By majority vote, the GMEC may set minimum attendance requirements.

## **5. GMEC Sub-Committees**

### **1. GME Executive Committee:**

- a. Chair: Associate Dean for GME;
- b. The GMEC will designate an Executive Committee that serves as an adjunct to the GMEC to augment the work of the full committee and to handle issues that are sensitive and more appropriate for a small group. The Executive Committee meets monthly;
- c. The purpose of the Executive Committee is to review correspondence to and from the ACGME, develop new GMEC policies and processes as needed, annually review existing GMEC policies, annually review GMEC committee membership, and take any actions needed between regularly scheduled meetings of the GMEC. All actions of the Executive Committee will be reviewed at monthly GMEC meeting and included in the minutes;
- d. The GMEC Chair will also serve as the Executive Committee Chair. Additional members will include the DIO, one resident GMEC member, and two program director GMEC members.

### **2. GMEC Subcommittees:**

Sub-committees may be formed on a standing or ad hoc basis to address specific needs. Subcommittee actions and recommendations will be reviewed at GMEC meetings and included in the minutes.

## **G. Continuing Medical Education Committee**

### **1. Chair: Associate Dean for CME**

2. **Function:** The Continuing Medical Education (CME) Committee acts in an advisory role to the Associate Dean for CME to ensure relevancy of the School of Medicine's CME enterprise to the School of Medicine and the physicians of the state of Utah. The committee's role is to foster CME activities that assist

physicians in efficiently and effectively carrying out their professional responsibilities.

3. **Authority and Responsibility:** The Committee plays a critical role in the improvement and direction of the CME enterprise by:
  - a. Advising on CME planning and strategy.
  - b. Identifying areas of educational gaps/needs.
  - c. Supporting CME initiatives by providing information to SOM departments and mobilizing support among School of Medicine faculty.
  - d. Reviewing data on CME activities and recommending adjustments to process or policies based on this review.
  - e. Assisting in analyzing the degree CME is meeting its stated mission.
4. **Composition:** The committee consists of the Associate Dean for CME, the Director of CME, and faculty and leaders from the Health Sciences and the community that are stakeholders in the CME enterprise. Membership may include representatives from the clinical SOM departments and hospital units.

#### **H. Faculty Appointment, Review, and Advancement Committee (FARAC) (Formerly the Appointments, Retention, Promotion, and Tenure Committee or ARPT Committee)**

1. **Chair:** The Chair will be selected at the start of each academic year by the Associate Dean for Academic Affairs. The outgoing chair of the committee shall recommend candidates to the Associate Dean for Academic Affairs.
2. **Function:** *The FARAC shall consider the following actions:*
  - a. All new appointments except visiting faculty positions and volunteer adjunct positions
  - b. All promotions within all faculty tracks
  - c. All tenure actions
  - d. All reviews where retention and reappointment are *not* recommended
  - e. Tenure track retention reviews if requested by the faculty member or the department
  - f. All appointment and retention files referred by the Dean

Majority vote of the total membership of the committee shall be required for action.

**3. Composition:** This committee shall include three tenured Professors and one career-line Professor from Basic Science departments; three tenured Professors and one career-line Professor from Clinical departments; one at-large tenured Professor from any Department; two at large career-line professor from any department; one fourth year medical student; and one representative from the School of Medicine graduate students, house officers or non-faculty postdoctoral fellows. Elected faculty members shall serve three-year staggered terms; the student and postdoctoral members shall serve one-year terms.

4. **Election:** As members rotate off the committee, the Associate Dean for Academic Affairs shall, in collaboration with department chairs, solicit nominations to run for election to the committee. The slate of nominees will be sent to all tenure-line faculty members for a vote.

## **I. Research Committee**

1. **Chair: Vice-Dean for Research or designee, Associate Dean for Basic and Translational Research**
2. **Function:** The function of the SOM Research Committee is to inform research strategic planning and programmatic investments and advise on research challenges and opportunities
3. **Authority and Responsibility:** The SOM Research Committee meets as needed to address SOM research issues that are a subset of the issues addressed by the Health Sciences Research Advisory Committee chaired by the Health Sciences Associate Vice President for Research.
4. **Composition:** The SOM Research Committee is composed of the subset of the Health Sciences Research Advisory Committee with appointments in the SOM.

## **J. Inclusion and Outreach Committee**

1. **Chair: SOM Associate Dean for Inclusion and Outreach**
2. **Function:** The function of the SOM Inclusion and Outreach Committee is to inform inclusion and diversity strategic planning and programmatic investments and advise on inclusion and diversity challenges and opportunities.
3. **Authority and Responsibility:** The SOM Inclusion and Diversity Committee meets as needed to address SOM inclusion and diversity issues that are a subset of the issues addressed by the Health Sciences Inclusion and Diversity Committee chaired by the Health Sciences Associate Vice President for Inclusion.
4. **Composition:** The SOM Inclusion and Diversity Committee is composed of the subset of the Health Sciences Inclusion and Diversity Committee with appointments in the SOM.

## **K. Awards Committee**

1. **Chair:** Associate Dean for Faculty Development

2. **Function:** The Awards Committee facilitates and coordinates nominations of faculty members for national recognition, including election to the Institute of Medicine and National Academy of Sciences, Association of American Medical Colleges awards, and other awards identified by the committee.
3. **Authority and Responsibility:** The Awards Committee Chair will identify award opportunities in consultation with the SOM Dean and Department Chairs. The Awards Committee Chair will also consider suggestions from members of the faculty. For each proposed nomination, the Awards Committee Chair will convene an ad hoc committee. The Chair, with the assistance of the Office of Academic Affairs, will coordinate preparation and submission of the nomination.
4. **Composition:** The Awards Committee is chaired by the Associate Dean for Faculty Development. Members of the Awards Committee will be appointed by the Chair on an ad hoc basis to provide appropriate expertise for each nomination.

#### **ARTICLE V: AMENDMENTS TO CHARTER**

The Charter may be amended by a two-thirds vote of Council members. Voting may be conducted by written ballot, electronic mail, web site, or any similar method. A least one week's notice shall be given for the collection of ballots. Approved amendments to the Charter must be ratified by a majority vote of the full-time (.75 FTE or greater) Career-line and Tenure-line College faculty, and finally approved by the Academic Senate Executive Committee (University Policy 6-003).

Approved:  
X/X/2015 College Council  
X/X/2015 Academic Senate Executive Committee

University of Utah -- School of Medicine

College Council Charter

This charter was “provisionally approved” by the Academic Senate Executive Committee on 2015-02-09, and presented for the Information of the Academic Senate 2015-03-02

The “provisional approval” was based on a determination that as presently crafted, the Charter and the structure of the Council would not be fully compliant with applicable University Regulations and so could not be given permanent approval--- however—the college was seen to be making significant progress toward the goal of establishing an acceptable council structure, and so would be expected to soon return to the Senate Executive Committee with a revised Charter suitable for permanent approval.

For further details of the approval status, see records of the 2015-02-09 Senate Executive Committee meeting, and contact the Office of the Sr VP for Health Sciences.