

# FACULTY HANDBOOK



School of Dental Medicine  
UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS

DENTAL. INTEGRATED FOR HEALTH.



# School of Dental Medicine

UNIVERSITY OF COLORADO **ANSCHUTZ MEDICAL CAMPUS**

**School of Dental Medicine**

**Faculty Handbook**

**2022-2023**

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## **Mission, Vision, Strategic Plan, and Institutional Effectiveness**

## Mission, Vision, and Strategic Plan

### University of Colorado School of Dental Medicine

#### SDM Strategic Plan 2021-2026

**Preamble:** The CU School of Dental Medicine Strategic Plan has four mission areas: education, research, patient care and community engagement. These align with the University of Colorado Anschutz Medical Campus mission areas (link when appropriate).

Three **Integrated Value Threads** impact the mission areas and include: DEI (diversity, equity and inclusion), health and wellness of SDM resources, and innovation.

A goal has been identified for each mission area and integrated value thread. Priorities define the intent of each SDM mission area goal. Objectives and targets of each goal are assessed in the continuous monitoring of the **CUSDM Institutional Effectiveness Plan**.

The CU SDM is guided by a mission and vision statement.

**Mission:** The University of Colorado School of Dental Medicine (CUSDM), a collaborative partner on the Anschutz Medical Campus, is a diverse learning, clinical care, and research community. The CUSDM is committed to integrated health that innovates, treats, and discovers for the well-being of, and in service to, local and global communities.

**Vision:** CUSDM will be recognized as the leading transformative dental institution that graduates future-ready practitioners to deliver research-informed person-centered-care.

#### Mission areas:

##### I. EDUCATION: STUDENT SUCCESS AND RESILIENCE

###### Goal

The School of Dental Medicine will provide contemporary educational programs that prepare future-ready dentists with the knowledge, skills and values to practice general dentistry as critical thinkers and lifelong learners, dedicated to fulfilling the public's trust.

###### **Priorities:**

1. Create inclusive, welcoming, effective learning environments and a sense of belonging to support achievement in a contemporary education curriculum.
2. Prepare future-ready practitioners by providing an integrated and flexible curriculum that incorporates advanced technologies.
3. Use contemporary assessment strategies to proactively support student success in preparation for practice and/or advanced dental education.

**II. RESEARCH: INQUIRY AND COLLABORATIVE SCIENCE****Goal**

The School of Dental Medicine will conduct collaborative research activities to contribute to the discovery and dissemination of new knowledge and evidence-based practice for society's benefit and to be consistent with and advance the mission of the University of Colorado Anschutz Medical Campus.

**Priorities:**

1. Conduct cutting-edge collaborative research activities by building affinity groups with campus partners.
2. Facilitate inclusive collaborations on campus and nationwide in dental education research.
3. Promote an agile infrastructure to support faculty and student research.

**III. PATIENT CARE: PERSON-CENTERED CLINICAL ACTIVITIES****Goal**

The School of Dental Medicine's patient care programs will provide person-centered oral health care and support provider wellness, while serving as a clinical resource for dental and post-doctoral students, residents, and the community.

**Priorities:**

1. Provide exceptional person-centered oral health care that acknowledges the social determinants of health.
2. Support interprofessional solutions to enhance integrated patient care in a learning health system.
3. Incorporate emerging technologies and data science for the benefit of patients and the future workforce.

**IV. COMMUNITY ENGAGEMENT: POPULATION HEALTH****Goal**

The School of Dental Medicine will provide oral health care to underserved populations in our communities, involve students in outreach and service-learning, support interprofessional education and patient care, work with community partners on research activities, and provide programs to benefit our alumni and other members of the dental profession in Colorado, nationwide, and globally.

**Priorities:**

1. Cultivate public and private partnerships and alliances that engage and strengthen local and global communities.
2. Ensure bidirectional exchanges of information with preceptors, students and patients in the community sites of the ACTS Program.
3. Encourage CU dental graduates to provide care in the underserved rural and urban communities of Colorado in roles as dental providers and public health leaders.

**Integrated Value Threads for the Mission Areas:**

**DIVERSITY, EQUITY and INCLUSION** – Support an ongoing review of practices to ensure a just and equitable SDM environment where diversity and difference are celebrated.

**Goal**

The School of Dental Medicine’s education, research, patient care, and community engagement programs will be strengthened by an accountable culture of inclusion for all, and our students, faculty, and staff feel that they belong.

**HEALTH AND WELLNESS OF SDM RESOURCES** - Promote the mental health and overall wellness of the SDM community members, while securing, managing, and building capital and human resources that support the School of Dental Medicine.

**Goal**

The School of Dental Medicine will invest in and support growth of its human resources, facilities and technology to promote wellness, safety, accountability, and sustainability in operations.

**INNOVATION** – Embrace the SDM’s Innovation Agenda to catalyze changes in the education, research, clinical care, and community engagement missions of the SDM.

**Goal**

The School of Dental Medicine is committed to being a transformational dental institution that educates a future-ready dental workforce, creates new knowledge, provides person-centered care, and enhances the communities we serve by incorporating innovative technologies and methods throughout the school and its programs.



## **Institutional Effectiveness Plan**

### **Institutional Effectiveness Plan 2021 – 2026 (as of June 30, 2021)**

The CU SDM Institutional Effectiveness plan expands the mission areas and integrated value threads outlined in the CU SDM Strategic Plan to ensure accountability in achieving targets and continuous monitoring of outcomes.

The SDM's impact will occur through four mission areas: Education, Research, Patient Care, and Community Engagement; and three integrated value threads of Diversity, Equity, and Inclusion, Health and Wellness of SDM Resources, and Innovation.

A goal has been identified for each mission area and integrated value thread. Priorities have been established that define the intent of each SDM mission area goal. Objectives, strategies, and targets allow for comprehensive outcomes assessment.

The CU SDM is guided by a mission and vision statement.

*Mission: The University of Colorado School of Dental Medicine (CUSDM), a collaborative partner on the Anschutz Medical Campus, is a diverse learning, clinical care and research community that innovates, treats and discovers for the health and well-being of local and global communities.*

*Vision: CUSDM will be recognized as a transformative dental institution that graduates future-ready practitioners to deliver research-informed person-centered care.*

## **I. EDUCATION: STUDENT SUCCESS AND RESILIENCE**

### **GOAL:**

The School of Dental Medicine will provide contemporary educational programs that prepare future-ready dentists with the knowledge, skills and values to practice general dentistry as critical thinkers and lifelong learners, dedicated to fulfilling the public's trust.

### **Priorities:**

1. Create inclusive, welcoming, effective learning environments and a sense of belonging to support achievement in a contemporary education curriculum.
2. Prepare future-ready practitioners by providing an integrated and flexible curriculum that incorporates advanced technologies.
3. Use contemporary assessment strategies to proactively support student success in preparation for practice and/or advanced dental education.

**OBJECTIVES:**

1. Enroll a highly qualified, diverse dental class –

***Strategies and targets/anticipated results***

- i. Engage in intentional pipeline efforts to attract students underrepresented in dentistry
  - a. Employ thoughtful strategies from K-16
- ii. Attract a strong pool of qualified Colorado and out-of-state applicants
  - a. Attract at least 100 qualified CO applicants annually
  - b. Attract at least 2000 qualified out-of-state or non-Colorado applicants annually
- iii. Use a holistic admissions process to recruit students who have not only high academic achievement but other characteristics and talents
  - a. Use measures other than academic achievement and DAT scores to identify candidates for admission

**OBJECTIVE:**

2. Provide a supportive, humanistic, culturally sensitive experience for all students to promote academic success, and to facilitate individual growth and professional development

***Strategies and targets/anticipated results***

- i. Increase access and financial assistance
  - a. Ensure pipeline programs are urban and rural
  - b. Continue a three – tiered Scholarship program
- ii. Create an inclusive (and humanistic) environment
  - a. Complete a University-wide climate survey
  - b. Use student evaluation of instruction to inform change
  - c. Conduct meetings with students regarding perceptions of cultural environments.
- iii. Provide an integrated, evidence-based curriculum that leads to providing person-centered care
  - a. Enhance Community Dentistry Courses to incorporate the Social Determinates of Health
  - b. Incorporate resilience training in the curriculum to ensure provider health and wellbeing
- iv. Provide students with unique growth opportunities
  - a. Support underserved community-based experiences
  - b. Support an ADEA chapter future educators program
  - c. Support Annual Research Fellowships
  - d. Support student club and organization events that focus on diverse student interests
  - e. Support student research opportunities

**OBJECTIVE:**

3. Ensure the curriculum is: a) contemporary and evidence-based; b) integrates basic, behavioral and clinical sciences; and c) encourages critical thinking and life-learning

***Strategies and targets/anticipated results***

- i. Provide opportunities to work with the latest technologies
  - a. Use iPad technology in the classroom
  - b. Optimize the use of VR/AR/Gamefication
  - c. Introduce Haptics into pre-clinical laboratory courses
  - d. Continue to introduce Digital Dentistry into curriculum
- ii. Provide a longitudinal IPE experience
  - a. Provide Breadth of IPE experiences
    - i. Cavity Free at Three
    - ii. Teaching non-dental professionals
    - iii. Team-based learning - TBL
  - b. Conduct evaluation of IPE activities
- iii. Provide experiences that promote critical thinking in patient care and dental practice
  - a. Support Comprehensive Care Team activities
  - b. Improve Senior student satisfaction with program
- iv. Provide an educational environment that encourages self-assessment and continuous improvement
  - a. Provide student self-evaluation opportunities
  - b. Implement continuous quality improvement metrics for students
  - c. Incorporate student conducted chart audits in the Comprehensive Patient Care course
- v. Provide opportunities to maximize collaborations on the Anschutz Medical and Denver campuses such as in dual degree programs and inter-professional practice
  - a. Provide a DDS/MPH Program
  - b. Support the DAWN Clinic – Interprofessional Student-Run Free Clinic
  - c. Provide opportunities that adapt to community needs (COVID volunteer opportunities)

**OBJECTIVE:**

4. Apply high academic standards; utilize standardized test results and assessments of foundational knowledge, behaviors and clinical skill to ensure graduating students demonstrate attainment of the school's stated competencies.

***Strategies and targets/anticipated results***

- i. Apply current academic policies that support student achievement
  - a. Monitor Student on-time Graduation Rates
  - b. Monitor Student on-time program completion rates
- ii. Prepare students for success on the INDBE
  - a. Implement Integrated Curriculum
- iii. Prepare students for success on Regional Licensing examinations – ADEX and WREB

- a. Monitor ADEX Pass Rates
- b. Monitor WREB Pass Rates
- iv. Use a variety of assessments to ensure students successfully achieve the School's competencies
  - a. Monitor competency examination first-time pass rates

## II. RESEARCH: INQUIRY AND COLLABORATIVE RESEARCH

### GOAL:

The School of Dental Medicine will conduct collaborative research activities to contribute to the discovery and dissemination of new knowledge for society's benefit and to be consistent with the mission of the University of Colorado Anschutz Medical Campus.

### Priorities:

- 4. Conduct cutting-edge collaborative research activities by building affinity groups with campus partners.
- 5. Facilitate inclusive collaborations on campus and nationwide in dental education research.
- 6. Promote an agile infrastructure to support faculty and student research.

### OBJECTIVE:

- 1. Generate new knowledge in basic, applied, educational and translational clinical sciences that contribute meaningfully to the advancement of oral health and delivery of health care.

### *Strategies and targets/anticipated results*

- i. Promote and enable increased scholarship among clinical faculty
  - a. Structure opportunities to recruit faculty with diverse backgrounds
  - b. Provide appropriate research infrastructure
  - c. Promote Faculty Development funding applications that provide faculty with opportunities to present their scholarly work at appropriate conferences (Dean's Development Fund)
  - d. Support innovative basic science, clinical, translational, and educational research initiatives (Innovation Project Fund)
  - e. Support and enhance research in the School's post-graduate programs
  - f. Create new initiatives that position the SDM as a collaborative science resource to the Anschutz Medical Campus.
- ii. Provide support to basic science faculty to further raise the quality as well as the quantity of externally-supported, world-class scientific research
  - a. Track grant submissions/awards with respect to fluctuations in NIH funding levels
  - b. Track numbers of peer-reviewed publications
  - c. Promote increased research opportunities for and mentoring of junior faculty

- iii. Promote diversification of research funding sources
  - a. Encourage use and facilitate access to more internal (CU) funding mechanisms
  - b. Nurture non-NIH funding, including industrial support of research activities to create knowledge, inform clinical practice and enhance the educational programs while strengthening the overall research program and promoting technology transfer
  - c. Pursue productive research collaborations across the campus, the nation and the world as a means to enhance the quality, quantity and competitiveness of scholarship of School of Dental Medicine investigators

**OBJECTIVE:**

- 2. Engage our students and residents in a climate of inquiry and innovation

***Strategies and targets/anticipated results***

- i. Facilitate research activity and recognition of achievement of the CU dental students and residents
  - a. Expand opportunities for diverse students and faculty to participate in research activities.
  - b. Provide greater numbers of involved faculty mentors with expanded scope of research options
  - c. Increase student/resident participation in Research Day and in our internal research competitions
  - d. Promote the visibility and involvement of our students and residents at the national level in terms of research
  - e. Develop student/resident/faculty team-based research projects in addition to individual mentor/mentee projects
- ii. Create visibility to research-related information on our School's webpage and relevant social media
  - a. Develop and maintain faculty, laboratory and School webpages effectively interconnected, up-to-date and attractively populated with meaningful content
- iii. Incorporate current basic science research as relevant into curricular and clinical instructional activities (IDEAL Curriculum)
  - a. Utilize basic science faculty appointments in clinical departments and programs to inform teaching and promote new opportunities in translational research and scholarly activities

### III. PATIENT CARE: PERSON-CENTERED CLINICAL ACTIVITIES

**GOAL:**

The School of Dental Medicine's patient care programs will provide person-centered oral health care and support provider wellness, while serving as a clinical resource for dental and post-doctoral students, residents, and the community.

**Priorities:**

4. Provide exceptional person-centered oral health care that acknowledges the social determinants of health.
5. Support interprofessional solutions to enhance integrated patient care in a learning health system.
6. Incorporate emerging technologies and data science for the benefit of patients and the future workforce.

**OBJECTIVE:**

1. Assure clinical experiences for both patients and students focused on comprehensive, high quality, safe, effective, efficient, timely, and evidence-based care.

***Strategies and targets/anticipated results***

- i. Continuous review of Electronic Health Record
  - a. Chart audit review performed with each student (at least 10 per student over clinical career)
  - b. Overall 80% positive response rate on chart audit areas
  - c. Ability to quickly review EHR documentation compliance
- ii. Monitor quality of care by providing daily clinical assessments
  - a. >95% of all procedures assessed
- iii. Enhance and further integrate basic sciences, evidence-based dentistry, and critical thinking into the clinical curriculum
  - a. Implementation of the Integrated Curriculum to include the Clinical Correlation course.
  - b. Implementation of the Integration of Basic Sciences with Patient Care seminars
  - c. Creation of the Introduction to Clinical Dentistry I, II, III courses
  - d. Enhance Transition Clinic course
- iv. Increase the number of completion of phase 1 of care, case completion of care, and patient quality of care assessments
  - a. Increase number of completion of Phase 1 by 10%
  - b. Increase number of case completions by 10%
  - c. Continue to use Chart Audits as part of the Comprehensive Patient Care course
- v. Increase preventive based clinical care experiences
  - a. Use of Telehealth and/or other technologies
  - b. Provide Fluoride Varnish and Community Screening experiences for DS 1 and DS 2 students
- vi. Review of quality control activities within the school
  - a. Restructure Quality Committees
  - b. Review and re-write Infection, Prevention, and Exposure Control Plan

- c. Review and rewrite Quality Management and Patient Safety Plan
- d. Monitor and data management of an online tracking system for adverse occurrences and near misses
- e. Improve use of dispensary, inventory, and lab management modules
- vii. Monitor and data validation of standard of care metrics
  - a. Standard of Care Metrics meet defined goals
  - b. Validate data for records in and not in compliance with metric
  - c. Untoward events reported in the Safety Intelligence database
- viii. Monitor specific metrics to ensure quality of care
  - a. < 10 % endo within 12 months of a crown
  - b. < 10% extraction within 12 months of a crown
  - c. < 10% Remakes of full dentures or partial dentures within 12 months
- ix. Provide Urgent care to patients of record and the surrounding community
  - a. Assure Urgent/Emergency Care Clinic is accessible to all patients
  - b. On-call rotations for students for patients of records with urgent needs
- x. Continued Implementation of advanced dental procedures as a component of dental education
  - a. Enhance the use of Scanning Technologies for patient care (Digital Design Studio)
  - b. Offer implant planning experiences
- xi. Ensure an equitable and sufficient patient care experience to acquire and demonstrate clinical competency
  - a. Developed patient treatment experiences documents to monitor each student's clinical experiences
  - b. Recruitment of patients

**OBJECTIVE:**

- 2. Foster a person-centered environment and enhance patient experience.

***Strategies and targets/anticipated results***

- i. Provide informed and culturally aware care
  - a. Provide patient rights and consent to treat in multiple languages per ongoing demographic assessments
  - b. Utilize various Limited English Proficiency tools
  - c. Interpretation services for general consents and treatment plans
- ii. Enhance Patient Clinical Experiences
  - a. Ensure clarity of all written patient correspondence
  - b. Enhance patient-centered website pages
  - c. Use of technology to enhance patient experience
  - d. Implement contemporary Pain Management Strategies
  - e. Patient Safety Awareness Campaigns
  - f. Implement external and internal electronic referral processes to ensure timeliness and continuity of care at SDM

- g. Use of mixed reality to prepare students for patient care experiences (clinical skills, cultural competency, etc.)
- h. Service training for health care professionals and new initiatives
- i. Creation of contemporary advanced simulated clinical dental environment
- iii. Ensure health equity and access to care by providing unique clinics and/or funding for diverse patient populations
  - a. Adult Medicaid
  - b. CU Senior Smiles funding
  - c. Telehealth Initiatives
  - d. Adolescent Clinic
  - e. Heroes Program funding
  - f. Special Care Clinic
  - g. Generation Fund for Geriatric Patients
  - h. National Foundation for Ectodermal Dysplasia (NFED)
- iv. Expand Office of Patient Advocate
  - a. Collaboration with surrounding colleges/universities to create internships for social workers
  - b. Grants management for patient care for underserved populations
  - c. Hire additional Patient Advocate
  - d. Change name of Patient Advocacy office to be more inclusive
- v. Patient Satisfaction Survey
  - a. Score of 4.5 or higher in the following areas:
    - Timeliness of scheduling appointments
    - Student explains dental conditions and treatment options
    - Student attentive to patient needs
    - Quality of treatment
    - Overall satisfaction

**OBJECTIVE:**

3. Support provider growth and wellness

***Strategies and targets/anticipated results***

- i. Provide resiliency experiences/opportunities
  - a.
  - b. Modify student attendance policy to allow for time away from school
  - c. First-year resiliency program
  - d. Continue School-wide events
    - i. Ice cream social
    - ii. Survive the Semester T-shirts
  - e. Encourage use of University Mental Health resources
- ii. Support faculty and staff career growth opportunities
  - a. Lynda online education program
  - b. Quarterly staff meetings
  - c. Professional Development Opportunities



- i. Sterilization Monitoring Certification
  - ii. Surgical Assistant License
  - iii. IT Certifications
  - iv. COLTT Conference
  - v. Health Equity Certificate (CU Office of Diversity)
  - vi. SDM Teaching and Learning Certificate
- iii. Support student professional organizations and clubs
  - a. Attendance at Annual ADEA meeting
  - b. ASDA Lobby Day
  - c. ADEA Future Educators Fellowship

**OBJECTIVE:**

- 4. Serve as a clinical resource for dental and post-doctoral students, residents, and the community.

***Strategies and targets/anticipated results***

- i. Ensure an adequate number of patients of record to meet the educational needs of our students
  - a. Maintain number of patient appointments to ensure adequate comprehensive care clinical experiences for students
  - b. Increase the number of external referrals annually
  - c. Maintain number of new patient screening appointments annually
  - d. Denture Patient Recruitment
  - e. Endo Patient Recruitment
- ii. Maintain Centralized Patient Screening
  - a. Ensure efficient referral process to other internal SDM clinics
  - b. Implement needs based patient assignment
  - c. Continuous calibration of faculty
- iii. Refinement of Internal Electronic Patient Referrals process
  - a. Implement electronic process for patient referral to Oral Surgery, Grad Perio, and GPR
- iv. Addition of Referral Coordinator to enhance external referral process
  - a. Increase number of internal referrals to Residency Programs
- v. Modify clinic organization model
  - a. Reduce number of Practice Leaders to ensure continuity of clinical education experience
- vi. Electronic Competency Assessment tracking
  - a. X-codes added to axiUm for each competency exam
- vii. Holistic Review and Entrustable Measurement of Competency
  - a. Incorporate into clinical curriculum
    - i. Introduction to Dentistry 3
    - ii. Transition Clinic
  - b. Competency Review Board and Student Performance Committee
  - c. Professionalism
- viii. Implement use of patient schedulers (staff)
- ix. Increase oral health education for patient information
  - a. Oral health campaigns (social media, website, lobby monitors)
  - b. Patient-centered oral health care website page

#### IV. COMMUNITY ENGAGEMENT – POPULATION HEALTH

##### **Goal**

The School of Dental Medicine will provide oral health care to underserved populations in our communities, involve students in outreach and service-learning, support inter-professional education and patient care, work with community partners on research activities, and provide programs to benefit our alumni and other members of the dental profession in Colorado, nationwide, and globally.

##### **Priorities:**

4. Cultivate public and private partnerships and alliances that engage and strengthen local and global communities.
5. Ensure bidirectional exchanges of information with preceptors, students and patients in the community sites of the ACTS Program.
6. Encourage CU dental graduates to provide care in the underserved rural and urban communities of Colorado in roles as dental providers and public health leaders.

##### **OBJECTIVE:**

1. Serve as an educational anchor to the local, state, national, and global dental communities.

##### ***Strategies and targets/anticipated results***

- i. Create global health awareness through virtual or in-person experiences in partnership with the Office of Global Health and other CU collaborations
- ii. Enhance student skills in promoting oral health and wellness in diverse communities
  - a. Engage in fluoride varnish exercises in elementary school

##### **OBJECTIVE:**

2. Build and maintain connections in the community to ensure awareness of clinical care and education opportunities available at the School of Dental Medicine.

##### ***Strategies and targets/anticipated results***

- i. Promote and market school services that facilitate/enhance care to diverse patients
- ii. Explore opportunities for medical/dental integration to prepare future dental, medical, nurse practitioner graduates to work effectively in community care teams in future
  - a. Interprofessional experiences with students from various schools on campus

**OBJECTIVE:**

3. Collaborate with safety net dental clinics to increase their capacity to provide care to underserved populations while providing valuable community based educational experiences for students.

***Strategies and targets/anticipated results***

- i. Identify new collaborations with community-based clinics, exploring new models for maximizing elective education opportunities for students that increase access to care for patients at all stages of life
  - a. Increase number of community-based sites and types of collaborations

**OBJECTIVE:**

4. Collaborate with school districts, school-based health clinics, community groups and long-term care facilities to promote wellness.

***Strategies and targets/anticipated results***

- i. Seek new opportunities to engage local communities in wellness initiatives for patients across all stages of life
- ii. Identify new school-based health initiatives

**OBJECTIVE:**

5. Work with patients and partners to create opportunities for inter-professional education experiences for students that teach them how to improve health outcomes.

***Strategies and targets/anticipated results***

- i. Initiate programs that bring local providers and students together to treat the underserved

**OBJECTIVE:**

6. Work with the CU Office of Alumni Relations to create opportunities for alumni participation and engagement in the School of Dental Medicine.

***Strategies and targets/anticipated results***

- i. Structure alumni programs and events to connect alumni to the School of Dental Medicine and their peers
  - a. Rocky Mountain Dental Convention CU Alumni Reception
  - b. Colorado Dental Association CU Alumni Reception
  - c. CU Dental Newsletter
- ii. Customize continuing dental education offerings for alumni and volunteer faculty
  - a. Hire a new Director of Continuing Education
  - b. Make CE available for discipline specific clinical updates
  - c. Bi-annual Preceptor Conference

## Integrated Value Threads

**DIVERSITY, EQUITY and INCLUSION** – Support an ongoing review of practices to ensure a just and equitable SDM environment while fostering a culture of inclusion where diversity and difference are celebrated.

**GOAL:**

The School of Dental Medicine's education, research, and patient care programs will be strengthened by an equitable culture of inclusion and accountability where diversity and difference are celebrated and all students, faculty, and staff feel that they belong.

**OBJECTIVE:**

1. Accept a definition of diversity that celebrates all members of the dental school family. According to the University of Colorado Regent Policy 10P:

*Diversity and diverse are meant to include but are not limited to cultural differences, race/ethnicity, color, national origin, sex, pregnancy, age, (dis)ability, creed, religious or spiritual beliefs, sexual orientation, socioeconomic status, class, gender identity, gender expression, veteran status, political affiliation, or political philosophy.*

**OBJECTIVE:**

2. Develop a Diversity Plan that outlines action items

**OBJECTIVE:**

3. Establish a Student Equity Initiative to define areas of accountability

***Strategies and targets/anticipated results***

- i. Engage administrative offices across the SDM in addressing appropriate goals in the Action Agenda.

**OBJECTIVE:**

7. Create and implement a school-wide program that establishes professionalism standards and expectations for faculty, staff and students

***Strategies and targets/anticipated results***

- i. Spread responsibility for expectations across the School of Dental Medicine

**OBJECTIVE:**

8. Engage faculty, staff and students in programs that promote intercultural respect

***Strategies and targets/anticipated results***

- i. Create programs on intercultural respect training for faculty and staff
- ii. Support student intercultural respect with varied orientation activities and curriculum offerings

**OBJECTIVE:**

9. Develop pipeline programs to ensure students underrepresented in dentistry are informed about dental career opportunities at multiple points on the academic pathway to dental school

***Strategies and targets/anticipated results***

- i. Create programs with the CU Denver campus to encourage application by diverse students
- ii. Participate in online/virtual recruitment activities

**OBJECTIVE:**

10. Work to ensure admissions processes are holistic, and that scholarship opportunities are available

***Strategies and targets/anticipated results***

- i. Provide Holistic workshop training for Admissions Committee on an ongoing basis as new committee members join committee.
- ii. Ensure admissions processes and scheduling facilitate the opportunities for all students to demonstrate unique talents, their commitment and preparation to enter the dental school
- iii. Revise the timing of scholarship offers to effectively recruit eligible students

**OBJECTIVE:**

11. Strengthen programs to support and retain enrolled underrepresented minority students and other students.

***Strategies and targets/anticipated results***

- i. Support advising programs
- ii. Make academic tutoring accessible
- iii. Support student engagement in clubs - Ensure club advisors are trained and calibrated

**OBJECTIVE:**

12. Foster opportunities for students to participate in intercultural activities in local community-based programs as part of curricular offerings and outside the curriculum

***Strategies and targets/anticipated results***

- i. Support student participation at community ACTS sites
- ii. Engage with other Anschutz Campus Schools to participate in volunteer activities that serve underserved populations to include older adults and others.

**OBJECTIVE:**

13. Select Student Diversity Officers (SDO) for each class

***Strategies and targets/anticipated results***

- i. Engage SDO to provide input on the Dean's Student Equity Council
- ii. Engage representatives of student clubs to provide input and work on collaborative community experiences

**OBJECTIVE:**

14. Perform patient-centered care that recognizes cultural differences and aligns treatment with patient values/belief systems

***Strategies and targets/anticipated results***

- i. Ensure the dental curriculum includes a focus on the social determinants of health
- ii. Create innovative ways for students to learn how to address the unique needs of patients through Avatars and other technologies
- iii. Enlist the help of the Office of Patient Advocacy – division of language services to maximize communication tools and practices that are sensitive to patients and incorporate values of humanism – CyraCom and Purple

**HEALTH AND WELLNESS OF SDM RESOURCES** – Promote the mental health and overall wellness of the SDM community members, while securing, managing, and building capital and human resources that support the School of Dental Medicine.

**GOAL:**

The School of Dental Medicine will invest in and support growth of its human resources, facilities and technology to promote wellness, safety, accountability, and sustainability in operations.

**OBJECTIVE:**

1. Invest in people, facilities and technology that create safety, accountability and efficiencies in operations.

***Strategies and targets/anticipated results***

- i. Create inclusive hiring protocols to recruit top faculty and staff to meet SDM mission and goals.
- ii. Ensure mental health and wellness support for clinical providers (students, faculty and staff supporting clinical care) by partnering with campus resources.
- iii. Create compliance, quality assurance and safety programs to meet and surpass the needs of the institution.
- iv. Create a culture of accountability through feedback and evaluation.
- v. Continually monitor and upgrade technological needs to create efficiencies among all units.

- vi. Continually benchmark these investment outcomes to peer institutions and historical metrics of the UCSDM:
  - 1. Tuition and Fees
  - 2. State Funding
  - 3. Endowment Earnings
  - 4. Total Endowment
  - 5. Faculty FTE/Student Ratio (\*internal benchmark)
  - 6. Expenditure/Student Ratio
  - 7. Staff FTE/Student Ratio (\*internal benchmark)

**OBJECTIVE:**

- 2. Adhere to fiscal management policies as set by the University, State and Federal regulations.

***Strategies and targets/anticipated results***

- i. Communicate and apply generally accepted accounting standards and financial management protocols of the federal government, state government, and University of Colorado.
  - a. Annually review accountability and fiscal responsibility of personnel.
  - b. Annually certify those with fiscal responsibilities through university training protocols.
  - c. Work with university finance offices to ensure adherence to rules and protocols.

**OBJECTIVE:**

- 3. Work with foundations, alumni and private citizens to develop increased support for mission areas.

***Strategies and targets/anticipated results***

- i. Increase private gifts to support school mission areas.
- ii. Work with the office of CU Anschutz Alumni Affairs to create programming and connections with dental alumni.

**OBJECTIVE:**

- 4. Increase efficiencies in the provision of patient care.

***Strategies and targets/anticipated results***

- i. Increase availability of new technologies to increase efficiencies.
  - a. Explore and encourage the implementation of telehealth.
  - b. Establish a Digital Design Studio to support the advances in digital dentistry and new technologies.
- ii. Support faculty in achieving their professional goals.
  - a. Establish a Faculty Success Team.

- iii. Invest in new clinical technologies and new simulation space
  - a. Redesign and modify existing space to create new clinical space.
  - b. Build new space to create new clinical space.
- iv. Continually evaluate the SDM's EHR and its capacity to facilitate clinical interactions and big data mining with hospital partners.
  - a. Review opportunities to participate in a Health Learning System.
  - b. Train all faculty, personnel and students in the most effective use of the technology.
  - c. Create a secure and compliant health information environment.
- v. Comply with all state and federal regulations as subject to patient care.
  - a. Train all faculty, personnel and students in HIPAA protocols.
  - b. Train all faculty, personnel and students in appropriate patient privacy methodologies.

**OBJECTIVE:**

- 5. Increase sponsored research and per faculty research productivity

***Strategies and targets/anticipated results***

- i. Provide innovation seed grants to faculty
- ii. Encourage SDM principal investigators to seek out new and innovative granting opportunities at the campus and inter-campus levels, and through federal funding opportunities.
  - a. Annually track grant submissions of all types.
- iii. Increase per faculty research productivity based on direct and indirect funding
  - a. Annually review space utilization of research unit and compare with campus benchmarks for productivity.

**INNOVATION** – Embrace the SDM's Innovation Agenda to catalyze changes in the education, research, clinical care, and community engagement missions of the SDM.

**GOAL:**

The School of Dental Medicine is committed to being a transformational dental institution that educates a future-ready dental workforce, creates new knowledge, provides person-centered care, and enhances the communities we serve by incorporating innovative technologies and methods throughout the school and its programs.

**OBJECTIVE:**

- 1. Continue to implement digital technologies throughout the curriculum

***Strategies and targets/anticipated results***

- i. Continue using iPads for more effective learning



- ii. Aspire to the status of an Apple Education School
- iii. Familiarize faculty and staff about the various digital applications to use as teaching and learning tools through training.

**OBJECTIVE:**

- 2. Enhance learning by using haptics, VR, AR, Avatars and other technologies

***Strategies and targets/anticipated results***

- I. Continue to upgrade technology and offerings in the Immersive Learning (VR) Suite
- II. Acquire new technologies for the General Practice Simulation Hub
- III. Employ Haptics Technology to improve hand skills in DS1 curriculum

**OBJECTIVE:**

- 3. Encourage the Scholarship of Teaching and Learning related to digital education

***Strategies and targets/anticipated results***

- a. Hire a Director of Faculty Development
- b. Establish a cooperative agreement with the CU Denver Evaluation Center
- c. Develop a Faculty [Digital Education] Teaching Academy

**OBJECTIVE:**

- 4. Support of Innovation

***Strategies and targets/anticipated results***

- a. Continue support of the Innovation Task Force
- b. Continue to provide seed grants through the Innovation Project Fund
- c. Continue to support innovation throughout the School through dedicated funding

## **Leadership Teams**

## University of Colorado Office of the President

### Interim President

Todd Saliman

### Chancellors

Chancellor, CU Boulder

Philip P. DiStefano

Chancellor, UCCS

Venkat Reddy

Chancellor, CU Denver

Michelle A. Marks

Chancellor, CU AMC

Donald M. Elliman, Jr.

### Executive Team

AVP and Advancement Administration Officer

Annie Baccary

SVP and Chief of Staff

Leonard Dinegar

Special Advisor to the President, DEI

Antonio Farias

President and CEO CU Foundation

Jack Finlaw

VP, University Counsel, and Secretary to Board of Regents

Jeremy Hueth

VP of Academic Affairs

Michael Lightner

Acting Chief Financial Officer

Chad Marturano

Chief HR Officer and AVP of Employee Services

Felicity O'Herron

Diversity, Equity, and Inclusion Specialist

Emily Osan

Senior AVP of State Relations

Heather Retzko

Assistant VP of Engagement

Tony Salazar

VP for Communications

Michael Sandler

Interim Chief Compliance Officer & Title IX Coordinator

Valerie Simons

For the most up-to-date information, visit the President's Office website at:

<https://president.cu.edu/university-leadership>

## University of Colorado Anschutz Medical Campus

### Chancellor

Donald M. Elliman, Jr

### University Leadership

Executive Vice Chancellor for Academic and Student Affairs  
Executive Vice Chancellor for Administration & Finance, and CFO  
Vice Chancellor of Health Affairs  
Vice Chancellor of Advancement  
Vice Chancellor & Senior Managing Associate University Counsel  
Vice Chancellor for Research  
Vice Chancellor of Marketing and Communications  
Vice Chancellor of DEI and Community Engagement

Roderick Nairn  
Terri C. Carrothers  
John J. Reilly, Jr.  
Scott Arthur  
Steve Zweck-Bronner  
Thomas Flaig  
Kathy Green  
Regina Richards

### Chancellor's Initiatives and Leadership

Associate Vice Chancellor of Strategic Initiatives  
Executive Director of CU Innovations  
Associate Vice Chancellor for Biotechnology

Laura Borgelt  
Kim Muller  
Steve VanNurden

### CU Anschutz Medical Campus Deans

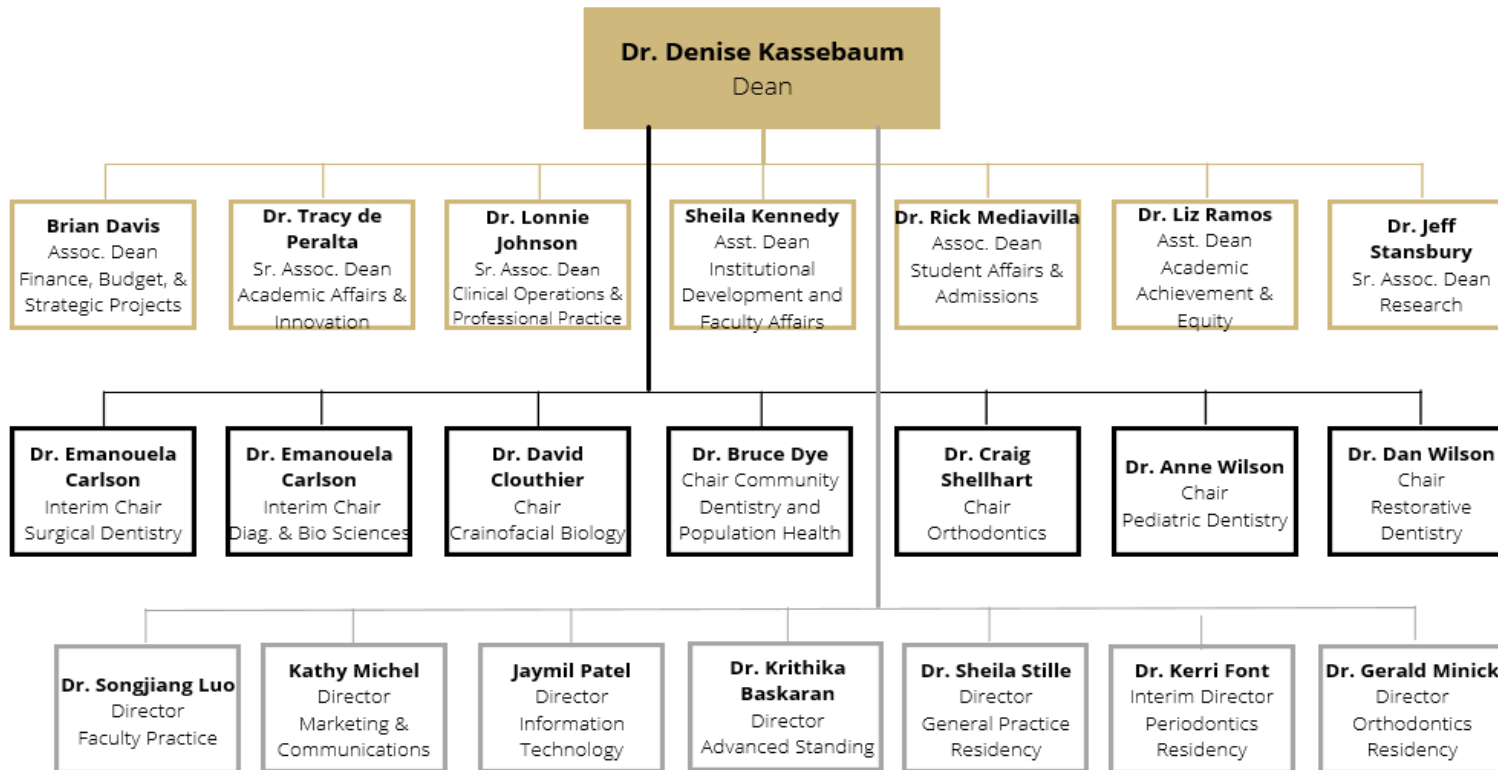
Skaggs School of Pharmacy and Pharmaceutical Sciences  
Graduate School  
School of Dental Medicine  
College of Nursing  
School of Medicine  
Colorado School of Public Health

Ralph Altieri  
David Engelke  
Denise Kassebaum  
Elias Provencio-Vasquez  
John J. Reilly, Jr.  
Jonathan Samet

For the most up-to-date information, visit the Chancellor's office website at  
<https://www.cuanschutz.edu/about/leadership>

**University of Colorado School of Dental Medicine**

**SDM Administration Organizational Chart  
Deans, Chairs and Directors**



## **Academic Affairs**

## Academic Policy

**Title:** CUSDM Academic Policy

**Source:** Office of Academic Affairs

**Approved by:** Faculty Senate (2008)

**Revised Date:** 11/26/2014; 08/31/2016; 05/07/2018 (Grading policies effective 08/06/2018); 12/31/2019; 08/19/2021; 12/20/2021

**Effective Date:** 01/01/2020

**Applies:** All CUSDM Programs

### UNIVERSITY OF COLORADO SCHOOL OF DENTAL MEDICINE ACADEMIC POLICY

#### The Evaluation and Promotion of Students

##### **I. Introduction**

Standardized procedures exist for the regular review of the academic performance of all students enrolled in the DDS degree program in the School of Dental Medicine (SDM). Grades are assigned for didactic, pre- clinical laboratory and clinical courses in the curriculum. At the conclusion of each semester, the Dental Student Performance Subcommittee (SPC) reviews student progress and recommends whether a student should be promoted to the next semester of the academic program. The Dental SPC functions as a representative body of the Faculty and does not, in itself, promote, dismiss, or require the repetition of a year by an individual student. Rather, the SPC assesses all available academic information and makes a recommendation for appropriate action to the Dean.

Additionally, a formalized process exists for the assessment of student progress towards achieving clinical competence. Each student will have multiple global assessments by the Competency Review Board (CRB) of their fitness to safely practice clinical dentistry. The Competency Review Board performs an overall review of student clinical performance indicators to determine the student's fitness to continue their clinical education and for recommendation for graduation.

The assessments for students in the four-year DDS program will occur:

- 1.in the Spring Semester of the DS 2 year (shortly after the student has initiated clinical patient care activities
- 2.in the Spring Semester of the DS 3 year (prior to the students release to participate in ACTS)
- 3.prior to graduation in the Spring Semester of the DS 4 year.

The assessments for ISP students will occur:

1. in the Spring Semester of the ISP 2 year
2. prior to graduation in the Fall Semester of the ISP 2 year.

Individual assessments can occur at other times as needed. The CRB carefully examines faculty input to confirm if there is an appropriate progression towards clinical competence for each student. The goal of this process is to identify progression shortfalls as early as possible in order to design necessary intervention strategies. The system also alerts the faculty to students who are doing well and might be eligible for independent projects.

If after CRB review, a School of Dental Medicine student is deemed to be not competent in their performance in the practice environment due to an inability to meet basic standards of dental care and/or the SDM technical standards with or without a reasonable accommodation, the Competency Review Board is required to take action to ensure a safe environment for students, patients, and other personnel. This action may require that the student be immediately removed from patient care activities or that specific interventions and/or restrictions be implemented to assure safe patient care. For any student observed to be not competent due to a temporary or permanent inability to meet basic standards of dental care, it is the duty of faculty or other healthcare personnel to report these observations to the Senior Associate Dean for Clinics & Professional Practice and/or to the Associate Dean for Academic Affairs. The CRB, in collaboration with the SPC, reserves the right to investigate the issues and modify the student's educational

plan within the educational program if deemed necessary. In addition, the CRB (in situations where patient care may be compromised) and/or the SPC (in situations where non-clinical academic performance may be compromised) may determine that the situation warrants external professional evaluation. Professional evaluations can include the assessment of the student in question by a variety of professionals depending upon the need. These professionals may include but are not limited to health care providers, mental health care providers, and drug and alcohol counselors, English as a Second Language instructors, Disability Resource Services, or Peer Assistance Service Program.

It is the student's responsibility to undergo evaluation. If the student does not complete the evaluation they will not be allowed to proceed in the curriculum. The CRB and/or SPC will serve to assist the student to arrange for the appropriate evaluation (or ongoing evaluations) and forward the evaluations to the CRB and/or SPC as appropriate. The CRB and/or SPC will then respond to the evaluation report and responses may range from taking no action, modifying the student's education plan, requiring mandatory changes in student behavior, requiring the student to take a leave of absence from the program in order to address specific concerns, or withdrawing the student from the School of Dental Medicine. In situations where a recommendation has been made by the CRB, the student may request a review of the CRB recommendation by the SPC. If appropriate, SPC in collaboration with CRB will develop a reentry plan for the student including implementation of the leave of absence process if necessary. The plan will address any additional work that may be required in order to remedy the specific set of conditions that have led to the leave of absence or withdrawal from the program.

## **A. Student Responsibilities**

1. It is the responsibility of the student to know and comply with all University, Anschutz Medical Campus, School of Dental Medicine, department and division course policies, guidelines, and procedures.
2. It is the responsibility of the student to know their academic status.
3. It is the responsibility of the student to immediately inform the Associate Dean for Academic Affairs of personal circumstances (e.g. medical/family leave, serious illness, and financial difficulties) likely to affect the student's academic performance.
4. It is the responsibility of the student to attend all scheduled classes, laboratory sessions, clinical sessions and rotations, quizzes and examinations. Student absence does not eliminate accountability for instruction presented.
5. It is the responsibility of the student to immediately inform the Office for Academic Affairs of a change of name, address and/or telephone number.
6. It is the responsibility of the student to conduct themselves ethically, professionally and compassionately, in all academic and non-academic activities consistent with SDM, AMC and CU codes and guides to student conduct and professionalism including the SDM Academic Honor Code and Student Professional Code of Conduct.
7. It is the responsibility of students to provide humane, compassionate and timely care to their patients.
8. It is the responsibility of students to maintain confidentiality in interactions with patients.
9. It is the responsibility of students to serve their patients and interact professionally with patients, faculty, peers and auxiliary personnel.
10. It is the responsibility of the student to know and meet the Technical Standards of the School with or without a reasonable accommodation.



## **B. Faculty Responsibilities**

1. It is the responsibility of the faculty to create a positive and consistent learning environment in didactic, pre-clinical and clinical courses.
2. It is the responsibility of the faculty to serve as content experts, and to be fully prepared for all assigned didactic, preclinical, and clinical coursework and teaching responsibilities.
3. It is the responsibility of faculty to ensure that patient care is not compromised in order to satisfy clinical expectations of students for academic advancement or graduation.
4. It is the responsibility of faculty to treat students as professionals and to facilitate student didactic and clinical progress and learning.
5. It is the responsibility of faculty to work together cooperatively to ensure that student learning and patient care are optimized, fully utilizing all teaching and clinical sessions.
6. It is the responsibility of faculty to provide appropriate remediation of coursework as recommended by the Student Performance Subcommittee, in a timely manner.
7. It is the responsibility of faculty to work together cooperatively to ensure that student learning and patient care are optimized.
8. It is the responsibility of the course director to assure that students receive written information concerning the course during the first class session. This information shall be presented in a "Course Syllabus" consisting of the following:
  - a. Course description
  - b. Major course goals
  - c. Dental student program competencies
  - d. Technical Standards for Dental Education Programs
  - e. Methods of evaluation
  - f. Grading model & remediation plan
  - g. Attendance policy
  - h. Title IX
  - i. Time assigned for course
  - j. Required texts
  - k. Study materials permitted
  - l. Learning objectives
  - m. Course schedule including dates and times, location, topics, scheduled examinations, and objectives for each session

For clinical courses, the following information will be presented in a "Clinical Course Outline", or detailed in the SDM Dental Clinical Education Manual, which will include:

- a. Educational goals
  - b. SDM clinical competencies and competency examinations
  - c. Student evaluation criteria
  - d. Grades/methods of evaluation/grading rubric
  - e. Attendance requirements
  - f. Time for the course
  - g. Feedback
  - h. Remediation of course failures
  - i. Request for accommodations
  - j. Course schedule
9. It is the responsibility of the faculty (delegated by the Faculty to the administrators of the Office for Academic Affairs; Office for Clinics and Professional Practice) to distribute academic and clinical policies and procedures at appropriate times in the student curriculum.

## **//Process for Evaluation and Enhancement of Student Performance**

**Overview** - The essential factor in evaluation of student performance is early identification of didactic, laboratory, clinical, or non-academic performance that is not consistent with the development of competency. The Student Success Team monitors student performances throughout the academic year. Course directors are encouraged to submit the names of students, as soon as possible, with academic, preclinical and/or clinical difficulties to the Office for Academic Affairs and to the Student Success Team.

The goal of the Student Success Team is to facilitate and enhance student success with all aspects of the academic program. This includes didactic, pre-clinical and clinical coursework as required for the completion of the DDS training program. Programs available for students through the Student Success Team include the assignment of a faculty advisor to provide individual guidance, opportunities for tutoring assistance and additional instruction in pre-clinical and clinical skills required to demonstrate competency to begin the practice of general dentistry.

### **A. Interpretation of Letter Grades and Pass/Fail Grades**

- 1. Letter Grades-** Letter grades used at the School of Dental Medicine consist of the following: A/A-  
/B+/B/B-/C+/C and F Grades

Superior or excellent student performance is noted by the letter A grades. The letter B grades represents student performance above the satisfactory level. The C+ grade indicates passing performance at the minimal satisfactory level. The F grade indicates a failing grade. Successful remediation of an F grade will convert the F grade to a C grade.

The grading policy stated in the course syllabus must be followed. The normalization of grades can only be done to improve student grades and may be done at the discretion of the course director.

Course directors must utilize the following standardized grading scale that includes the use of a plus/minus grading system:

A	100.00- 93.00
A-	92.99- 90.00
B+	89.99- 87.00
B	86.99- 83.00
B-	82.99- 80.00
C+	79.99- 75.00
F	Below 75%
C	Only given upon successful remediation of an F grade in a letter-graded course

Performance of 75% or better is required to pass all letter-graded and pass/fail graded courses.

## **2. F (Failing) Grades**

Failure to successfully complete course expectations/requirements/objectives at the 75% level by the scheduled completion date, or failure to meet attendance requirements will result in an F grade.

Appropriate remedial work must be completed for all F grades prior to graduation and no F grades are allowed on a student's transcript as a requirement for graduation.

The nature of the remedial work needed to correct deficiencies noted by F grades shall be at the discretion of the SPC in consultation with the appropriate course director. Most often, this is accomplished by successful completion of a remediation plan to be completed no later than the end of the following semester (see *Section V.1. Remedial Work for F Grades*). In this situation, successful completion of the remediation plan will convert the previous F grade to a C grade in a letter-graded course and to a Pass with Remediation (PR) grade in a Pass/Fail graded course. Other mechanisms to remediate an F grade may include retaking the course when this is the course director's remediation plan or when an entire year/semester is being repeated as mandated by the SPC. In these situations, the original F grade will remain on the student's transcript and passing the course when repeated will fulfill the requirement to remediate the previous F grade.

## **3. Situations where Failing Grades are Allowed on Transcripts**

Special consideration is given to the accumulation of failing (F) grades on a student's transcript in the event that a course director's remediation plan is for the student to repeat the course the next time it is offered. A second grade for that course will be added to a student's transcript and passing the course is required to successfully complete the remediation plan. F grades may also remain on a student's transcript when the student is repeating a course as part of a SPC decision where the student must repeat an entire semester(s) or year. F grades are only allowed on a student's transcript if the course has been successfully repeated as described above.

## **4. P/F (Pass/Fail) Grades**

The Pass (P) grade is awarded in courses graded Pass/Fail for student effort at or above 75% level. Pass/Fail grading is approved by the Dental Curriculum Subcommittee on a case-by-case basis.

Successful remediation of a failing grade in a Pass/Fail graded course will convert the F grade to a Pass with Remediation (PR) grade.

## **5. IP (In Progress) Grades**

The grade of IP may be used at the discretion of an instructor when a student has not completed the necessary course work to satisfy course requirements and there are extenuating circumstances. IP

grades must be rectified as soon as possible and a failure by the student to do so will result in referral to the Dental Student Performance Subcommittee for possible disciplinary action. Upon completion of the course requirements, the IP grade may be replaced by Pass, Fail, A through C+, or F. No IP grades are allowed on a student's transcript as a requirement for graduation.

## **6. Clinic Credit**

Students participate in clinical courses that are graded in the same manner as outlined in the section above. Students are advised of the methods for the evaluation of clinical performance, to include clinical competency assessments/examinations and threshold accomplishments through the Dental Clinical Education Manual and clinical course syllabi.

## **7. Grade Appeals**

A student may appeal a final course grade.

1. The student must state in writing the reasons for the appeal and forward this information to the course director within five (5) business days of receiving notification of the grade.
2. If unresolved with the course director, the student may discuss the grade appeal with the division/department chairperson.
3. If still unresolved, the student may discuss the grade appeal with members of the SPC Executive Leadership Team who will then make a decision.
4. The student may appeal this decision to the Dean. The Dean shall render a decision within ten (10) business days and as Chief Academic Officer of the School of Dental Medicine, such decision will be final.

## **8. Grade Changes**

Whenever an original course grade is changed (e.g. after rectification of an F or IP grade) the Registrar's Office will be notified to alter the transcript accordingly. In addition, the School of Dental Medicine maintains its own grade records, showing all original and changed records.

## **9. Grade Reports**

Students may obtain their grades from the Student Portal:

<https://portal.prod.cu.edu/UCDAccessFedAuthLogin.html>

Follow the Student Resources link to the Registration and Records student sign-on page. A complete University of Colorado academic record is also available at this site.

To request a hard copy, fax a written request to 303-724-8060 (Registrar's Office at CU Anschutz Medical Campus). Include your name and student ID.

## **10. Academic Difficulty**

Course directors may send grade reports for students having academic difficulties to the Office for Academic Affairs. This information will be considered in the evaluation of student performance and academic status and will help to identify students to be referred to the Student Success Team for academic assistance.

## 11. Tutoring

### *In-Course Tutoring*

The course director, whenever possible, will assist in determining the nature of a student's problem and where feasible, provide supplemental instruction while the course is in progress. In some cases, outside tutoring may be needed.

### *Tutoring Policy*

A student who is not performing adequately, or who is failing a course, should meet with the course director to arrange for review of course information, laboratory requirements or clinical expectations. The decision to recommend tutoring can be made by the course director, Associate Dean for Academic Affairs, and/or the Student Success Team.

## III. Attendance

### 1. Attendance

Students are expected to be present for all aspects of the curriculum including attendance at all didactic, laboratory and clinical courses/sessions. Attendance implies arriving promptly at the start of the course session and remaining until its conclusion. Unavoidable situations, such as illness, accident, or personal circumstance including religious holidays, approved accommodations from the Office of Disability Resources, and Title IX accommodations might influence a student's attendance and delay timely exit from an academic program. Students must make every effort to be in attendance as scheduled. Failure of students to meet attendance requirements may result in an F grade.

### 2. Approved Types of Leave

**Sick Leave** - Sick leave shall be granted on a case-by-case basis. Students must notify their course directors before missing a class due to sickness.

If a student is absent from school due to health-related issues for three (3) or more consecutive days, documentation from the healthcare provider and/or healthcare facility that indicates the leave is necessary, an estimate of the duration of the leave, and a clearance-to-return statement must be presented to the Office for Academic Affairs.

Leave due to an extended illness (over 2 weeks) will be handled on a case-by-case basis. An extended leave due to health-related issues will require coordination of reentry into the program and depending on the length of leave, may require repetition of significant portions of the program, and/or an evaluation of clinical competency.

If health-related issues prevent a student from completing a term, the student may be advised to request a Medical Leave of Absence. (see Section IV.1. Medical Leave of Absence)

**Bereavement leave** - Bereavement leave of three (3) days shall be given per death of an immediate family member (i.e., parents, grandparents, siblings, children or spouse). The student is required to notify the Office for Academic Affairs. Additional leave may be granted on a case-by-case basis.

**Military or Jury Duty** - Professional Leave of Absence may be granted under special circumstances and will be handled on an individual case-by-case basis by the Office for Academic Affairs.

**Professional Leave** - Approved professional leave is defined as time allotted for externships, observance of religious holidays, interviewing for residency programs, and continuing education at approved professional meetings in conjunction with the educational objectives of the program (such as the RMDC and Dental Specialty meetings). Approval is based on merit (with the exception of religious observance) relative to the student's professional development. Each student is allowed 8 working days per year of approved professional leave. Additional professional leave may be granted on a case-by-case basis. Approved professional leave must be scheduled in advance, should be considered in the context of not conflicting with patient care responsibilities, scheduled rotation assignments, scheduled examinations and cannot accrue from one year to the next. Professional leave approval requires the completion of a "Student Leave Request Form." The leave request must be submitted to the Office of Academic Affairs at minimum two weeks before the leave is requested. The Office of Academic Affairs will inform the student if the requested leave is approved.

**Other Leave**- Other leave may be granted on a case-by-case basis. Students must contact the course directors/faculty before missing a class, clinic or rotation, to determine if the student will have the opportunity to make-up the class, assignments, activities or rotation. A "Student Leave Request Form" must be submitted to the Office of Academic Affairs in advance of an absence, if possible. The leave request must include a written statement elaborating the reasons for the absence and provide supporting documentation or other information in order to evaluate for approval or denial.

Students may have extenuating circumstances for which the Leave Request may be approved by the Office of Academic Affairs prior to the student contacting the course directors/faculty.

**Vacation leave** – Students will have the following vacation days

- Labor Day
- Thanksgiving Day and Friday after
- Christmas Eve
- Christmas Day
- New Year's Day
- Martin Luther King Day
- President's Day
- Memorial Day
- Independence Day
- Other days as identified by the Academic Calendar

Note: On-call responsibilities will be assigned to specific students to cover the patient care needs of the School of Dental Medicine's patients of records and urgent care patients on days when the SDM Student Clinics are closed.

### **3.Attendance Requirements for Clinic**

100% attendance to all assigned clinical sessions is required. If no patient is scheduled or a patient fails an appointment, students must check with patient care coordinators and be available to see emergency patients, walk-in patients, assist, or staff emergency clinic or oral surgery clinic.

### **4.Attendance Requirements for Scheduled Examinations**

A student is required to take all examinations as scheduled. Students must notify the course director of their absence prior to the examination time. Absences from scheduled examinations must be substantiated by a valid, dated, and written statement elaborating the reason(s) for the absence. The statement must be presented to the Office for Academic Affairs on the first day the student returns following an absence. Additional documentation or other information in order to evaluate the reason for the absence may be requested. If the absence is approved, the student must be prepared to take a missed examination immediately upon returning to school at a time and date set by the course director that does not conflict with other didactic or clinical obligations. Any absence from a scheduled examination that is not approved by the Office for Academic Affairs will result in an F grade (zero points) being recorded for the examination.

## **5. Inclement Weather**

In the event of inclement weather, students are advised to consult the current Inclement Weather Policy, distributed by the Office for Clinical Affairs and Professional Practice. The Chancellor will declare if the AMC campus will close which would result in all classes and clinics at the School of Dental Medicine to be canceled, or a delayed start that would result in the closing of the morning clinics and a delay in the start of didactic classes as declared by the Chancellor. Students will be notified of a School closure by a posting notice on the School's website. See Inclement Weather Policy for delayed starts and course cancellation policies.

## **IV. Leave of Absence**

A Leave of Absence is an interruption of the normal course of study requested by the student. A Leave of Absence cannot extend more than two semesters. If a Leave of Absence is granted during a term, the student will not receive grades for any courses from which they are withdrawn.

A request for an extension of the Leave of Absence to greater than two semesters will be reviewed case-by-case. Re-entry following a Medical or Personal Leave of Absence must be approved by the Dean.

### **1. Medical Leave of Absence**

- A. A student with a mental health and/or physical health condition may apply for a voluntary Medical Leave of Absence from the University of Colorado Anschutz Medical Campus.
- B. The Office of Case Management will work with the Office of Student Affairs, the Office of Academic Affairs, and other campus entities, as indicated, per the CU Anschutz Medical Campus Policy on Medical Leave/Fit to Return.
- C. The campus Office of Case Management will notify the Office of Academic Affairs and the Office of Student Affairs when the Medical Leave of Absence is approved.
- D. To return from a Medical Leave of Absence, students must submit appropriate documentation to the CU Anschutz Office of Case Management, as evidence that the student is medically and/or mentally fit to resume their studies. The campus Office of Case Management will notify the Office of Academic Affairs and the Office of Student Affairs that the student is eligible to return, based on the student's previous academic performance and documentation of medical and/or mental fitness.

### **2. Personal Leave of Absence**

Circumstances may arise where a faculty member or student feels that a Personal Leave of Absence for the student would aid in the resolution of issues and/or difficulties the student is encountering. A Personal Leave of Absence may be considered under special circumstances.

- A. A written request for a Personal Leave of Absence must be submitted to the Assistant Dean of Academic Achievement and Equity.
- B. The written notification must state the start date of the requested leave, the intended return date to the program, and the justification for the leave, including any necessary documentation.
- C. The SPC will review the request and make a recommendation to the Dean. A Personal Leave of Absence must be approved by the Dean.

### **3. Academic and Clinical Responsibility During the Application Process**

With the initiation of the application process for a Medical or Personal Leave of Absence, the student will not be held responsible for attendance of academic, assessment or clinical activities during the time in which the institution is making a decision about granting the requested leave. If the request for a Leave of Absence is not approved, the course directors will provide make-up assessments and/or activities to the student without penalty.

### **4. Grades in the Student Record**

If the Personal or Medical Leave of Absence is approved. The Office of Academic Affairs will confirm the student's status with the CU Anschutz Office of the Registrar. The student may be dropped from the classes for which they are enrolled and their program plan will be updated to "Leave of Absence" with the designation of "Medical" or "Personal." A W grade (Withdraw) and/or passing grade, as appropriate, will be assigned.

### **5. Return from Leave of Absence**

All requests for a return from a Leave of Absence must be in writing and received by the Assistant Dean of Academic Achievement and Equity at least three months before the expiration of the leave. The written request must confirm the anticipated date of return and should document that the circumstances that initiated the Leave of Absence have been resolved.

The SPC will review the request, which, for a Medical Leave of Absence, may include the notification from the campus Office of Case Management, to determine the student's readiness to return to the curriculum. The SPC may require an individualized schedule of courses and activities to facilitate the student's re-entry into the program. Students may be required to repeat a portion of the curriculum, or potentially the entire academic year.

The space availability in the appropriate class; the length of time on leave; assessment of the student's potential to successfully complete the curriculum; the satisfactory completion of all required individualized schedule of courses and activities; changes that may have occurred in the curriculum during the time when the student was on leave; and the resolution of issues that initiated the original request will be considered before approval of the student's return to the program is recommended. There is no guarantee of re-entry into the program.

Re-entry following a Medical or Personal Leave of Absence must be approved by the Dean.

## **V. Academic Probation**

### **1. A Student on Academic Probation:**

- A. Will be required to maintain attendance as required by course directors for all scheduled classes and clinical sessions.
- B. Will be required to accept the terms of the academic probation as dictated by the SPC and as specifically defined in a letter from the Associate Dean for Academic Affairs. The probation letter provided to the student will list the conditions of probation, the projects and dates the projects must be completed (if applicable), and the consequences of not complying with the terms of the probation.
- C. Will have their progress in rectifying the deficient grades supervised by the course director, or if applicable, a designated faculty member.



- D. Will place all their effort on their academic performance and so, will not be allowed to serve or represent their Class, the School, or the University in any official capacity or be allowed to participate in any extra activity (such as elective courses) beyond their core course curriculum.

## **2. Academic Probation for F Grades**

- A. A student who received an F grade(s) in an academic semester is automatically placed on Academic Probation by the SPC the following semester. The minimal time for a probationary period is one academic semester.
- B. A student placed on Academic Probation remains in this status until approval to remove the status is granted by the SPC. Failure to satisfactorily complete remedial action for an F grade(s) by the SPC approved deadline or failure to complete the next succeeding semester with all grades at C+ level or higher and an academic semester and cumulative GPA of 2.3 or above (see *Section IV.3*), will result in a SPC recommendation for continued academic probation, dismissal, or repetition of the entire year.

## **3. Academic Probation for Academic Semester GPA below 2.3**

A student is placed on academic probation whenever their grade point average for an academic semester falls below 2.3. Failure to perform at or above the 2.3 level for two consecutive academic semesters will result in a SPC recommendation for continued academic probation, dismissal or repetition of the entire year.

## **4. Academic Probation for Cumulative GPA below 2.3**

A student is placed on academic probation whenever their cumulative GPA for the dental program falls below 2.3. Failure to maintain a cumulative GPA at or above the 2.3 level for two consecutive academic semesters will result in a SPC recommendation for continued academic probation, dismissal or repetition of the entire year.

## **5. Academic Probation for Insufficient Clinical Progress**

A student may be placed on academic probation if they fails to make sufficient clinical progress as determined by the SPC upon the recommendation of the Competency Review Board. Failure to rectify deficiencies in clinical progress may result in recommendation for not participating in ACTS, restriction of clinic privileges, remedial work, dismissal or repetition of the entire year.

## **6. Dental Student Performance Subcommittee (SPC) Progress Review of Students on Academic Probation**

The performance of a student placed on academic probation at the beginning of a new semester due to poor performance the preceding semester, will be reviewed by the SPC at the end of the semester they were placed

on probation. The student will be removed from academic probation if the student has no F or IP grades in any courses (other than in some courses where IP grades are at times given), and has successfully remediated all courses that led to the probationary status, and has a semester and cumulative GPA of 2.3 or higher.

*NOTE:* A senior student on Academic Probation is not eligible for graduation.

*NOTE:* A senior student who does not have a cumulative or final semester GPA of 2.3 at the time of graduation, is not eligible for graduation.

## **7. Student Dismissal or Repetition of the Year**

If the student fails to meet the probationary expectations, the student will remain on probation and may be subject to repetition of the year or dismissal.

A student who is placed on academic probation for two consecutive semesters or four times in their academic career may be recommended for dismissal or repetition of the entire year.

A student may be permitted to repeat a maximum of two academic years. A student who fails the successful completion of the second repeated year will be recommended for dismissal.

If the SPC is considering a student repeat a year, or be dismissed from the School of Dental Medicine, the SPC Chair will hold a Special SPC Meeting and notify the student by email. (see *Section V.3.*

*Special SPC Meeting*)

## **VI. Committee Review of Student Performance**

### **1. Remedial Work for F Grades**

Students who have received an F grade will be reviewed by the SPC.

- A. The student should be informed by the SPC within two weeks after grades are received at the end of the semester in the Registrar's Office that they are on Academic Probation.
- B. The Associate Dean for Academic Affairs requests a written plan to remediate the failed grade from the course director. This plan should be received within one week after the grades are received in the Registrar's Office.
  1. The remediation plan may consist of remedial sessions and appropriate examination, and/or specific assignments that satisfy course requirements.
  2. The course director may recommend satisfactory performance on repeat of the course as remediation.
- C. The SPC must approve the plan that includes deadline for completion. The failed grade must be remediated no later than the end of the following semester.
- D. The student will be instructed in their academic probation letter from the SPC to contact the course director for the plan required to remediate any failed courses.
- E. Successful completion of the remediation plan will convert the failing grade to a C grade in a letter-graded course and to a Pass with Remediation (PR) grade in a pass/fail graded course. The course director may recommend satisfactory performance on repeat of the course as remediation and in this situation, the original F grade will remain on the student's transcript. Passing the course when

repeated will fulfill the requirement to remediate the previous F grade.

## **2. Completion of IP Grades**

Students who have received an IP grade must contact the course director to ensure that the necessary coursework is completed so the IP grade can be converted to a letter or Pass/Fail grade. If the IP grade is converted to an F grade in a letter-graded course or to a Failing grade in a Pass/Fail course, the student is reviewed by the SPC and informed they are placed on academic probation as described in *Section IV. 2. Academic Probation for F Grades* and are responsible for remediation of the F grade as described in *Section V.1. Remedial Work for F Grades*.

## **3. Special SPC Meeting**

- A. If the SPC is considering recommending that a student repeat a year or be dismissed from the School of Dental Medicine, the SPC Chair will notify the student by email that a Special SPC Meeting will be held.
- B. The Special SPC meeting will be held at least ten (10) business days from the day the letter is sent via email, unless all parties involved agree upon an earlier date. The letter will inform the student of the date, time and place of the meeting and of their right to bring an advisor or faculty member to the meeting.
- C. A majority of SPC members or their designees will constitute a quorum. When a quorum is present, a simple majority of those present will approve decisions. Each voting member of the Committee will be entitled to one vote by secret ballot. The chairperson will vote only in the event of a tie.
- D. The purpose of the Special SPC Meeting is to allow the student to present significant information relative to the recommendation under consideration. The meeting is not to appeal any decisions, since none have been made; nor is it intended to be the forum for an appeal of a grade (see *Section II.A.7. Grade Appeals*). The student should prepare an opening statement providing significant information the student determines is important relative to the recommendation under consideration. The accompanying advisor or faculty member may speak in support of the student. However, the student will be responsible for responding to and answering questions from the SPC. At the end of the presentation and questions, the student, and an advisor or faculty member will leave the meeting.
- E. The SPC will deliberate in closed session immediately after the completion of the presentation and questions. The SPC decision for dismissal, repetition of the year, or appropriate recommendations for progress will be forwarded to the student and to the Dean within two (2) business days after the Special SPC Meeting absent other circumstances.

## **4. Appeal of Dental Student Performance Subcommittee Actions**

Students may appeal actions arising from the Dental Student Performance Subcommittee (SPC). Such actions involve a change in the academic status of a student (i.e. "academic probation, suspension, repetition of all or part of an academic year, and dismissal"). The appeal process involves an initial written appeal by the student to the Dean.

- A. A student (hereafter called the "appellant") may submit a written appeal to the Dean within five (5) business days of receipt of written notification of a change in academic status. This appeal must detail the reasons why the action of the SPC is deemed inappropriate, including factual information or circumstances that the appellant believes were not adequately considered.
- B. Within five (5) business days following receipt of the written appeal, the Dean will appoint an Appeals Review Committee composed of three faculty members who do not serve on the SPC. The Dean will name the Chairperson of the Appeals Review Committee.
- C. The Appeals Review Committee will meet to determine what additional information, if any, they want to review, which could require meeting with a faculty or with the student. The Appeals Review Committee will issue a decision within ten (10) business days.
- D. The Appeals Review Committee shall deliberate the SPC's decision in light of its review of all of the information and decide to
  - 1. Uphold the SPC's decision;
  - 2. Reverse the SPC's decision; or
  - 3. Modify the decision.
- E. Dean's Decision  
The Dean will review the Appeals Review Committee's decision. The Dean can either concur or not concur with the decision(s) of the Appeals Review Committee. If the Dean concurs, then the decision of the Appeals Review Committee is implemented. The decision of the Dean is final. This decision will be transmitted by the Dean to the appellant and to the SPC within four (4) business days after the decision has been reached.

## **VII. National Board Dental Examinations (NBDE)**

Students are responsible for preparing for the NBDE and must pass both Part I and Part II in order to receive their DDS degree. Successful completion of Part I is a mandatory requirement before entrance into the Advanced Clinical Training and Service Program is allowed.

Due to the discontinuation of NBDE Part I in December 2020 and Part II on July 31, 2022, beginning with the DS graduating class of 2023, students must challenge the Integrated National Board Dental Examination (INBDE) in order to receive their DDS degree.

## **VIII. Eligibility to Participate in the Advanced Clinical Training and Service Program (ACTS)**

Dental students must be certified by the Competency Review Board in the Spring semester of the DS3 year to be eligible for the Advanced Clinical Training and Service Program. Students on academic probation but certified by the Competency Review Board may be eligible to participate in Advanced Clinical Training and Service Program if approved by the SPC.

## **IX. Nomination for the Doctor of Dental Surgery Degree Graduation Requirements**

**Graduation from the University of Colorado School of Dental Medicine is contingent upon:**

- Completion of all required courses with a minimum cumulative GPA of 2.30
- Fulfillment of all legal and financial obligations to the University
- Successful completion of the National Board Dental Examinations Part I and Part II Beginning with the DS graduating class of 2023, challenge the Integrated National Board Dental Examination (INBDE)
- Removal of probationary status if on academic probation. In the situation where a student is placed on academic probation at the end of the last semester of their program, the student is given the opportunity to rectify academic deficiency/deficiencies needed to remove the probationary status. This may be accomplished by performing additional coursework as dictated by course director(s) and as approved by the SPC to allow the granting of a higher grade in select courses as needed to remove the student from academic probation. This may result in a lengthening of their academic program and a delay in their graduation from the SDM
- Recommendation for the degree by vote of the Faculty (Competency Review Board) of the University of Colorado School of Dental Medicine

**x. Qualifications for the Master of Science in Basic Oral Sciences Degree**

Degree Requirements: The minimum academic requirements for eligibility of this degree include successful completion with a passing grade for all courses during the first two years of the School of Dental Medicine curriculum (with the exception of clinical courses) and the writing of a scholarly paper that incorporates basic science and dental knowledge obtained over this minimum two year period.

- A. A minimum cumulative 2.0 GPA is required to be eligible for this degree.
- B. The Program Committee for the Master of Science in Basic Oral Sciences is responsible to ensure that all requirements are met and makes the recommendation to the Dean of the School of Dental Medicine to confer this degree.
- C. The student must also submit a letter voluntarily withdrawing from the School of Dental Medicine DDS program. Credit hours applied to this M.S. degree program cannot be applied to the D.D.S. degree.
- D. Students working towards this degree must be enrolled during the term in which they are awarded the degree.

The Program Committee for the Master of Science in Basic Oral Sciences will be composed of three Faculty members (80% effort or more) selected by the student.

- A. The student will submit the names of the Faculty members to the Associate Dean for Academic Affairs for their approval. Members are selected by the student as based on their ability to critically evaluate the scholarly paper.
- B. The Program Committee members will meet with the student seeking the MS in Basic Oral Sciences degree to approve the topic of the scholarly paper, define expectations related to length and scope of the paper including number and quality of references cited, and the due date.
- C. The Program Committee members will individually evaluate the scholarly paper and then will meet to

approve the paper or ask for revisions. All Program Committee members must unanimously approve the scholarly paper before the MS in Basic Oral Sciences degree is awarded.

- D. The Associate Dean for Academic Affairs will contact the Registrar's office once all requirements have been completed so the degree may be awarded.

This degree is available to students currently enrolled in the DDS program and to former students no longer enrolled that never completed the DDS program. The time eligibility for this degree for former students is five years or less since leaving the program. Since students must be enrolled during the term the degree is awarded, former students are required to enroll for a 1.0 credit "Master Degree Extended Studies" course, which includes extended studies and degree-seeking tuition fees.

## Academic Honor Code, Student Professional Code of Conduct, and Discipline Policies

### UNIVERSITY OF COLORADO SCHOOL OF DENTAL MEDICINE ACADEMIC HONOR CODE, STUDENT PROFESSIONAL CODE OF CONDUCT, AND DISCIPLINE POLICIES FOR SUSPECTED ACADEMIC HONOR CODE AND/OR STUDENT PROFESSIONAL CODE OF CONDUCT VIOLATIONS (Approved by Faculty Senate September 25, 2017)

#### Student Professionalism and Academic Integrity Subcommittee

The Student Professionalism and Academic Integrity Subcommittee (SPAIS) is included as a Committee Responsible to the Faculty Senate and shall report as a Subcommittee to the Institutional Effectiveness Committee. The SPAIS is responsible for the development, implementation and enforcement of dental student professional conduct and academic integrity policies. These policies include the Academic Honor Code, the Student Professional Code of Conduct, and Discipline Policies for Suspected Academic Honor Code and/or Student Professional Code of Conduct Violations. Standing (non-voting) members of the SPAIS include the Administrator responsible for Student Affairs (also the Chair of this Subcommittee), the Administrator responsible for Academic Affairs, and the Administrator responsible for Professionalism. Voting members include four (4) full-time Faculty members elected bi-annually by the Faculty Senate and seven student members (one student elected annually from each DS and ISP class and the President of the Student Professionalism and Ethics Association in Dentistry). Voting Faculty members may serve consecutive terms and voting Student members may serve up to four consecutive annual terms.

#### **XI. ACADEMIC HONOR CODE**

Academic integrity involves honesty in all matters that relate to an academic environment. A university's reputation is built on a standing tradition of excellence and scholastic integrity. As members of the University of Colorado School of Dental Medicine academic community, faculty and students accept the responsibility to maintain and uphold the highest standards of intellectual honesty and ethical conduct in completing all forms of academic work. Honesty, integrity and ethical conduct are essential in the education of the future members of the dental profession, that is granted the privilege and responsibility of self-regulation. Self-regulation of the academic process is an important part of the education of a future dental professional. The dedication of the University of Colorado School of Dental Medicine to professionalism is reflected in our **Student Dentist Professional Vow** as follows:

*"As a student dentist at the University of Colorado School of Dental Medicine, I vow to make a personal commitment to academic integrity, my education, my patients, my colleagues, and my profession. I vow to strive for excellence in the diagnosis, the management, and the treatment of my patients.*

*I will uphold the Academic Honor Code at all times, and neither receive nor give unauthorized assistance from or to my fellow student dentists in the classroom, clinics and laboratories. I shall avoid the temptation toward unethical behavior, thus, making a personal commitment to integrity, honesty and ethics.*

*I will uphold the dress code by presenting myself in a professional and respectful appearance at all times during my educational experience, during patient care, and at professional meetings and gatherings.*

*I pledge excellence in the care of my patients. I will make a commitment to my academic opportunities and to advance my knowledge with self-study, thus enhancing my diagnostic abilities, treatment planning methods and the expert execution of my patient treatment in providing outstanding care to the best of my given ability.*

*I take this vow seriously and without any mental reservation - pride in myself, pride in my profession and pride in my school.  
Go CU!"*

## **A. Faculty Responsibility**

It is the ethical responsibility of the Faculty to abide by and promote the principles espoused by the Academic Honor Code. The Faculty will take whatever steps are necessary to discourage academic dishonesty and cheating. Faculty have an obligation to report any observed or reported incidents of academic dishonesty.

## **B. Student Responsibility**

It is the ethical responsibility of the student to abide by and promote the principles espoused by the Academic Honor Code. The student will not engage in any form of academic dishonesty, cheating and/or any other violations of the Academic Honor Code.

## **C. Conduct Standards**

Conduct standards do not allow any form of academic dishonesty or cheating by students. Academic dishonesty is defined as the intentional participation in deceptive practices that relate to one's academic work, or that of another. Whereas, cheating is defined as the use of unauthorized assistance in an academic activity. Any form of academic dishonesty and/or cheating represents a violation of required conduct standards and of the Academic Honor Code.

Conduct standards also apply to all test- and quiz-taking behaviors that include, but are not limited to, the following: all cellphones, watches, and other electronic devices (unless authorized by the instructor as required for successful completion of the exam/quiz) must be placed on the side of the room; all backpacks, books, papers and written material must be placed on the side of the room; no water bottles or other liquid containers are allowed (unless completely symmetrical and without markings); no talking with other students is allowed; no looking at other students computers or exams/answer sheets is allowed; no leaving the test/quiz-home screen to access other information when taking a computer-based test/quiz; no restroom breaks are allowed unless exam/computer and cellphone is given to instructor/proctor prior to going to the restroom; and hands should always be visible and located above the desktop while testing is taking place. Students will sit in assigned seats when a seating chart is utilized and the use of a randomized and newly generated seating chart is recommended for all major examinations. Students are not allowed to use past exams unless officially released by the course instructor. The student also willingly accepts the use of technology tools to ensure academic integrity in the classroom. A violation of any of these specific test- and quiz-taking behaviors represents a violation of the Academic Honor Code.

In all courses (including both didactic and laboratory) where class attendance is a mandatory requirement, student conduct standards do not allow for the use of any method to falsify actual attendance and students will remain in the classroom/lab for the entire duration of the class when required. The falsification of actual class attendance and the failure of the student to remain in the classroom/lab for the entire duration of the class when required both represent a violation of the Academic Honor Code.

Other examples of academic dishonesty/cheating that constitute a violation of the Academic Honor Code include, but are not limited to, the following:

### **1. Cheating**

Cheating involves the possession, communication, or use of information, materials, notes, study aids, or other devices not authorized by the instructor in any academic exercise, or communication with another person during such an exercise.



## **2. Misuse of Academic Materials and Facilities**

Examples of misuse of academic materials and facilities include, but are not limited to: stealing or destroying library or reference materials, computer programs, dental supplies or equipment, another student's notes or materials, or having such materials in one's possession without the owner's permission; receiving assistance in locating or using sources of information in an assignment when such assistance has been forbidden by the instructor; unauthorized possession, copying, disposition, or use of examinations or answer keys to examinations; unauthorized alteration, forgery, or falsification of academic records; unauthorized sale or purchase of examinations, papers, assignments, or dental supplies or equipment; sharing/disclosing one's computer/login credentials, and the abuse of, or causing damage to, academic materials and/or facilities of the institution. Misuse of clinical facilities also includes inappropriate patient scheduling behaviors and false entries in the electronic health record (EHR) (axiUm).

## **3. Inappropriate Patient Care Activities**

Patient care activities by students without School of Dental Medicine faculty supervision are strictly prohibited. For purposes of this section of the Academic Honor Code, patient care activities by students shall include all of those activities that constitute the practice of dentistry in the State of Colorado as defined by Section 12-35-113 of the Dental Practice Act of Colorado. Examples of inappropriate patient care activities include, but are not limited to: patient care activities by students without approval and supervision by faculty; patient care outside of regularly scheduled School of Dental Medicine clinic hours including, but not limited to, nights and weekends without approval and supervision of faculty; patient care at any off campus site unless such activities and sites are approved as part of a recognized School of Dental Medicine course or activity (unsupervised patient care at these sites is prohibited); and the appointing of any patient of the School of Dental Medicine at any off campus site that is not recognized as an extension of the School of Dental Medicine.

The illegal practice of dentistry is a violation of Colorado Law. At the discretion of the Dean, individuals found in violation of this section of the Code may be reported to the Colorado Board of Dentistry.

## **4. Integrity in the Laboratory**

All laboratory projects submitted for credit must be the work of only the student submitting the project unless otherwise specifically authorized by the course director. No assistance on the project from other students is allowed unless specifically authorized by the course director. All assigned laboratory projects submitted for course credit represent the intellectual and academic property of the submitting student, are not to be shared with other students, and in this regard should be considered with the same safeguards given to other testing projects (examinations/quizzes).

## **5. Complicity in Academic Dishonesty**

Complicity involves knowingly contributing to another's act of academic dishonesty. Examples of complicity include, but are not limited to: signing an attendance roster on behalf of another student; sending a password to a fellow student so the student can take an exam/quiz at a remote (out of the classroom) location; taking a test or quiz for another student; and allowing another student access to any portion of a student's work.

## **6. Fabrication and Falsification**

Fabrication involves inventing or counterfeiting information, i.e., creating results or work not obtained in a study or laboratory project. Falsification, on the other hand, involves the deliberate alteration or changing of results and information to suit one's needs in an experiment, patient record or other academic and clinical activity.

## **7. Plagiarism**

Plagiarism is the use (word-for-word copying or paraphrasing) of another person's distinctive ideas or words without acknowledging the original source.

## **8. Impairment**

Displaying an inability or becoming unable to perform academically and/or engage in patient care activities with reasonable skill and safety to patients by reason of use of alcohol, drugs, narcotics, chemicals, or any other type of substance, or as a result of any mental or physical condition, or by reason of displaying habitual intoxication, addiction to, or recurrent personal misuse of alcohol, drugs, narcotics, chemicals, or any other type of similar substance(s) as outlined in the Student/Resident Impairment Policy (CUSDM Policy and Procedure Manual).

## **9. Compliance**

Failure to safeguard confidentiality of patient records in accordance with the Health Insurance Portability and Accountability Act (HIPAA) Guidelines and other applicable regulations.

Failure to abide by Federal Regulations and Institutional Policies regarding human subjects and/or animal research.

## **10. Protection of Academic Integrity**

The use of pressure, threat, abuse, or similar practices against any person involved, with intention to inhibit or prevent the reporting, investigation, or hearing of an alleged violation of this Academic Honor Code. Moreover, threatening, intimidating, retaliating, or bullying or other similar practices can be construed as menacing or battery under Colorado law, depending on the circumstances. Allegations of such behavior will be investigated, and if appropriate, law enforcement officials will be notified.

## **11. Reporting of Violations**

Failure to report observed violations of the Academic Honor Code.

## **12. Withholding of Evidence**

The withholding of evidence pertinent to any case under investigation, or being heard, or the giving of false evidence during an investigation or hearing.

The Academic Honor Code shall be available to those applying for admission. Prior to entering the School of Dental Medicine, all entry-level and advanced standing (International Student Program) students must provide a signed attestation form stating they have read the Academic Honor Code, fully understand its contents and they will abide by the rules and procedures of the Academic Honor Code. This signed document will be placed in the student's official school file to certify their commitment to the Academic Honor Code.

Upon entering the School of Dental Medicine, each student will individually sign a collective class Academic Honor Code attestation form to be displayed as a single framed document in the Educational Building. Course directors will also include the following statement in examinations, "I attest that the work I am submitting with this exam meets all Academic Honor Code rules and principles and is solely my own."

# ***XII. STUDENT PROFESSIONAL CODE OF CONDUCT***

## **B. Expected Student Professional Conduct**

This policy outlines the Student Professional Code of Conduct for students enrolled at the University of Colorado School of Dental Medicine (SDM) and defines the professional conduct expected within both the educational and community settings. This code of conduct shall apply to behavior that occurs on campus, at school-sponsored programs or activities, and to off-campus behavior that adversely affects the school/university community, poses a threat to the safety of persons or property, or damages the school's reputation or relationship with the greater community. In addition, the SDM may make a formal judgement regarding student violations of laws and ordinances designed to protect civility and quality of life.

Article 7, Part B, of the Laws of the Regents requires each campus to develop a student code of conduct. Within the School of Dental Medicine, the Student Professionalism and Academic Integrity Subcommittee is responsible

for the enforcement and investigation of any reported violations of this code by the process described in the "Discipline Policies for Suspected Academic Honor Code and/or Student Professional Code of Conduct Violations" section.

Violations will be reported in writing to the Associate Dean for Academic Affairs within fifteen (15) working days of the violation becoming known to the complainant. Failure to report a suspected violation of a student professional code of conduct represents a violation of this code.

As an integral part of the University of Colorado Anschutz Medical Campus, the SDM mission is to provide programs of excellence in teaching, research, patient care, as well as community and professional service. Fulfillment of this mission creates a varied set of professional roles and responsibilities for all SDM students that embraces demonstrating respect for, and sensitivity to all aspects of diversity including age, culture, ability, ethnicity, race, gender, language, political beliefs, religious and spiritual beliefs, veteran status, gender identity, sexual orientation, and socioeconomic status.

Students in the SDM are considered as members of the dental profession and this profession demands a high level of skill, knowledge, judgment, compassion and civil behavior that all include professionalism as a core value. The clinical professional responsibilities of dental students are well defined by the American Dental Association (ADA) by a set of guiding principles, including, but not limited to: Patient Autonomy, Nonmaleficence, Beneficence, Justice, and Veracity. Furthermore, students are expected to develop professional values as a component of their dental education as identified by the American Dental Education Association including: Competence, Fairness, Integrity, Responsibility, Respect, and Service-mindedness. The SDM places the highest priority on these professional principles and values the daily demonstration of their importance to patient care, our interactions with patients and with each other, and to learning.

As members of our academic community, students are expected to exhibit the characteristics of good academic and institutional citizenship. This includes developing and maintaining a high level of scientific and clinical competence and a demonstrated dedication to life-long learning. It is essential that all adhere to the highest standards of academic honesty and integrity. Truthfulness and accuracy in all scientific writing, documentation in the dental record, and reporting conflicts of interest are essential characteristics of good citizenship.

### **C. Professional Responsibilities and Accountability**

Consistent with the principles outlined above, all SDM students are expected to meet the following guidelines:

1. Demonstrate behaviors that convey compassion, respect, empathy, caring and tolerance in all interactions with students, patients and families, professional colleagues, teachers and staff, while always placing the patient's best interests first.
2. Demonstrate accountability to patients, families, fellow students, faculty, professional colleagues and society by maintaining scientific, clinical and educational competence appropriate to one's role as a student dentist.
3. Provide, accept and respond appropriately to constructive feedback and evaluations, in order to provide high quality clinical care and educational excellence. An appropriate response to constructive feedback should result in a positive outcome for all concerned individuals and the SDM resolves the concern through understanding and/or modification of behavior.
4. Recognize and respond appropriately to behavior by others that is disrespectful, disruptive or unprofessional.
5. Demonstrate sensitivity and respect for students, faculty, staff, co-workers' and patients' ethnic, racial and cultural differences.
6. Demonstrate professionalism through appropriate dress, grooming, language and behavior.
7. Maintain appropriate confidentiality.
8. Recognize the need to undergo required background checks and drug testing.
9. Demonstrate total commitment to all educational opportunities as a student including attendance at all classes.

#### **D. Additional Professional Responsibilities as a Member of a Health Care Community**

1. Make the health and well-being of patients the first consideration.
2. Serve humanity without bias.
3. Ensure that the dignity of all will not be subordinated to monetary, scientific or political ends.
4. Recognize that the responsibility to the community, to promote its welfare and to speak out against injustice.
5. Promote the integrity of the profession of Dentistry with honest and respectful relations with other health professionals.

#### **E. Unprofessional Behavior is Not Tolerated**

Unprofessional behaviors have no place in any educational, learning, research or patient care environment and will not be tolerated. Within the healthcare environment, unprofessional and disruptive behaviors interfere not only with learning, but also with communication and trust among health care team members and the overall workplace and educational environment; thus, such behaviors threaten healthcare quality and patient safety.

Unprofessional behaviors include:

1. Disruptive behaviors;

Examples of disruptive behaviors include but are not limited to:

Verbal attacks or outbursts; profane language; bullying; throwing or breaking things; boundary violations; behaviors that negatively affect the workplace; comments that are personal, rude, disrespectful, threatening or belittling; insulting or insensitive comments, jokes or behaviors directed toward students, colleagues or co-workers age, culture, disabilities, ethnicity, race gender, language, political beliefs, physical appearance, religious or spiritual beliefs, sexual orientation or socioeconomic status also will not be tolerated.

2. Actions, words or behaviors that a learner, colleague, co-worker or patient would reasonably consider to be humiliating or demeaning;
3. Passive disrespect (including dismissive treatment of others);
4. Any form of academic dishonesty as outlined in the Academic Honor Code;
5. Discrimination against any learner, patient, co-worker or other individual on political grounds or for reasons of race, ethnicity, religion, gender, sexual orientation, veteran status, or any other illegal or arbitrary reasons;
6. Possessing, using, providing, manufacturing, distributing, or selling drugs or drug paraphernalia in violation of state or federal law or University policies, and that all students enrolled in SDM academic programs be free of impairment caused by drugs or alcohol upon admission and throughout their program as outlined in the Student/Resident Impairment Policy (CUSDM Policy and Procedure Manual);
7. Sexual misconduct (including sexual assault, sexual harassment, intimate partner violence, and gender/sex-based stalking). An alleged incident of sexual misconduct will be referred to the Office of Equity for investigation. Information on the University's Sexual Misconduct & Title IX resolution process, resources and policies are available at the University's Office of Equity Website. All students are required to complete Title IX Training as mandated by the School of Dental Medicine Title IX Representative.

#### **F. Professional Code of Conduct Extends Beyond the Educational Setting**

As members of Anschutz Medical Campus community, students are expected to uphold university standards, which include abiding by state, civil, and criminal laws and all university laws, policies, and standards of conduct. The University adheres to all appropriate local, state and federal laws and to dentistry licensing agency rules and regulations. It cooperates with law enforcement and other officials in all matters. Any alleged violation of local, state or federal laws will be referred to the appropriate law enforcement agency. Students who engage in behavior that conflicts with established standards, laws, policies, and guidelines may be referred to the Student Professionalism and Academic Integrity Subcommittee for investigation.

A student must notify the Associate Dean for Academic Affairs, within seven (7) calendar days, of the filing of any legal charges or proceedings and the disposition of such proceedings, wherein it is alleged that a student has violated any criminal law, including but not limited to "driving under the influence" and "driving while ability impaired". Convictions, including a guilty verdict, a plea of guilty or nolo contendere accepted by the court, or a deferred judgment or sentence, for violation of local, state, or federal criminal laws shall be considered unprofessional conduct for purposes of this code. The discipline process can be initiated by a report from any student, faculty, staff, or other member of the university/campus community, or from police or court reports. This process is initiated through the submission of a written report to the Associate Dean for Academic Affairs. Proceedings initiated under this Student Professional Code of Conduct are separate from civil or criminal proceedings that may relate to the same incident. Investigations or proceedings by the SDM are not postponed while criminal or civil proceedings are pending unless otherwise determined by the Associate Dean for Academic Affairs.

### ***XIII. DISCIPLINE POLICIES FOR SUSPECTED ACADEMIC HONOR CODE AND/OR STUDENT PROFESSIONAL CODE OF CONDUCT VIOLATIONS***

All matters of academic policy, including academic dishonesty, are under the jurisdiction of the Chancellor or designee (Dean of the School of Dental Medicine) pursuant to Article 7.B.4 and Article 7.B.5 of the University of Colorado Regent Laws. Accordingly, the School of Dental Medicine has established procedures for the reporting and investigation of possible violations of the Academic Honor Code and/or the Student Professional Code of Conduct and for determining the severity and consequences of each infraction when a violation has been identified. Hereafter, a violation of either one or both of these codes shall be referred to as a "Code" violation. A potential violation of the Academic Honor Code shall be considered an "academic integrity" issue whereas a potential violation of the Student Professional Code shall be considered a "professionalism" issue.

#### **A. Report of Code Violations**

There are two different mechanisms to report a possible code violation. The first is the reporting of an academic integrity and/or professionalism **concern** and the second is the filing of an academic integrity and/or professionalism official **complaint**. Both of these mechanisms fulfill the requirement to report any suspected code violation as mandated in the Academic Honor Code and the Student Professional Code of Conduct. Each mechanism is described below

#### **B. Reporting of a Confidential Academic Integrity and/or Professionalism Concern**

Student, faculty and/or staff member(s) will file an academic integrity and/or professionalism concern in writing with the Director of Student Affairs & Professionalism. This concern will describe the place, date, time, and a description of the incident. The course is listed if the incident occurred in the context of a specific class. The person filing the concern will then meet with the Director of Student Affairs & Professionalism to discuss the concern further. If deemed necessary, the Director of Student Affairs & Professionalism will meet with the student named in the concern for academic integrity and/or professionalism advisement. The name of the person filing the concern remains confidential to the student named in the concern and is only known to the Director of the Student Affairs & Professionalism. This mechanism may also be used to file a concern regarding the unauthorized possession of previous examinations. In this case, the Director of Student Affairs & Professionalism will contact the course director to inform them of this situation.

In all matters filed as a concern, the Director of Student Affairs & Professionalism has the discretion to determine whether an issue must be referred to another office for investigation (i.e., Office of Equity) under University policy or is so serious and/or impacts patient safety that it must be investigated and treated as a Complaint under this policy. In circumstances where the Director is required to report or refer as a complaint, he/she may not be able to maintain confidentiality. Depending on the allegation, the Dean may immediately suspend a student until appropriate follow-up has occurred.

In the situation where multiple concerns involving the same student are submitted to the Director of Student Affairs & Professionalism, he/she has the option to send a letter to the Associate Dean for Academic Affairs. This letter will name the student and the different incidences representing each filed concern, but will not name the

individuals submitting concerns. The Associate Dean for Academic Affairs and Assistant Dean for Student Affairs will then meet to review the letter and shall decide if they should meet with the student to address the concerns. The Director of Student Affairs & Professionalism also has the option to meet individually with each person filing a concern involving the same student to discuss the option of filing a group (multi-person) formal complaint. All records associated with the filing of a concern will be destroyed at the time of graduation or at the time the student withdraws from the program and will not become part of the student's official record.

### **C. Reporting of an Academic Integrity and/or Professionalism Official Complaint**

Student, faculty and/or staff member(s) (the complainant) shall report in writing, a suspected academic integrity and/or professionalism code violation complaint, to the Associate Dean for Academic Affairs, whenever possible, within fifteen (15) working days upon observing or learning of the alleged violation. The 15 working day reporting period may be waived by the Associate Dean for Academic Affairs if, in his/her judgment, circumstances warrant. Failure to report a violation is also deemed a Code violation.

The Associate Dean for Academic Affairs and the Assistant Dean for Student Affairs will meet with the alleged violator(s) and advise the student(s) in writing that a complaint has been received. At that time, the Assistant Dean for Student Affairs will ask the accused student(s) for a plea of not guilty, guilty or no contest. Every alleged violator must enter an individual written plea to all charges at this time. If pleas change prior to any scheduled hearing, the Assistant Dean for Student Affairs must be informed of the change in writing. If the accused student admits to a violation by entering a plea of guilty or no contest, the student will be notified that the Student Professionalism and Academic Integrity Subcommittee (SPAIS) will form a Hearing Commission that will meet to devise and implement a disciplinary action as described below. Depending on the allegation, the Associate Dean for Academic Affairs and the Assistant Dean for Student Affairs, with the Dean's approval, may immediately suspend a student until appropriate follow-up has occurred.

### **D. Investigation of a Complaint**

If the accused student(s) denies the allegation(s) and enters a plea of not guilty, an investigation will be conducted by the Associate Dean for Academic Affairs and the Assistant Dean for Student Affairs to evaluate the evidence against the student(s). The investigation of the alleged incident will typically occur within seven (7) working days from the date the Assistant Dean for Student Affairs receives written notification of the plea. An extension of the 7-day limit may be granted by the Dean. If this investigation determines there is sufficient evidence to indicate that a violation may have occurred, the Student Professionalism and Academic Integrity Subcommittee will form a Hearing Commission to conduct a Hearing to investigate the complaint.

If the decision is that insufficient evidence exists to proceed to a Hearing, the accused student(s) and the person who filed the allegations may be required to meet together with the Associate Dean for Academic Affairs and the Assistant Dean for Student Affairs. The intent of this meeting will be to candidly discuss the allegation(s) and provide an opportunity to mediate any differences if appropriate. For example, it might not be appropriate in allegations of sexual misconduct for such a meeting to occur.

### **E. Hearing Commission**

The Hearing Commission is composed of members selected from the Student Professionalism and Academic Integrity Subcommittee and other Faculty member(s) as described below and is responsible for conducting the Hearing. Hearing Commission members consist of: Assistant Dean for Student Affairs (shall act as the Chair and as a non-voting member of this Commission), the Associate Dean for Academic Affairs (shall act as the Representative of the School and as a non-voting member of this Commission), four voting Faculty members and four voting student members.

The four voting Faculty members selected for the Hearing Commission shall include the President of the Faculty Senate and three other Faculty members selected by the Chair from Faculty members of the Student Professionalism and Academic Integrity Subcommittee (SPAIS). In the situation where the potential violation involves a specific course, the Faculty representation on the Hearing Commission cannot include any Faculty acting as course director(s)/instructor(s) in the class where the violation is being investigated due to conflict of

interest. If adequate numbers of Faculty are not available from the SPAIS as replacement members, then additional Hearing Commission members will be selected from the Faculty by the Chair of the Hearing Commission.

The four voting student members selected for the Hearing Commission shall be selected on a case-by-case basis according to the following criteria; DS3, DS4, ISP1 and ISP2 student members when the accused student is an ISP student, or DS1, DS2, DS3 and DS4 student members when the accused student is a DS student. The Chair of the Hearing Commission will appoint a substitute if a conflict exists. The substitute can be selected by the Chair from other student members of SPAIS or the general student body as needed.

The Chair of the Hearing Commission is designated to conduct the Hearing and oversee the proper conduct of the Hearing. The Assistant Dean for Student Affairs will serve in this role unless this person is the complainant or if the alleged violation occurred in a course where this person is the director/instructor. The Dean will appoint a substitute if a conflict exists.

The Associate Dean for Academic Affairs will act as the Representative of the School and in this capacity will present the facts to the Hearing Commission and is permitted to question the accused student(s), the complainant(s), and any witnesses presented by this individual. The Associate Dean for Academic Affairs will serve in this role unless this person is the complainant or if the alleged violation occurred in a course where this person is the director/instructor. The Dean will appoint a substitute if a conflict exists.

The Chair shall evaluate the list of all Hearing Commission members for potential conflicts of interest. If a conflict of interest is believed to exist, the proposed Hearing Commission member shall be withdrawn and a new member will fill the position. This process ensures that the selection of any Hearing Commission members shall not jeopardize the right to a fair and impartial Hearing. The final Hearing Commission with voting rights will consist of four Faculty and four student members; eight total members.

Alleged violator(s). This person(s) has the right to:

1. Be accompanied by an advisor of the student's choice who is a faculty member, an administrator, or student at the School of Dental Medicine. The advisor may not directly question either witnesses or members of the Hearing Commission or participate directly in the Hearing;
2. Question the Representative of the School's witnesses;
3. Present witnesses who have pertinent testimony;
4. Expect a decision based solely on evidence presented;
5. Be provided a written notification of the outcome of the case.

The Representative of the School and the accused student must provide the Chair of the Hearing Commission with a complete list of witnesses at least 72 hours in advance of a scheduled Hearing. The Chair will then provide the Representative and the accused student a complete list of the witnesses at least 48 hours in advance of a scheduled Hearing. It is the responsibility of the Representative and accused student to notify their corresponding witnesses of the Hearing date and time, and that they attend the Hearing.

If either the accused student(s) or the Representative introduces additional witnesses at the time of the Hearing, it will be left to the discretion of the Chair of the Hearing Commission as to the relevance of their testimony and to their participation in the Hearing. If a witness or witnesses fail to attend the Hearing, it will be left to the discretion of the Chair of the Hearing Commission as to whether the Hearing will proceed, or will be re-convened at a later date. If the accused student fails to appear at the Hearing, the Commission may make its decision based on the information/testimony presented.

## **F. Complaint Hearing Process and Procedures**

Attendance in the Hearing room may be limited to: members of the Hearing Commission, the alleged violator, the alleged violator's advisor, and witnesses during the time of their testimony only, and officials of the University of Colorado. The Chair of the Hearing Commission will rule on the presence of any other individuals who wish to attend the Hearing recognizing the limits of federal student privacy law.

1. Only evidence pertinent to the specific allegation(s) may be considered. Knowledge of prior violations may not be made known or considered in determining whether the accused student engaged in the acts alleged. Pertinent evidence may refer to new findings and allegations arising as a result of the investigation process.

2. Separate Hearings will be conducted in most cases if there is more than one alleged violator.

3. Technical rules of evidence applicable to civil and criminal cases shall not apply to the Hearing. A single verbatim record of the Hearing shall be made by audiotape or digital recorder, and shall remain the property of the School of Dental Medicine.

4. The Hearing Commission Chair will read aloud the "Chair's Summary Statement" and provide information pertinent to the specific Hearing. This document states that the proceedings will be recorded and introduces the Hearing Commission members, the accused, and the accused's advisor and outlines the function of the Chair, presents the order of events which will occur at the Hearing, specifies how the evidence is to be evaluated, and states the criteria the Hearing Commission members are to utilize in reaching their decision.

5. The Hearing Commission Chair will read the allegation(s) to the alleged violator and request the alleged violator's plea.

6. The Representative of the School will present the case against the alleged violator. The alleged violator will present the defense.

7. Witnesses may be recalled for clarification of testimony or to give further testimony.

8. The Hearing Commission will consider the evidence in executive session. If it is necessary to recall a witness for clarification after the Hearing Commission adjourns into executive session, the School's Representative, the alleged violator, the alleged violator's advisor shall be present and all except the alleged violator's advisor have the right to question the witness regarding the witness's clarifying statements.

9. Nothing shall prevent an accused student from pleading guilty or no contest to any alleged Code violation(s) and waiving the right to a full Hearing on the charges. All pleas of guilty and waivers of Hearing must be presented to the Chair of the Hearing Commission in writing. In the case of a plea of guilty or no contest, evidence related to the facts of the violation will not be presented and the Hearing Commission's sole responsibility will be to determine an appropriate disciplinary action.

## **G. Complaint Hearing Outcome**

A simple majority vote of the Hearing Commission voting members is required to find a student guilty of a Code violation. In the deliberations of the Hearing Commission, all voting members are required to vote.

In the event a student is found guilty of a Code violation or admits to a Code violation, the disciplinary action(s) as determined by the Hearing Commission will be implemented. The Hearing Chair will read the list of Disciplinary Actions from which the Hearing Commission members are to select their actions. Before the Hearing Commission begins deliberations to formulate the appropriate actions, the Representative of the School will inform the Hearing Commission of any previous violations on the record of the accused student. The Representative will also provide the Hearing Commission with a suggested disciplinary action. A simple majority vote is required for implementation of an action or actions and all Hearing Commission voting members are required to vote.



The student shall be notified in writing of the Hearing Commission's findings and determinations by certified mail, return receipt requested.

## **H. Disciplinary Actions**

The following are possible disciplinary actions that can be implemented by the Hearing Commission through regular case disposition procedures. These penalties are not all-inclusive and may be modified depending on the nature of the violation or violations.

### **1. Administrative Probation**

An official warning that the student's conduct represents a Code violation but is not sufficiently serious to warrant dismissal or suspension. This type of probation does not carry concurrent restrictions. Continued enrollment depends on maintaining satisfactory conduct during probation. The University will not furnish a favorable recommendation during probation. It shall be imposed for a specified period of time during which any other additional Code violations will result in more severe disciplinary actions.

### **2. Administrative Probation with Restrictions**

This action is a warning that the student's behavior is unacceptable and includes other sanctions, which do not require an interruption or termination of the student's enrollment. Probation shall be imposed for a specified period of time during which any other Code violations will result in more severe disciplinary actions. A favorable recommendation will not be furnished by the University during probation. In addition to the sanctions, the student may be required to engage in ongoing meetings to monitor their progress and/or be evaluated by Peer Assistance Services and follow any recommendation made therein. Sanctions, which may be imposed as restrictions, shall include but not be limited to:

- A. Loss of scholarship and educational loan awards from funds under the direct control of the University of Colorado or the School of Dental Medicine (federal aid programs are not included in this provision);
- B. Loss of credit for any test, paper, report, essay, laboratory project, or clinical procedure involved in the violations;
- C. A failing grade for the course(s) in which the violation(s) occurred;
- D. Restitution for damages or replacement of property;
- E. Loss of the privilege of representing the School of Dental Medicine in any official capacity or loss of the privilege of representing the student body of the School of Dental Medicine in any official capacity;
- F. Suspension of clinical privileges, including ACTS, for a period of time to be determined by the Hearing Commission. The student will remain enrolled in the curriculum and participate in all activities, except those involving direct patient care. Appropriate measures to ensure continuity of patient care must be an integral portion of any such disciplinary recommendation;
- G. Other sanctions as deemed appropriate.

### **3. Suspension**

This action terminates the enrollment of a student in the School of Dental Medicine for a specified period of time. Participation in courses and School of Dental Medicine activities is prohibited during the suspension period. A suspension will usually require the reassignment of the student's patient population. At the end of the suspension period, re-enrollment may require a period of skills assessment and redevelopment as a student in the School of Dental Medicine and new patients will be assigned.

#### **4. Dismissal**

The permanent denial of the individual's privileges to attend the School of Dental Medicine.

#### **5. Combination of Penalties**

Nothing shall prevent a student from receiving a combination of penalties, such as a suspension for a specified time, to be followed by a period of probation, which could also include restrictions.

#### **12. Appeal**

1. A student may appeal the findings and determination of the Hearing Commission to the Dean by submitting a written request within five (5) working days of the student's receipt of the Hearing Commission's decision. The request must state the basis for the appeal. The authority for final action by the School of Dental Medicine in all cases rests with the Dean. Upon receipt of a written appeal, the Dean will review the Hearing Commission's findings and determinations to decide whether:

- A. The student was accorded due process;
- B. The facts of the case support the findings of the Hearing Commission;
- C. Recommendations for disciplinary action, if any, are appropriate.

2. At the conclusion of the review, the Dean may:

- A. Approve and implement the findings and determinations of the Hearing Commission;
- B. Amend and implement the findings and determinations of the Hearing Commission; or
- C. Send the case back to the Hearing Commission for further review and consideration.

3. The student shall be notified in writing of the Dean's decision by certified mail, return receipt requested. The decision of the Dean is final, and there shall be no further appeal.

#### **6. Records**

All records pertaining to the case shall then be retained in the office of the Associate Dean for Academic Affairs for five years after final disposition of these matters. If a student is dismissed or suspended, the records shall be maintained in the student's permanent file in the School of Dental Medicine.

#### **7. Review and Revision**

1. The Student Professionalism and Academic Integrity Subcommittee will evaluate and revise the Academic Honor Code, Student Professional Code of Conduct and the Discipline Policies for Suspected Academic

Honor Code and/or Student Professional Code of Conduct Violations as needed.

2. All revisions must be approved by a vote of the Faculty Senate.

3. The current Academic Honor Code, Student Professional Code of Conduct and the Discipline Policies for Suspected Academic Honor Code and/or Student Professional Code of Conduct Violations will be in effect until such time the revisions are approved by the Faculty Senate.

## Professional Code of Conduct

### University of Colorado School of Dental Medicine Professional Code of Conduct

#### *Expected Faculty, Student, Resident and Staff Conduct*

The faculty, students and staff of the University of Colorado School of Dental Medicine (SDM) are members of the professions of dentistry and dental education that demand a high level of skill, knowledge, judgment, compassion and civil behavior.

As an integral part of the University of Colorado Anschutz Medical Campus, our mission is to provide programs of excellence in teaching, research, patient care, as well as community and professional service. Fulfillment of this mission creates a varied set of professional roles and responsibilities for all faculty, students, residents and staff within the SDM.

As clinicians, educators and learners, we have an intersection of professional responsibilities that are best defined by the professions we serve. As members of a clinical profession our clinical responsibilities are defined by the American Dental Association (ADA) as a set of guiding principles; and as educators and learners we embrace the values established by the American Dental Education Association (ADEA).

The ADA guiding principles of: Patient Autonomy, Nonmaleficence, Beneficence, Justice, and Veracity define who we are as both the clinicians and researchers of today and tomorrow.

The ADEA Values of: Competence, Fairness, Integrity, Responsibility, Respect, and Service-mindedness remind us of what we should value as teachers and learners.

The School of Dental Medicine therefore places the highest priority on these professional principles and values and the daily demonstration of their importance to us during patient care, teaching, our interactions with each other, and learning.

At all times faculty, students, residents and staff will demonstrate respect for, and sensitivity to all aspects of diversity including: age, culture, ability, ethnicity, race, gender, language, political beliefs, religious and spiritual beliefs, veteran status, gender identity, sexual orientation and socioeconomic status.

In all interactions with patients and their care givers, faculty, students, residents and staff are expected to adhere to the ideals of the profession of dentistry. These include but are not limited to those guiding principles of the American Dental Association of: Patient Autonomy, Nonmaleficence, Beneficence, Justice, and Veracity.

Teaching, mentoring, learning and working in a health care environment are all special privileges. It is implicit that being a good teacher, mentor, and employee includes modeling professional conduct for all learners, staff, colleagues and patients and their families. As learning is occurring in a patient care setting, the learners are also expected to demonstrate developing professional values. Together the professional expectations of teachers, mentors, learners and employees are best reflected by those professional values of dental education set for by ADEA of: Competence, Fairness, Integrity, Responsibility, Respect, and Service-mindedness. This unique learning environment demands an active engagement in the teaching, mentoring and learning process that includes humility, effective listening and respectful and timely feedback.

All members of our academic community are expected to exhibit the characteristics of good academic and institutional citizenship. This includes developing and maintaining a high level of scientific and clinical competence and a demonstrated dedication to life-long learning. It is essential that all adhere to the highest standards of academic honesty and integrity. Truthfulness and accuracy in all scientific writing, documentation in the dental record, and reporting conflicts of interest are essential characteristics of good citizenship.

**Consistent with the principles outlined above, all SDM faculty, students, residents, and staff members are expected to:**

***Professional Responsibilities and Accountability***

Demonstrate behaviors that convey compassion, respect, empathy, caring and tolerance in all interactions with learners, patients and families, professional colleagues, teachers and staff.  
Uphold the primacy of patient welfare, always placing the patient's best interests first.

Demonstrate accountability to patients, families, learners, faculty, professional colleagues and society by maintaining scientific, clinical and educational competence appropriate to one's role as a faculty member.

Provide, accept and respond appropriately to constructive feedback and evaluations, in order to provide high quality clinical care and educational excellence. An appropriate response to constructive feedback should result in a positive outcome for all concerned individuals and the SDM that resolves the concern through understanding and/or modification of behavior.

Recognize and respond appropriately to behavior by others that is disrespectful, disruptive or unprofessional.

Demonstrate sensitivity and respect for learners, faculty, staff, co-workers' and patients' ethnic, racial and cultural differences.

Demonstrate professionalism through appropriate dress, grooming, language and behavior.  
Maintain appropriate confidentiality.

***Additional Professional Responsibilities for Faculty***

Appropriately prepare for, and actively engage in, all assigned teaching and mentoring responsibilities.

Treat all learners with understanding, dignity, respect and tolerance.

Evaluate learners equitably and fairly, using only criteria that reflect the learner's performance, as measured by standards applied uniformly to all learners in the course or other learning activity, except where differentiation is required or permitted in the case of students with disabilities.

***Additional Professional Responsibilities as a Member of the Academic Community***

Evaluate the performance of others equitably and fairly, and without prejudice, harassment or intimidation, ensuring that such evaluations are based solely on criteria that reflect professional competence.  
Uphold the principles of academic honesty, including truthfulness and accuracy in medical and scientific research and writing.

Uphold the principles of academic honesty in the learning environment including no tolerance for cheating, plagiarism and the inappropriate use of electronic devices in the learning and testing environment.

Understand and comply with University, School of Dental Medicine, and other policies governing conflicts-of-interest, performance reviews, credentialing and other matters.

Recognize and manage conflicts-of-interest.

### ***Additional Professional Responsibilities as a Member of a Health Care Community***

Serve humanity without bias.

Make the health and well-being of patients the first consideration.

Ensure that the dignity of all will not be subordinated to monetary, scientific or political ends.

Recognize that the responsibility to the community, to promote its welfare and to speak out against injustice.

Promote the integrity of the profession of Dentistry with honest and respectful relations with other health professionals.

### ***Unacceptable Conduct***

Unprofessional behaviors have no place in any educational, learning, research, administrative or patient care environment and will not be tolerated. Within the healthcare environment, unprofessional and disruptive behaviors interfere not only with learning, but also with communication and trust among health care team members and the overall workplace and educational environment; thus, such behaviors threaten healthcare quality and patient safety.

Unprofessional behaviors include:

- Disruptive behaviors;  
Examples of disruptive behaviors are but not limited to:
  - Verbal attacks or outbursts;
  - profane language;
  - bullying;
  - throwing or breaking things;
  - boundary violations;
  - behaviors that negatively affect the workplace.
  - and comments that are personal, rude, disrespectful, threatening or belittling. Insulting or insensitive comments, jokes or behaviors directed toward learners', colleagues' or co-workers' age, culture, disabilities, ethnicity, race gender, language, political beliefs, physical appearance, religious or spiritual beliefs, sexual orientation or socioeconomic status also will not be tolerated.
- actions, words or behaviors that a learner, colleague, co-worker or patient would reasonably consider to be humiliating or demeaning;
- passive disrespect (including dismissive treatment of others);
- academic dishonesty (including falsification or fabrication of data or the misappropriation of the writings, research or findings of others);
- and discrimination against any learner, patient, co-worker or other individual on political grounds or for reasons of race, ethnicity, religion, gender, sexual orientation or any other illegal or arbitrary reasons.

Finally, faculty members may not assign a lower grade, write a poor evaluation, threaten, harass or otherwise retaliate against any learner because he or she has reported, in good faith, a violation of this faculty professionalism code.

### ***Violations of this Professionalism Code***

Violations of this Professionalism Code will be reported to, investigated by and acted upon by the Grievance

Committee for faculty, Human Resources for staff and the Student Performance Committee as an Honor Code violation for students and residents.

Confidential reporting of violations of the principles and values described in this Professional Code of Conduct can be made through the use of EthicsPoint.

### **References**

Principles of Ethics and Code of American Dental Association Professional Conduct: With official advisory opinions revised to April 2012.

ADEA Dental Faculty Code of Conduct

ASDA: White Paper on Ethics and Professionalism in Dental Education, 2009

Professionalism Code of Conduct "Professionalism Mission Statement" University of Colorado School of Medicine: Revised January 6<sup>th</sup> 2014

The University of Colorado School of Dental Medicine (SODM): Mission, Vision, and Strategic Goals

## Competency Statements

### **Critical Thinking**

Evaluate and integrate emerging trends in health care.

Utilize critical thinking to evaluate and integrate best research outcomes with clinical expertise and patient values for evidence-based practice.

### **Professionalism**

Make professional decisions that satisfy legal, societal and ethical principles.

Use self-evaluative skills to assess individual knowledge and abilities, to practice within the scope of one's competence and make appropriate professional referrals, and to identify areas of deficiency to correct through lifelong learning.

Collaborate effectively with other health professionals to facilitate the provision of overall health care.

### **Communication and Interpersonal Skills**

Apply appropriate interpersonal and communication skills to create a humanistic environment.

Communicate effectively with diverse patients and other health care providers to ensure appropriate, patient-centered patient treatment.

### **Health Promotion**

Provide prevention, intervention and educational strategies.

Participate with dental team members and other health care professionals in the management and health promotion for all patients.

Recognize and appreciate the need to contribute to the improvement of oral health through service learning and/or community-based experiences.

### **Practice Management and Informatics**

Evaluate and apply regulatory agency requirements for dental practices such as infection control, HIPAA and environmental and office safety programs.

Apply principles of risk management including informed consent.

Demonstrate effective business practices.

### **Patient Care Assessment, Diagnosis and Treatment Planning**

Perform an examination that collects information required to evaluate the health, oral conditions, needs, and expectations of patients of all stages of life.

Recognize, diagnose and interpret normal and abnormal conditions of the orofacial complex to include oral cancer, occlusal and temporomandibular disease, craniofacial growth and development that require monitoring, treatment or management.

Develop, present and discuss individual sequenced treatment plans for patients of all ages consistent with patient's condition, interest, goals and capabilities.

### **Establishment and Maintenance of a Healthy Oral Environment Management of Emergency Situations**

Recognize and manage dental emergencies to include acute pain, hemorrhage, trauma, and infection of the orofacial complex.

**Control of Pain and Anxiety**

Employ pharmacological agents and techniques to manage orofacial discomfort and psychological distress.

**Periodontal Therapy**

Diagnose, treatment plan, comprehensively treat, and maintain patients with periodontal disease in all stages of life.

**Endodontic Therapy**

Diagnose and treat diseases of pulpal and periradicular origin in all stages of life.

**Surgical and Non-Surgical Therapies**

Diagnose and treat conditions requiring reparative surgical procedures and non-surgical therapies on the hard and oral soft tissues.

**Restorative/Prosthodontic Therapy**

Provide tooth restorations to restore anatomic form, function, and esthetics to patients at all stages of life.

Provide and/or design appropriate fixed or removable restorations to replace missing teeth.

Continually analyze the outcomes of patient treatment to improve patient care.



## **Digital Education**

## SDM Program of Digital Education and Academic Technology

As part of the Office of Academic Affairs and Innovation, the mission of the Program of Digital Education and Academic Technology (DE) is to ***intentionally integrate academic technology through proven digital instructional design practices***. Outside the traditional information technology spaces, higher education institutions dedicate an intentional space where faculty and clinical instructors can work with trained professionals to properly integrate academic technology such as the university's learning management system, online exam proctoring service, lecture capturing, virtual environments applications, and other software that can help enhance the instructional delivery of dental education.

The academic technology integration that DE helps include the support of the university's learning management system, online exam proctoring service, lecture capturing, virtual environments applications, and other software that can help enhance the instructional delivery of dental education. Intentional integration through digital instructional practices focuses primarily on [Backward Design](#) that starts with the objective needing to be achieved and what assessment makes sense to complete the objective. Only once those two answers are solidified can a sustainable conversation about using the right technology. DE will be happy to guide you in any part of that process. Along with backward design, DE uses a mix of ecological (*what environmental factors impact the learning experience?*), usability (*how easy is it to use a technology tool for both learning and collecting data?*), and constructivist (*how does the tool assist in collaborative learning?*) models to help faculty explore various factors that may impact the success of a learning experience.

Here are some of the exciting projects that DE helps faculty and students enhance the learning experience through digital education and academic technology:

- Improve consistency of the learning management system use as students maneuver from course to course within their program
- Build sustainable and intentional use of virtual environments (i.e., VR/AR) in both learner and patient education within the SDM
- Identify medical education best practices in using mobile devices (ie., iPads) when completing learning objectives in learner's SDM academic program.
- Explore innovative use of academic technology that enhances the learner experience at SDM.

Have questions about how the Program of Digital Education and Academic Technology can help you? Email [sdmacademicaaffairs@ucdenver.edu](mailto:sdmacademicaaffairs@ucdenver.edu) to start a conversation about how DE can help enhance your learning!

## **Calibration**

## Faculty Calibration Sessions

The objective of calibration sessions is to ensure that faculty members apply similar standards in measuring and evaluating the performance of students. As part of the faculty development program, monthly calibration sessions have been scheduled to ensure time for Discipline Coordinators to inform faculty of important information related to didactic and clinical teaching, as well as provide clinical operational updates. These sessions ensure continuity between what is being taught in the classroom and on the clinic floor. Discipline Coordinators (DC) have been identified by the Department Chair for each department and they have two responsibilities:

- The first responsibility is to ensure that they participate by presenting to CUSDM faculty members in a calibration session at least once a year. They provide any updates on procedures, processes, competencies or other critical information regarding the discipline. The overview of the calibration process can be reviewed in (Appendix ....Overview of Calibration Process).
- The second responsibility for the DC is to ensure that faculty in their individual departments are calibrated regarding their discipline related competencies. The expectations are outlined in the DC Program Template. For example, providing the reason for the calibration, who is calibrated, how often they are calibrated and a description of the calibration session. (Appendix DC Program Template) This document is filled out annually and submitted to the Program Director of Faculty Development (PDFD) who tracks the attendance and compliance and reports to the Senior Associate Dean of Academic Affairs and Innovation.

In addition to the DC calibration sessions for CUSDM faculty members, there are calibration sessions presented by content experts to provide training and/or updates on technology, tools and programs that are essential to the learning and assessment process.

The Calibration Committee oversees the implementation of all these calibration sessions throughout the year. The committee members include the PDFD, the Director of Continuing Education and the Discipline Coordinators. The purpose of these sessions is to ensure consistency on the clinic floor and continuity between what is being taught in the classroom and translated to clinical teaching. Session topics include clinical procedures and techniques, academic and clinical administration matters, new technologies, axiUm and IT training, teaching and learning concepts, and professional development. Examples of past calibration sessions include:


- Important axiUm Updates for Clinical Faculty
- Institutional Quality and CODA updates
- What We Teach in Periodontology
- Caries Management & Caries Risk Re-Assessment Competencies
- What We Teach: Pre-Clinical Operative
- Huddles with Explain Everything
- Social Determinants of Health
- What's New in Canvas
- New Periodontology Classification
- Digital Education 101

Additional calibrations sessions are listed in the appendices (Calibration January –November 2022)

**Who is invited?** All F/T, P/T faculty and Preceptors are invited to the calibrations.

**Is CE offered?** Yes, CE credit is offered for some of the calibrations. The Director of Continuing Education evaluates the learning objectives of each session to ensure robust content and makes the final decision on whether to give CE credit or not. CE credit for the sessions is clearly listed on the calendar invite along with details of what the session will cover as show in Figure 1. Some of the calibrations are necessary but are not given CE credit. These topics vary and can be presented by staff and administrators who are content experts. Examples of these sessions could be ALARA training, technology tools, axiUm upgrades.

*Figure 1. Calendar Invite for Calibration Session*



**Presenter:** Dr. Lonnie Johnson  
**Topic:** "Opioid Prescribing"

**Online Only:** Join Zoom Meeting  
<https://ucdenver.zoom.us/j/92623775384>  
Meeting ID: 967 4746 5318

**Learning Objectives:**  
By the end of this session, participants will be able to:

- Know the best practices for opioid prescribing, according to the most recent version of the Division's Guidelines for Prescribing and Dispensing Opioids
- Understand the rational for and management of oral and dental pain without the use of opioids
- Recognize substance use disorders
- Access the resources for the Referral of patients with substance use disorders for treatment
- Understand the use of the Electronic Prescription Drug Monitoring Program

**CE Credit: 1 Hour**  
To receive CE Credit, participants will fill out the Evaluation Form after the session:  
[https://ucdenver.co1.qualtrics.com/jfe/form/SV\\_a5Hw01YGwyuwhG6](https://ucdenver.co1.qualtrics.com/jfe/form/SV_a5Hw01YGwyuwhG6)

Previous Calibration Sessions located in Canvas: "Calibration Committee Course". Login:  
<https://login.ucdenver.edu/signin.html> and go to "Modules".

## The Continuing Education Process

The Calibration Committee works collaboratively to bring critical updates to the faculty community. At minimum, calibration is offered once a month and the session is offered two times, once at 8:00am and once at 12:00pm to meet the needs of faculty members. The sessions are delivered on Zoom and recorded so faculty can access anytime/anywhere. The PDFD coordinates these sessions and supports the presenters in preparing. See example in Figure 2.

*Figure 2- Example of a support email to faculty presenter*

### SUPPORT EMAIL

Thank you again for presenting “\_\_” on \_\_ and \_\_. The (Chair of the Calibration Committee) is asking the presenters to formulate 2 questions; both questions given pre-presentation and the same questions given post-presentation. The first question should determine what constitutes a critical error in a clinical situation, treatment outcome, or diagnostic interpretation. The second question should define competency in a clinical scenario, treatment outcome or diagnostic interpretation. The content of the questions is your discretion covering the two criteria mentioned above and will be answered by the participants on their desktops or i-pads. Multiple choice questions work well.

Also, below are some suggestions/information for a successful presentation:

- Please prepare for a 50 min or less presentation which will give plenty of time for participants to take the pre and post survey and to ask questions. Please note that Zoom makes your computer screen smaller so simplifying text and graphics is recommended.
- To access Zoom, copy and paste the URL from the calendar invite or click here: <https://ucdenver.zoom.us/j/93746704393> . If you have any questions on how to use Zoom or installing software, please contact Clint Carlson at [clint.carlson@cuanschutz.edu](mailto:clint.carlson@cuanschutz.edu) or access directions on the digital education webpage: <https://olucdenver.sharepoint.com/sites/SDMDigitalEducation/SitePages/Zoom.aspx>
- The pre-survey will be posted at the top of the hour for participants by Jennipher Murphy via the Chat box. Please allow a few minutes before proceeding with your presentation.
- Participant questions may be delivered either verbally or via the Chat box so plan a few pauses to check in to see if anyone has posted a question.
- The post-survey will be posted at the end of the presentation by Jennipher Murphy via the Chat box.

All sessions, regardless if CE is offered or not, require participants to answer a pre- and post- assessment. These results are shared with both the presenter and the Calibration Committee who can then assess if the learning objectives of the session have been met. Once the sessions are completed, the PDFD edits the video and uploads to the Calibration course in Canvas (LMS). See Figure 3 example.

Figure 3- Posted Calibration Session in Calibration Course

### January 2022 Calibration- Opioid Prescribing CE

Due	No Due Date	Points	None
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1. Take the Pre-calibration Assessment
2. Watch the entire video recording
3. Complete the Post-calibration Competency Assessment
4. Participation Badge- By filling out your participation badge, you attest to reviewing the module and completing the pre and post assessment. You will receive an email receipt.
5. CE Evaluation- Please fill out the anonymous feedback survey so we can improve our offerings


Presenter: Dr. Lonnie Johnson


Topic: "Opioid Prescribing"

Learning Objectives:


By the end of this session, participants will be able to:

- Know the best practices for opioid prescribing, according to the most recent version of the Division's Guidelines for Prescribing and Dispensing Opioids
- Understand the rational for and management of oral and dental pain without the use of opioids
- Recognize substance use disorders
- Access the resources for the Referral of patients with substance use disorders for treatment
- Understand the use of the Electronic Prescription Drug Monitoring Program

[Pre Calibration Assessment](#) 

[Post Calibration Assessment](#) 

[Participation Badge](#)

[CE Evaluation](#) 

January- Opioid Prescribing

These asynchronous modules can be accessed by faculty at any time. The faculty must complete the pre- and post-assessment and the CE Evaluation to receive CE Credit. The evaluation acts as an attestation that they have watched the entire video and answered both assessment questions to complete the module. The PDFD is responsible for tracking by verifying through video analytics that the faculty member did watch the video and to verify that the evaluation was submitted. This report is then sent to the Continuing Education office for certificate delivery.

**Faculty Senate**



## **Faculty Governance Document**

### **FACULTY GOVERNANCE UNIVERSITY OF COLORADO SCHOOL OF DENTAL MEDICINE**

#### **PART I**

##### **STRUCTURE OF FACULTY GOVERNANCE**

The faculty of the University of Colorado School of Dental Medicine (CUSDM) is a self-governing body which operates according to the Constitution of the Faculty Senate of the School of Dental Medicine and the Laws of the Regents of the University of Colorado.

This organization exists within a framework of faculty governance at the University of Colorado Denver. The framework provides for interaction within the School, at the campus level and at the system-wide level.

The system-wide level has two bodies which reports to the President of the University. One body is the system-wide Faculty Senate which consists of all faculty who meet membership requirements as defined in the Constitution of the University of Colorado Denver Faculty Senate. The second body is the Faculty Council, which is a representative body with members from each campus and each school.

The University of Colorado Denver has a representative body on the Anschutz Medical Campus (AMC) called the Faculty Assembly of UCD. This group has a set of officers and representatives from each school on the AMC-UCD campus. Individual membership in the UCD Faculty Assembly can be defined independently from the university-wide definition, but officers and representatives to the university-wide system must meet membership requirements of the university-wide constitution.

The CUSDM faculty governing body is called the CUSDM Faculty Senate with membership defined in the Constitution of the Faculty Senate of the School of Dental Medicine. Officers of the CUSDM Faculty Senate and representatives to the UCD Faculty Assembly and University-wide Faculty Council also must meet membership requirement of those bodies. Officers and Representatives of the CUSDM Faculty Senate are elected by the members of the CUSDM Faculty Senate.

## PART II

### CONSTITUTION OF THE FACULTY SENATE OF THE SCHOOL OF DENTAL MEDICINE

(Current document was approved by the Faculty Senate on October 6, 2021)

#### ARTICLE I: ORGANIZATION

##### A. Department Organization

1. The School of Dental Medicine shall consist of the Department of Community Dentistry and Population Health, the Department of Craniofacial Biology, the Department of Diagnostic and Biological Sciences, the Department of Orthodontics, the Department of Restorative Dentistry, the Department of Pediatrics and the Department of Surgical Dentistry.
2. In accordance with Article 4, Part B of the Laws of the Regents, each department shall be responsible for developing its own working structure in consultation with the Dean, for defining how personnel and budgetary matters shall be handled within the department, for determining responsibility for other departmental matters and for making recommendations for appointments, reappointments, continuous appointments and promotions in strict conformance with procedures approved by the Regents and by the School of Dental Medicine.
3. In accordance with Appendix A (APS 1022) of the Laws of the Regents, the entire School of Dental Medicine is defined as the primary unit for purposes of recommending and evaluating faculty being put forth for appointment, reappointment, promotion and tenure.

##### B. Administrative Organization

1. In accordance with Article 4, Part A of the Laws of the Regents, the Dean shall be the principal administrative officer of the School of Dental Medicine and shall be the presiding officer of its faculty. The Dean shall be responsible for the enforcement of admission requirements and for the general effectiveness of all departments within the School. He or she shall supervise and administer all matters pertaining only to the School of Dental Medicine, including budgetary planning and the allocation of available funds, faculty assignments, faculty and staff personnel policies and decisions (including promotions and salary increments), curriculum planning and revision, course changes, and the academic advising and progress of students. Departmental chairpersons and faculty members shall confer with the Dean about problems relating to all such matters. The Dean shall make regular reports to the President through the Chancellor of the Health Sciences Center and to the Faculty of the School of Dental Medicine.
2. The administrator responsible for the Office of Academic Affairs shall have the responsibility for implementation and operation of all curricula of the School and for coordinating educational programs with the department chairpersons, including requests, allocations and revisions of the curriculum; and for maintaining academic standards detailed in the School's academic policies.
3. The administrator responsible for the Office of Admissions and Student Affairs shall coordinate all aspects of student affairs, including student recruitment, admissions, advising, student governance, and quality of student life.

4. The administrator responsible for the Office of Financial Affairs shall have the responsibility for coordinating and monitoring all budgetary and fiscal activities of the School of Dental Medicine. In consultation with the Dean, he/she shall be responsible for all budgets for the School and modifying them as required. This person is also responsible for monitoring the expenditure of all funds within the School to assure compliance with established budgets and with relevant budget and fiscal policies and procedures. In the absence of the Dean, the administrator responsible for the Office of Financial Affairs acts in the Dean's behalf concerning all budgetary and fiscal affairs of the School of Dental Medicine.
5. The administrator responsible for the Office of Clinical Operations and Patient Services shall have the responsibility for coordinating all activities involving patient care for pre- and post-doctoral programs. This includes, but is not limited to, risk management, assignment of patients to students, monitoring students' clinical progress, monitoring patients' progress, development of patient management guidelines, and evaluation of patient management. In consultation with appropriate department and/or division chairpersons, he/she shall be responsible for the development and implementation of clinic policies, procedures, student requirements and shall schedule appropriate clinical time and faculty clinic coverage.
6. The administrator responsible for the Office of Diversity and Inclusion shall have the responsibility for coordinating all activities focused on enhancing diversity and inclusion within our student body, as well as within our faculty, and staff. This includes, but is not limited to, ensuring appropriate training for admissions committee members, cultural competency initiatives within the curriculum, and appropriate training for faculty and staff in the areas of diversity and inclusion. The goal of the Office of Diversity and Inclusion is to foster an inviting learning environment for the diverse students, faculty and staff who bring diverse perspectives to the School of Dental Medicine community. The administrator will be the School of Dental Medicine's representative on campus in all matters related to Diversity and Inclusion.
7. In accordance with Article 4, Part B and Appendix B of the Laws of the Regents, a Chairperson shall be the principal officer of each department and shall be responsible for the effective and efficient administration of his or her department. The Chairperson shall have the responsibility for providing intellectual leadership toward achievement of the highest possible level of excellence in the teaching, research, and service activities of the department. With the advice and counsel of his or her departmental colleagues and acting under the rules of the department, the Chairperson shall be the department's representative and spokesperson. In implementing the rules of the department with respect to recommendations for faculty appointments, tenure and salary increases, the Chairperson may submit his or her own comments to the Dean in addition to the recommendations of the departmental faculty, but he or she may not overrule decisions of the department or its regularly-constituted committees. Administratively, the Chairperson shall be responsible to the Dean and to the department for carrying out all leadership and administrative roles and responsibilities identified in Appendix B of the Laws of the Regents.

#### C. Faculty

1. In accordance with Article 5, Part E.5 of the Laws of the Regents, the faculty of the School of Dental Medicine shall consist of all general members of the teaching and research staff holding the rank of instructor or above. The faculty shall have jurisdiction over all matters that concern only the School of Dental Medicine, such as educational policy, curriculum, including academic requirements for admission, for continuance and for graduation. In addition, the faculty of the School of Dental Medicine shall have jurisdiction over matters of academic ethics under such procedures as may be approved by the Board of Regents.

The faculty of the University of Colorado School of Dental Medicine have elected to form the University of Colorado School of Dental Medicine Faculty Senate to facilitate self-governance.

## ARTICLE II: FACULTY SENATE

### A. Membership

1. All full-time members of the faculty, and part-time members who are appointed for 50% FTE or more, shall be entitled to voting membership in the Faculty Senate. All members of the part-time faculty who are appointed for less than 50% FTE may participate in the Faculty Senate as non-voting members, except those part-time faculty with current standing committee appointment, who shall also be voting members of the Faculty Senate.

### B. Officers and Representatives

1. The President of the Faculty Senate shall conduct the meetings of the Faculty Senate, shall represent the faculty on the Executive Committee of the School of Dental Medicine and shall perform related duties as elected representative of the faculty.
2. The Vice President of the Faculty Senate, in the absence of the President, shall conduct the meetings of the Faculty Senate and shall represent the faculty on the Executive Committee of the School of Dental Medicine. The Vice President shall also be responsible for overseeing the management and implementation of the Faculty Governance document.
3. The Secretary shall
  - record the proceedings of all meetings of the Faculty Senate,
  - shall maintain permanent records of the minutes of all regular meetings of the Faculty Senate, and
  - shall maintain records and manage the Flower and Gift Fund.
4. The Parliamentarian shall assist the presiding officer in the conduct of the meetings of the Faculty Senate according to the prevailing rules of order.
5. Two Representatives of the CU SDM Faculty Senate (Delegates) shall serve as representatives to both the AMC-UCD Faculty Assembly and the University-wide Faculty Council.
6. The Director of Faculty Affairs shall be responsible for any administrative revisions, maintenance and preservation of the Faculty Governance document.
7. Other representatives to campus and university-wide committees shall be recommended by the President of the CU SDM Faculty Senate.

### C. Terms of Office

1. The officers of the Faculty Senate shall serve from October 1 of the year in which they are elected to September 30 of the following year. The President and Vice President may not be elected to more than three consecutive terms.

### D. Election of Officers

1. Nominations for new officers shall be submitted to the incumbent officers during the month of August. Any member of the full-time faculty who meets membership requirements in the CU SDM Faculty Senate and the University of Colorado Denver Faculty Assembly may be nominated for an office. The names of all candidates who accept nomination shall be placed on the ballot; a candidate may accept nomination for only one office.
2. The incumbent officer shall conduct the election by secret mailed ballot during the month of September. Each member of the full-time faculty is entitled to one vote. A candidate shall be elected by receiving a majority of votes cast in the election. In the event that no candidate receives a majority of the first ballot votes, a run-off election will be held between the two candidates with the highest number of votes on the first ballot.

### E. Meetings

1. The Faculty Senate shall meet upon the call of the Dean, the President, or by petition of one-third of the members of the Faculty Senate. A written announcement of meetings and a copy of the agenda shall be sent to all members of the Faculty Senate at least one week before each meeting.
2. A quorum shall consist of those members present unless otherwise specified in the Constitution of the Faculty Senate of the School of Dental Medicine.
3. The parliamentary authority for the meetings of the Faculty Senate and its committees shall be "Robert's Rules of Order" - most current edition, if the Constitution of the Faculty Senate of the School of Dental Medicine does not apply.

### F. Standing Committees

1. The majority of the Faculty Senate's functions shall be performed by designated standing committees. Unless otherwise specified in this Constitution, the qualified members of each department shall elect their departmental representatives to each standing committee by a majority vote. The student body shall elect the representatives for each designated position from the appropriate classes. All members of the committees shall serve for two years from June 1 – May 31 of the second year following election.
2. Unless otherwise specified in this Constitution, each Standing Committee shall elect its own Chairperson, and the Chairperson may create subcommittees to facilitate the work of the Standing Committee. The Chairperson shall maintain minutes.

3. Standing Committees shall consider new business brought before them in writing by either the President of the Faculty Senate, or the Dean of the School of Dental Medicine, or five members of the full-time faculty representing at least two departments, or the majority of the full-time faculty members of any department. The Chairperson of the Standing Committee shall report the recommendation of the majority of the committee members to the President, who shall bring the recommendation before the Faculty Senate at its next meeting. The power of accepting, amending or rejecting reports from Standing Committees is retained by the Faculty Senate.
4. Committee structure, function, and charge will be reevaluated every two years, or other interval as determined by the Faculty Senate.
5. The school-wide Standing Committees are of two types – Committees Responsible to the Faculty Senate and Committees Reporting to the Dean. Their function and their composition are described in the following pages.

## **Committees Responsible to the Faculty Senate**

### **INSTITUTIONAL EFFECTIVENESS COMMITTEE**

The Institutional Effectiveness Committee shall have the responsibility, authority, and accountability for the Institutional Effectiveness Program of the School of Dental Medicine. The committee's responsibilities shall include the development of guidelines and procedures, implementation of a plan of outcomes assessment, coordination of effort and evaluating compliance. Specifically, the committee shall be responsible for designing a system of outcomes assessment for the programs of the School of Dental Medicine, evaluating and coordinating the measures used to make assessment, assuring compliance with the program, assuring data collection and analysis, and assuring the distribution of the data and recommendations to the responsible person(s), committee(s), or organization(s) for action. Subcommittees reporting to the Institutional Effectiveness Committee include the Dental Curriculum Subcommittee, Dental Student Performance Subcommittee, Competency Review Board Committee, and the Student Professionalism and Academic Integrity Subcommittee.

#### **Chairperson**

**One Representative from each of the following Departments:**

Community Dentistry

Pediatric Dentistry

Diagnostic and Biological Sciences

Orthodontics

Restorative Dentistry

ISP

**Goal Directors: Faculty Representatives (appointed by the Faculty Senate)**

**Dental Student Representatives (one from DS-2, DS-3, and ISP2 classes)**

**Faculty Senate President**

Staff member responsible for Institutional Effectiveness (ex-officio)

### **Dental Curriculum Subcommittee**

The Dental Curriculum Subcommittee shall have the responsibility, authority, and accountability for the entire dental curriculum of the School of Dental Medicine. The subcommittee's responsibilities shall include determination of course offerings, assignment of courses to the appropriate department, approval of course content, coordination of the academic calendar and periodic evaluation of the curriculum.

#### Co-Chairpersons:

Administrator responsible for Academic Affairs

Director of Comprehensive Care Program

#### One Representative from each of the following Departments:

Community Dentistry

Diagnostic and Biological Sciences

Surgical Dentistry

Craniofacial Biology

Orthodontics

Restorative Dentistry

Pediatric Dentistry

ISP

#### Four Dental Student Representatives

DS-4

DS-3

DS-2

DS-1

#### Two ISP Student Representatives

ISP 2

ISP 1



### **Dental Student Performance Subcommittee**

The Dental Student Performance Subcommittee shall be responsible for developing policies for the evaluation of dental student performance, including policies for grading, promotion, and graduation of students. It shall also be responsible for implementing and enforcing policies that have been approved by the Faculty Senate and it shall make recommendations to the dean and other parties regarding discipline, promotion, or graduation of each student. The subcommittee shall follow guidelines approved by the Faculty Senate in full accord with the Rule of the Regents and the requirements of due process.

Chairperson: Administrator Responsible for Academic Affairs

Administrator Responsible for Student Affairs (non-voting)

Administrator Responsible for Clinical Affairs (non-voting)

Administrator Responsible for Diversity and Inclusion (non-voting)

One Representative from each of the following Departments/Disciplines:

Community Dentistry

Craniofacial Biology

ISP

Endodontics

Periodontics

Diagnostic and Biological Sciences

Restorative

Oral and Maxillofacial Surgery

Orthodontics

Pediatric Dentistry

At-Large ISP Representative

DS-3 Class President

DS-2 Class President

ISP-2 Class President

### **Competency Review Board Subcommittee**

The CRB Subcommittee functions for the purpose of providing efficient clinical performance reviews of dental students and ISP students. Additional goals will include improving documentation of performance assessment and providing better, more immediate feedback to students. The CRB Subcommittee will monitor student progress of competency completions and provide feedback for ACTS and block rotation readiness. The CRB Subcommittee may report back to the Dental Student Performance Subcommittee when problems are identified that require DSPS action. (Committee structure revised by Faculty Senate vote 12/14/16.)

Chairperson: Administrator Responsible for Clinical Affairs

Chair of the Restorative Department

Chair of Community Dentistry (ACTS Director)

Chair of Surgical Dentistry Department

Chair of the Division of Periodontics or Designee

Chair of the Division of Oral and Maxillofacial Surgery

Chair of the Division of Endodontics

Chair of the Division of Operative Dentistry

Chair of the Division of Prosthodontics

Chair of the Division of Oral Medicine

Director of the International Student Program

Comprehensive Care Team Leaders

Administrators Responsible for Academic Affairs, Diversity and Inclusion, and Students Affairs (ad-hoc/ non-voting)

Appropriate Comprehensive Care Faculty as required

### **Student Professionalism and Academic Integrity Subcommittee**

The Student Professionalism and Academic Integrity Subcommittee shall be responsible for developing policies for the evaluation of dental student professional conduct and academic integrity issues. It shall also be responsible for implementing and enforcing student professional conduct and academic integrity policies that have been approved by the Faculty Senate and it shall make recommendations to the dean and other parties regarding discipline of each student. The subcommittee shall follow guidelines approved by the Faculty Senate in full accord with the Rule of the Regents and the requirements of due process.

Chairperson: Administrator Responsible for Student Affairs (non-voting)

Administrator Responsible for Academic Affairs (non-voting)

Administrator Responsible for Professionalism (non-voting)

Four (4) full-time faculty members (voting)

One Representative from each Dental/ISP Class (voting)

President of the Student Professionalism and Ethics Association in Dentistry (voting)

### **ADVANCED DENTAL EDUCATION OVERSIGHT COMMITTEE**

Oversight Subcommittees have responsibilities for student/resident admissions, curriculum management, academic performance and outcomes assessment, clinical performance and outcomes assessment, academic and clinical scheduling coordination, and other activities of the advanced dental education programs.

Chairperson: Administrator Responsible for Advanced Dental Education

Administrator Responsible for Academic Affairs

Administrator Responsible for Clinical Affairs

Director of Graduate Periodontics

Director of General Practice Residency

Director of Graduate Orthodontics

Director of Pediatric Dentistry

## **STUDENT AFFAIRS COMMITTEE**

The Student Affairs Committee will be responsible for oversight of predoctoral student life at the School of Dental Medicine. This shall include oversight of predoctoral admissions, student organizations, student government, and other student activities.

### Chairpersons

### One Representative from each of the Division and/or Departments

Community Dentistry  
Craniofacial Biology  
ISP  
Endodontics  
Periodontics  
Diagnostic and Biological Sciences  
Restorative  
Oral and Maxillofacial Surgery  
Orthodontics  
Pediatric Dentistry

### One Representative from each Dental and ISP Class

DS 4	DS 1
DS 3	ISP 1
DS 2	ISP 2

### **Dental Admissions Subcommittee**

The Dental Student Admissions Committee shall develop admissions policies for the program in dentistry. It shall also conduct the admissions process and select those applicants most qualified for admission to the program.

Chairperson: Administrator Responsible for Admissions

Director of Post-Baccalaureate Program

Full-Time Faculty (the total number of committee members of full-time and non-full-time faculty members shall not be less than 10)

Non-Full-Time Faculty

Staff Representative

33% of the total of F/T and non-F/T faculty will be replaced annually

Dental Student Representative at the DS-2, DS-3, or DS-4 level (The activity of the dental student representative shall be determined by the Admissions Subcommittee.)

Prior to the start of each admissions cycle, the Chairperson of the Admissions Subcommittee shall recommend to the Faculty Senate the composition of the Dental Admissions Subcommittee for concurrence by the Faculty Senate.

### **International Student Program Admissions Subcommittee**

The International Student Program Admissions Committee shall develop admissions policies for the program. It shall also conduct the admissions process and select those applicants most qualified for admission to the program.

2 Chairpersons (Co-Chairs): Director and Assistant Director of the International Student Program

Faculty Members

## **RESEARCH COMMITTEE**

The Research Committee shall be responsible for stimulating and assisting research activities by making available financial support for small faculty research projects. The committee's charge shall be reviewing the scientific merit and fiscal propriety of each application and making recommendations concerning funding to the Dean. The committee shall provide guidance to faculty during the early phases of preparation of applications, and help investigators seek other funds by reviewing and offering advice on applications to be submitted to external granting bodies. In addition, committee members shall provide advice on research design and promising avenues for research.

Chairperson – Senior Associate Dean for Research

One Representative from each of the following Departments

Community Dentistry

Diagnostic and Biological Sciences

Surgical Dentistry

Orthodontics

Craniofacial Biology

Pediatric Dentistry

Restorative

Faculty Advisor of the Student Research Group, Colorado Chapter of AADR

President of the Colorado Chapter of AADR

One Dental Student Representative (Student Research Group of Colorado, Chapter of AADR)

President of the Student Research Group

## **FACULTY AFFAIRS COMMITTEE**

The Faculty Affairs Committee is concerned with policies and procedures that influence the personal and professional welfare of the faculty. Activities of the Committee include examining all policies and procedures of the University which influence the professional and personal welfare of the faculty, and to recommend improvements in the design and implementation of faculty personnel policies, including such matters as tenure and promotion (in conjunction with the Tenure Committee), salary and benefits, faculty development, and hiring and retirement alternatives. The Chairperson will serve a three-year term.

Chairperson

Members determined by the Faculty Senate

**Faculty Development Subcommittee**

The Faculty Development Subcommittee shall assist in promoting faculty development in the School of Dental Medicine. The subcommittee will identify mechanisms and provide assistance to help faculty, department chairs, and other mentors develop in teaching, service and scholarly activities. Further, the subcommittee shall serve as a resource to faculty, department chairs, and other mentors in instructing faculty on institutional processes.

**2 Chairpersons (Co-Chairs)****One Representative from each of the following Departments:**

Restorative Dentistry

Diagnostic and Biological Sciences

Orthodontics

Pediatric Dentistry

Surgical Dentistry

Craniofacial Biology

Community Dentistry

**Director of Faculty Affairs and Development (ex-officio)**

## **Faculty Calibration Subcommittee**

The Faculty Calibration Subcommittee shall be responsible for developing programs and policies to improve faculty knowledge of course content, standardize clinical evaluations and clinical competency examinations evaluations, introduce new digital technologies, disseminate information regarding school policies and procedures, and familiarize faculty with all other areas that enhance teaching and learning, among other topics. The Subcommittee shall ensure the continuous calibration of all full-time, part-time, and volunteer/preceptor faculty members.

Chairperson

Co-Chairperson

One Representative from each discipline/area that informs the work of faculty:

Administrator Responsible for Clinical Affairs

Restorative Dentistry

Prosthodontics

Fixed

Removable

Oral and Maxillofacial Surgery

ACTS program

Periodontics

Endodontics

Diagnostic and Biological Sciences

In-house lab

axiUm Manager

Manager of Digital Education and Academic Technologies

Research

Director of Integrated Curriculum



**Faculty Promotion, Tenure and Post-Tenure Review Subcommittee**

The School of Dental Medicine Faculty, Promotion, Tenure and Post-Tenure Review Subcommittee shall review and evaluate all recommendations for promotion, tenure, and post-tenure review, and part-time/volunteer faculty appointments, except those full-time new appointments recommended by search committees appointed by the Dean. This subcommittee shall review all documents submitted to support a recommendation, in order to assure that all documentation is complete and current and to evaluate each recommendation in terms of the degree to which the faculty member's achievements are consistent with School-wide and University criteria for the recommended rank or tenure. This subcommittee forwards all of its recommendations to the Dean's Review Committee. The Chairperson will serve a 3-year term.

Chairperson of the subcommittee shall be a tenured faculty member at the professor level, elected by the Faculty Senate.

Only full-time, tenured or clinical track faculty members at the associate professor level or above should comprise the committee membership.

Selection of committee members will be by department chairs (1 person per department) with ratifying vote and continued oversight by officers of the Faculty Senate.

**Departments represented:**

Restorative Dentistry

Diagnostic and Biological Sciences

Orthodontics

Community Dentistry

Surgical Dentistry

Pediatric Dentistry

Craniofacial Biology

**Faculty Grievance Subcommittee**

The Faculty Grievance Subcommittee shall review and evaluate grievances brought forth by a faculty member and shall submit a recommendation concerning the grievance to the dean. Grievances relating to work assignments, work schedules, annual evaluations, annual salary increments, or similar matters may be brought before the Faculty Grievance Subcommittee by a faculty member. The Faculty Grievance Committee will not, however, review any grievances relating to promotion or denial of promotion in academic rank or reappointment. These would be referred to the Dean's Review Committee. The Faculty Grievance Committee shall have the authority to determine if a grievance should be heard or processed through alternative channels. (The administrator shall serve as chairperson.)

One Administrator

Two Department Chairpersons

Three Full-time Faculty at the Level of Associate Professor or Above

Dean's Designated "Appointing Authority"

## **Committees Responsible to the Dean**

### **EXECUTIVE COMMITTEE**

The Executive Committee is the executive body of the School of Dental Medicine. It shall advise and assist the dean in administrative aspects of the School of Dentistry's operations. In addition, the Executive Committee should review minutes from all other Committees in the SDM. (Dean shall serve as chairperson.)

#### **Dean**

#### **Administrators**

Academic Affairs

Financial Affairs

Clinical Affairs

Student Affairs

Diversity and Inclusion

Research

#### **Department Chairpersons**

Community Dentistry

Diagnostic and Biological Sciences

Surgical Dentistry

Orthodontics

Restorative Dentistry

Craniofacial Biology

Pediatric Dentistry

#### **Program Directors**

ISP Program

Graduate Periodontics Residency Program

General Practice Residency Program

Public Health and Community Outreach

Instructional Technology

#### **Faculty Senate President**

## **CONTINUING EDUCATION COMMITTEE**

The Continuing Education Advisory Committee, under the Chairmanship of the Director, CE/ES, advises the dean and the director on policies relating to continuing education. This includes short and long-term planning, all types and locations of courses to be offered, as well as guidelines concerning honoraria to be paid to speakers and fees to be charged to participants. It also advises the director concerning the appropriateness of individuals who are being considered as possible speakers.

Chairperson

Faculty

One DDS Part-time Faculty/Private Practitioner who is a member of the CDA

## **DEAN'S REVIEW COMMITTEE**

The Review Committee shall assist the dean in the evaluation of recommendations for reappointment, promotion and/or tenure received from the primary unit Evaluation Committee (Promotion and Tenure Committee). (Chairperson appointed by the Dean) (Term limits should apply)

Chairperson

Campus Representative

Faculty (appointed at the discretion of the Dean)

## **CREDENTIALING COMMITTEE**

The Credentialing Committee is concerned with policies and procedures of faculty credentialing at the School of Dental Medicine. Activities of the Committee include establishing faculty credentialing policies and procedures that comply with University and Colorado State licensure boards, and recommend improvements in the design and implementation of the SDM policies to the Dean and faculty. The Committee will review any adverse actions pertaining to an individual applying for a faculty appointment during the credentialing process and make recommendations to the Dean and Promotion and Tenure Subcommittee regarding faculty appointments and awarding of clinic privileges.

Chairperson - School of Dental Medicine's Representative on the University of Colorado Hospital's Credentialing Committee

Chair of the Faculty Affairs Committee

Chair of the Promotion and Tenure Committee

Director of Faculty Affairs and Development (ex officio)

## **OPERATIONS COMMITTEE**

The Operations Committee shall be advisory to the dean with responsibilities including oversight of patient care, facilities, equipment, instruments, IT, and the patient management system. The Committee shall assist the dean by suggesting strategies for improving didactic, preclinical and clinical education environments, and patient care.

Chairperson

Faculty

Staff

One Staff Representative from Each Floor

Class Pres from DS3, DS4, ISP1, ISP2

## **AxiUm Operations Subcommittee**

2 Chairpersons (Co-Chairs)

Faculty

Staff

## **INNOVATION COMMITTEE**

The Innovation Committee assists the dean in ensuring the school's Innovation Agenda is contemporary in setting innovation priorities in education, collaborative science and patient care. Through faculty expertise team leads, the Committee reviews investments in emerging technologies and reviews requests for Innovation Project funds. On an annual basis, the Innovation Committee members will report to the Faculty Senate on progress in innovation areas, and serve as champions of innovation for the school. The committee shall inspire, guide, support, and sustain innovation in the School of Dental Medicine.

Chairperson – Administrator responsible for Innovation

Faculty

Staff

## **INSTITUTIONAL QUALITY COMMITTEE**

The Institutional Quality Committee (Quality Committee) is responsible for guiding and advancing quality and performance outcomes as a means to improve the quality of oral health and patient care, institutional quality and patient safety, and student and resident education and training. The Quality Committee is responsible to create a culture and environment that fosters excellence in quality and service through commitment to the principles and practices of continuous performance improvement by all administrators, staff, faculty, residents and students and to create a culture of safety. This committee is the central coordinating body for all performance improvement and patient safety activities within the school. This committee is the governing body for the CLIA-waived equipment (Clinical Laboratory Improvement Amendments – CLIA).

Chairperson - Administrator responsible for Clinical Affairs

Co-chair – Director of Quality and Patient Safety

Associate Dean of Budgets, Finance, and Strategic Projects

Director of Graduate Periodontics Program

Director of General Practice Residency Program

Director of Dental Faculty Practice

Chair or representatives from:

Endodontics

Oral Surgery

Orthodontics

Restorative

Surgical Dentistry

Staff

Student Representatives

## **Patient Safety Subcommittee**

The Patient Safety Committee is charged with oversight of the patient safety program. This committee assesses for and promotes the school-wide culture of safety. The Patient Safety Committee reviews all sentinel patient safety events, never events such as falls, near misses and any other significant patient safety events. The committee reviews patient safety events for trends, suggests improvement strategies, and tracks and re-evaluates strategies for improvements.

Chairperson - Administrator responsible for Clinical Affairs

Co-chair – Director of Quality and Patient Safety

Chair or representatives from:

Community Dentistry

General Practice Residency

Oral Surgery

Orthodontics

Periodontics

Prosthodontics

Restorative

Surgical Dentistry

Director of Dental Faculty Practice

Director of Heroes Clinic

Staff

Student Representatives

## **Sedation Subcommittee**

The Sedation Committee oversees the use of moderate and deep sedation and general anesthesia in the care and treatment of patients. The committee reviews a random sample of sedation electronic health records compared to data from the PIXIS machine (storage and dispensing of narcotics and controlled substances); committee reviews this data for trends, and suggests and monitors improvements to the findings. The committee reviews medications and supplies related to surgery and sedation/anesthesia. The Sedation Committee reviews all patient safety-related sedation events to include any use of a reversal agent; events may be referred for a resident and faculty-oriented Morbidity and Mortality (M&M) session. The Sedation Committee is responsible for the review of all medical emergencies and the critique of each Rapid Response Team (RRT) event.

Chairperson - Administrator responsible for Clinical Affairs

Co-chair

Recorder – Director of Quality and Patient Safety

Chair of Surgical Dentistry

Representatives from:

Oral and Maxillofacial Surgery

Graduate Periodontics

General Practice Residency

Restorative sedating faculty

Director of Dental Faculty Practice

Staff

Graduate Periodontics residents, General Practice Residency residents, and OMFS residents



## **Infection Control and Life Safety Subcommittee**

The Infection Control and Life Safety Committee is responsible to review infection prevention practices and products that involve hand hygiene, personal protective equipment, disinfection and sterilization, dental unit water quality, bloodborne pathogen exposures, and infectious diseases. The committee recognizes guidance and requirements of professional organizations such as the Centers for Disease Control and Prevention (CDC), The Organization for Safety Asepsis and Prevention (OSAP) and Colorado Dental Association (CDA), among others. This committee is responsible to review life safety (fire safety) and the other elements of the environment of care to include general safety, security, hazardous materials and communication, emergency preparedness, equipment management and utilities management.

Chairperson - Administrator responsible for Clinical Affairs

Co-chair – Director of Quality and Patient Safety

### Representatives from:

Community Dentistry (ACTS clinics)

General Practice Residency

Heroes Clinic

Periodontics

Restorative

### Staff

### Student Representatives

### **Laser Safety Subcommittee**

The Laser Safety Committee provides oversight for laser use. Lasers are available in Orthodontics and Graduate Periodontics for treatment of hard or soft tissue. The Laser Safety Committee reviews an annual report by the Laser Safety Officer, policies, procedures, continuing education, fire safety, and laser safety regulatory requirements written by the Colorado Department of Regulatory Affairs for Dentistry and the Approved American National Standard (ANSI) for Laser Use and Safety.

Chairperson - Administrator responsible for Clinical Affairs

Co-chair – Chair (Interim) of Surgical Dentistry

Recorder – Director of Quality and Patient Safety

Representatives from:

Graduate Periodontics

Orthodontics

Restorative

Staff

### **SCHOLARSHIP COMMITTEE**

The Scholarships, Awards and Financial Aid Committee is responsible to the dean for determining the recipients of School of Dental Medicine predoctoral scholarship awards. The committee recommends the individuals who will receive awards and the level of each award.

Chairperson

Administrator Responsible for Student Affairs

Faculty

Student Representatives (1 from each DS Class)

DS 4

DS 3

DS 2

DS 1

Administrative Support Staff

### ARTICLE III: AMENDMENTS

1. The Constitution of the Faculty Senate of the School of Dental Medicine may be amended by a two-thirds vote of the faculty of the School of Dental Medicine.
2. Amendments may be proposed by any member of the faculty and shall be distributed in writing to all members no later than two weeks prior to the meeting at which they are to be considered.
3. Amendments which are approved shall become effective immediately upon passage unless otherwise stated in the amendment.

### ARTICLE IV: POLICIES AND PROCEDURES OF THE FACULTY

Operating policies and procedures of the faculty which are not specified by the Constitution of the Faculty Senate of the School of Dental Medicine may be created by regular vote of the Faculty Senate and shall be followed provided that they do not contradict the provisions of the Constitution of the Faculty Senate of the School of Dental Medicine or the Laws of the Regents.

### ARTICLE V: RATIFICATION

Upon approval of two-thirds of the members of the Faculty Senate, the academic and administrative functions of the Faculty shall be conducted according to this Constitution. All previous Articles of Governance of the School of Dental Medicine (excluding policies and procedures of the faculty) are nullified by the passage of this Constitution.

## **Faculty Senate Officers and Committee Membership**

**For the most up-to-date information, see the Faculty Senate folder on the G:drive**

### **OFFICERS (2021-2022)**

President:	Sophia Khan
Vice President:	Rick Mediavilla
Secretary/Treasurer:	Yanira Owens
Parliamentarian:	Omar Alburawi
Faculty Assembly:	Ethelyn Thomason Liz Ramos

### **COMMITTEE MEMBERSHIP**

*For updated committee membership, please contact the Faculty Senate Secretary*

**Policies and Manuals**

## Information Technology Policy

Title: Information Technology Policy  
Source: Dean's Office  
Prepared by: Jaymil Patel, Director of Information Technology  
Approved by: Dean  
Effective date: 6-1-2012 (REVISED 9/14/12, 12/7/12, 2/8/13, 4/5/13, 10/25/13, 1/17/14, 4/19/14, 10/2/2019)

### INTRODUCTION:

The School of Dental Medicine (SDM) is a highly technical environment. Students, residents, faculty, staff, vendors, and affiliates must adhere to the Information Technology (IT) policies laid out below in order to be in compliance with school policy, University policy, the Health Information Portability and Privacy Act (HIPAA) and the Family Educational Rights and Privacy Act (FERPA) regulatory obligations. The following policy statement applies to all SDM facilities including but not limited to the School of Dental Medicine main clinic building, RC1 South 11th floor labs and offices, and RC1 North second floor labs and offices.

### PURPOSE:

To provide guidance, uniformity and direction, especially with regard to security and confidentiality of information and data, to those using and/or purchasing information technology at or for the University of Colorado School of Dental Medicine including hardware, software, intranet, internet and web-based services or products.

### SCOPE:

This policy applies to all individuals: faculty, resident, staff, student, volunteer, visitor, vendor, affiliate, or person of interest (POI) who uses or has access to any SDM IT service, application, device or those supported by SDM IT.

### POLICY:

#### **Policies for all SDM**

##### **Computer support –**

- IT support will be given to all SDM staff and faculty provided the device was purchased through the SDM IT department using school funds or otherwise approved by the SDM IT department. Supported devices include computers, printers, tablets, phones, scanners, or any other IT related device.
- Support will not be provided for any devices, including smartphones, which were purchased with personal funds.

- Devices that were purchased with school funds without consulting the IT department prior to purchase and that do not meet the current device configuration requirements of the SDM IT department will not be supported. School funds include, but are not limited to departmental funds, faculty development funds, grants, donations, and auxiliary funds.
- Software and/or hardware not purchased by, or approved by, the University is not to be installed or used on University computer hardware.
- SDM IT will not provide support for non-SDM personnel. Non-SDM personnel include but is not limited to individuals who have left the school's employment, personnel who have retired, and students/residents who have graduated.
- Access to SDM computing resources will be taken away as soon as the IT Department signs an individual's checkout form.

#### **Printing –**

Printing at the school is to be accomplished using networked multifunction printers whenever possible. Desktop printers for individual use are only permitted when authorized by the school administration. Each department and unit must purchase toner for University-owned SDM printers through the IT department.

#### **Hardware -**

- The SDM IT department must purchase or approve all IT devices that will access University resources. When available, warranty coverage must be purchased for IT devices. IT devices include desktop and laptop computers, printers/MFPs, scanners, barcode/OCR readers, signature pads, tablets, and hand-held devices (iPods, iPads, smart phones, tablets). Devices must meet the minimum specifications recommended by IT personnel. For assistance with IT related purchases, send an email to [sdmit@ucdenver.edu](mailto:sdmit@ucdenver.edu) stating the equipment you wish to purchase. The IT department will contact you to work out the details.
- All IT devices purchased with school funds (departmental funds, faculty development funds, grants, donations, auxiliary funds) are the property of the school and must be returned upon termination of employment or when the device is no longer in use.
- Phone, iPad/iPod, laptops, and Apple computers will be purchased for faculty only when authorized by the school administration.
- If a tablet computer is authorized for purchase, it must be an Apple iPad.
- Lost, stolen, or damaged IT devices are the end user's responsibility.
- Only devices with intact security features will be supported and allowed to access SDM resources. Rooted or jailbroken devices are not permitted.

#### **Software –**

- All of the computers in the School of Dental Medicine must be on a supported operating system using supported software (examples are MS Office 2016, Mac OS 10.12, and Windows 10). Exceptions will be made for users that are using special devices or databases that are only compatible with outdated programs or alternative Operating Systems. IT will try to support these outdated devices/programs but cannot guarantee outcomes. If a computer cannot be updated and patched, according to OIT guidelines it will not be allowed on the University network.
- Software purchased with personal funds cannot be installed on University owned devices without prior approval from SDM IT. (exception for Apple devices)

- All software, applications and services used for SDM purposes requires at least two administrator level accounts managed by SDM IT. This includes but is not limited to: programs purchased with University funds, free/donated software, and programs used on or to access SDM devices or data.
- Any new software acquisitions require coordination and approval from SDM IT prior to purchase/installation/use. As part of this process, a non-IT administrator/owner must be identified.

### **Apple Devices-**

All Software available via Mac or iOS App Stores:

- Non-SDM Owned Apple Devices:
  - In order to receive SDM-paid software, these devices will be enrolled in JAMF
  - All SDM-paid Software will be pushed during course of study, and removed after graduation or termination. This software is supported by SDMIT
- SDM-Owned Apple Devices:
  - All devices must be enrolled in JAMF
  - No Hardware Upgrades are allowed
  - Personal Apple IDs are allowable for paid/free apps for work-related purposes, but are not supported by SDMIT
  - All SDM-paid Software will be pushed during course of study, and removed after graduation or termination. This software is supported by SDMIT
  - All requests for paid software will be approved and managed by SDMIT and pushed by JAMF. These software titles will fall under the “supported” category so long as the app continues to be supported by the vendor and compatible with the SDMIT infrastructure

All Software NOT available via Mac or iOS App Stores:

- All SDM-purchased app licenses must be recoverable upon graduation or termination
- SDMIT will document the licenses purchased with SDM funds, and will perform a recovery process in addition to checkout process for any outstanding licenses

### **Jamf-**

- All Apple devices are subject to enrollment in the School of Dental Medicine mobile device management software, Jamf. This enables SDM IT to maintain device compliance by including, but not limited to: approved applications, pushing software updates and patches, and troubleshooting issues that may arise. axiUm access will only be given to Apple devices that are enrolled in JAMF
- SDM IT holds the right to restrict or delay software upgrades through Jamf to prevent incompatibility with other applications or systems within the University.
- Upon graduation or termination, students/residents and employees will be unmanaged and removed from Jamf

### **axiUm use –**

axiUm licenses will only be installed on devices that are supported by the IT department (see above) or a device that is specifically authorized by IT/Administration. We have multiple versions of axiUm that are used for reasons such testing, training, and reporting. Our production environment is labeled “axiUm”. Please



ensure that you are always accessing the correct version of axiUm. This is indicated by the text next to the axiUm icons, as well as a background label once you have logged in to the application.

#### **Data Security –**

- Users assume all liability related to loss of data from their use of any IT device on campus or off. Devices include laptop computers, flash/USB drives, external hard drives, CD's/DVD's or any other device that contains SDM related data. This includes all data with PHI, HIPAA/FERPA, or monetary value. Please review HIPAA/FERPA regulations as there are personal consequences for violations of the act.
- Users must log off/lock before leaving any system they are using to make sure other people cannot use the computer under their login credentials.
- While using SDM computing resources, users should not save any credentials when prompted by webpages or applications.
- Passwords must be changed every 90 days in accordance with University policy. Passwords must not be shared with other users or written down where they can be accessed by others.
- Electronically communicating PHI with any means other than university email is not allowed.
- Each individual is responsible for saving data from their computer. IT can assist you in configuring network or backup drives to ensure successful strategies for saving data. Network Drives (e.g. H,G,O drives) are backed-up every night. IT is not responsible for data saved locally on the computer (e.g. Desktop/C/Local Drive).
- OneDrive (Microsoft) and ShareFile (Citrix) are approved for hosting HIPAA/FERPA data. All other cloud sharing platforms (including Dropbox) are not allowed or approved for hosting HIPAA/FERPA data.
- University-owned mobile devices (tablets/phones/iPods) must have a password lock on them.
- University-owned mobile devices must have a case on them to prevent damage.
- University-owned laptops must be encrypted. University-owned desktops that are off campus must be encrypted.
- A waiver for encrypting your laptop/desktop can be obtained from OIT if approved.
- Any attempt to bypass security protocols that are in place is prohibited.  
It is the responsibility of the user to protect any access controls they use including but not limited to: Computer passwords and passphrases, Campus ID badges, one-time token fobs and/or applications/apps, Encryption keys and certificates, and password storage applications/apps. Users must not share or allow to be shared any access controls for which they are responsible.
- For any user-maintained devices (laptops, cellphones, iPads) that access university data and have local passwords, pin codes or other access control methods, the user is responsible for maintaining these methods such that they are compliant with the University password requirements (complexity, must not be based on common words; change frequency, etc.,) where possible. Contact SDM IT personnel for guidelines where this is not possible.
- Any indication of security compromise including but not limited to: data theft, malware or virus activity, theft or loss of computing devices, account compromise, etc. must be reported to SDM IT immediately upon discovery.

#### **Computer Usage –**

- Computing resources should be used for SDM related work only. Streaming music, videos, online chatting, personal shopping, or any excessive personal internet use while in the School of Dental Medicine building is prohibited. Please consult the IT department if you have any questions.

- Abusive or offensive language in any electronic communication including emails, shared files, or any other SDM document is prohibited.
- In order to connect personal computers to the CU Anschutz (Secured) wireless network, SDM Wired networks, or UCDenver VPN networks, you must maintain your computer or device such that it has: secured credentials for all accounts that meet university requirements, monthly security patches including current officially supported Operating System, application patches by the vendor/s are applied in a timely manner (when available), an up-to-date approved and operational antivirus is maintained, all content on the device is legal, adheres to university policies, and is appropriately licensed.
- Be aware, the University reserves complete rights to the personal computer/device connected to its secured network; including data and the device itself.
- Computing devices that are non-compliant may be administratively disabled for security purposes.

#### **Email –**

- University email is not to be used for personal gain, entertainment, or for political advocacy.
- Upon graduation, students/residents will be removed from the [Students-Dentistry@cuanschutz.edu](mailto:Students-Dentistry@cuanschutz.edu) distribution list.
- The email distribution list for a graduating class will be deleted 1 month after graduation.
- Automatic email forwarding from UCD email to any other email service is not allowed

#### **Telecom –**

Any telecom (fax, credit card line, phone) related issues such as activation, disconnecting of line, transfer of phone jacks, name display change, voicemail setup and any other telecom issue must go through IT.

#### **Ethernet Access Points –**

Use of unauthorized hubs and switches is not allowed in the building. If a department needs more internet jacks, installation cost will come from department funds. Contact SDM IT with any requests to add or move internet jacks.

#### **Audio/Visual support –**

SDM IT does not support hardware outside of the SDM facilities listed in the Introduction paragraph of this policy. Technology Support Services (TSS) should be contacted if there are any issues in any building other than the School of Dental Medicine facilities. If out of the ordinary, audio visual or other computer resources are required for a class or meeting in another building, TSS should be contacted in advance to provide the requested services.

#### **Recording –**

With certain exceptions, you cannot use video or audio recording devices inside the SDM building. Devices include cell phones, cameras, audio and/or video recorders, or any other electronic recording device. Recording devices may be used to record within the clinical areas for academic assignment or work purposes only. They can be used in other areas with the permission of the person being recorded and the appropriate consent forms completed (e.g. HIPAA/FERPA release form, or other permission form if needed).

#### **Personal Data –**

Personal data is not allowed on any SDM computer or any of the shared drives. All data on any SDM owned IT device is University property and therefore public.

### **Policies specific to faculty**

#### **Computer rights –**

For security reasons, faculty members placed on Administrative leave will lose their login privileges for the duration of the leave. Privileges will be reinstated upon their return to SDM employment.

#### **Vital Source –**

Vital Source privileges will be given to all full-time faculty and some part-time faculty at the department chair's discretion. Privileges will be revoked upon conclusion of service to the SDM.

#### **Printers –**

- Printers will not be purchased for new faculty members. Faculty members may keep any existing printers as long as they are paying for the maintenance and purchasing the toner from their development account. Funds to cover these costs cannot come from their department funds or a grant.
- SDM IT will support only individual printers and department printers (3-D printers) that are identified as integral. Multifunction Printer/Copiers are supplied to each area of the school, with the school covering the complete cost of operation for these machines.
- Printers purchased with personal funds are not allowed in SDM facilities.

#### **axiUm license/access –**

Three axiUm licenses will be given to all faculty who are employed at 40% or greater at the school. One license will be dedicated to the faculty member's school computer, one on an iPad and one may be on a personal computer. Windows machines must have an active, up-to-date antivirus program and patches installed. Computers with the Mac operating system must have all the latest apple updates installed and have auto logon switched off. Both Windows and Mac users should check with IT regarding the current recommended software versions. Display/screen saver time out must be set to 10 minutes. A password is required on all computers. For faculty employed 39% or less, access will be allocated based on office availability. A personal/home use license and/or an iPad license for faculty with employment of 39% and less will be evaluated by administration upon request. HIPAA/FERPA training and examination is mandatory and must be updated as required.

### **Policies specific to staff**

#### **Computer rights –**

All users will be unprivileged users unless IT perceives a need for the staff member to be an administrator of their computer. Staff will only be permitted to use a Windows computer. For security reasons, staff members placed on Administrative leave will lose their login privileges for the duration of the leave. Privileges will be reinstated upon their return to SDM employment.

#### **axiUm License/access –**

Two personal/home use licenses for staff will be evaluated by administration upon request. One for a laptop and other for an iPad. Windows machines must have an active, up-to-date antivirus program and patches installed. Computers with the Mac operating system must have all the latest apple updates installed and have

auto logon switched off. Display/screen saver time out must be set to 10 minutes. A password is required on all computers. HIPAA/FERPA training and examination is mandatory and must be updated as required.

### **Policies specific to students and residents**

#### **Student Laptops –**

Students will be supported only if they purchase their computer according to the school's recommended configuration.

#### **Email –**

- Webmail is the only email software supported by IT. There will be no support for any other email software. Webmail is the only official and supported conduit for external access to University email at this time.
- If you are misusing your email account, we will restrict your email address so it cannot send emails to any email distribution list, including your class distribution list. If you misuse your email account after graduation, we will disable it.

#### **axiUm access –**

Students and residents will lose axiUm/Dolphin/Infinit access upon graduation. An extension may be requested via email from their program director.

Students may lose axiUm access if they are not current with the compliance and regulatory requirements of the school as administered through the Compliance portal. axiUm access is reinstated once the student becomes compliant with the required documentation.

#### **Printing –**

A printing quota has been allocated for each DS and ISP class. Please contact the IT department for more details.

#### **axiUm license –**

axiUm access will be given to students and residents on an Apple computer and/or SDM IT approved device only. Computers must have an antivirus program installed, active, and up to date. Computers must have all the latest software updates installed and have auto logon switched off. Display/screen saver time out must be set to 10 minutes. A password is required on all computers. IT will perform random checks of the computers. People who are not following the guidelines will lose axiUm access. HIPAA/FERPA training and examination is mandatory and must be updated as required.

#### **Vital Source –**

The Vital Source library is a digital document and textual library required (no exceptions) by the SDM faculty as part of the DDS and advanced programs' curriculum of the School of Dental Medicine. If you are in good financial standing with the University of Colorado bookstore regarding your Vital Source required semester payments, you will have access to the Vital Source library and its upgrades until your graduation day. Upon graduation, per Vital Source, you will retain all of the books for life but you will not have access to any further upgrades unless you choose to pay a fee directly to Vital Source.

**Policies specific to residents (Graduate Practice residents (GPR), Graduate Periodontics residents, and Orthodontics residents)**

- GPR Residents: A loaner laptop with axiUm will be provided to residents who are covering emergency calls. Residents are responsible for all theft, loss, damage or repair to the loaner computers.
- A school-owned cell phone will be given to residents who are on-call. Residents are responsible for all theft, loss, damage or repair to the phone.
- Vital source – residents will be given a faculty license for use for the duration of the program only.
- Residents with a Mac laptop will be given access to axiUm via the Citrix Apps program; those with a Windows laptop will be given access to the Citrix Desktop program.

**REFERENCES:**

The Health Insurance Portability and Accountability Act of 1996 (HIPAA)  
The Health Information Technology for Economic and Clinical Health Act (HITECH),  
The Family Educational Rights and Privacy Act (FERPA).  
State of Colorado Acceptable Use of State and Personal Assets

**ACCOUNTABILITY:**

All faculty, staff, residents, students and vendors who use or purchase SDM IT or University IT services, applications or devices or who have access to SDM information, data, devices or services are responsible for following all the requirements of this policy. All faculty, staff, residents, and students are responsible to follow any other rules and regulations related to information or data security and confidentiality that are currently written or may be written in the future, even though this policy does not specifically address those rules and regulations at this time.

**AUTHORITY:**

The SDM Dean and other members of the Executive Team, the SDM IT Director, the Information Technology department members, the University Office of Information Technology (OIT), and any other University departments or individuals who have responsibility for HIPAA, HITECH, FERPA or information and data security and confidentiality have the authority to enforce this policy.

**REVIEW and APPROVAL:**

This policy will be reviewed on an annual basis or sooner, as needed, but not to exceed 3 years.

The policy is reviewed and approved by the SDM IT Director, the SDM Operations Committee, SDM Faculty Senate, and SDM Executive Committee.

## Conflict of Interest

### University of Colorado Denver/Anschutz Medical Campus Office of Regulatory Compliance

Assistant Vice Chancellor of Regulatory Compliance: [Alison Lakin](#)

The University of Colorado Denver | Anschutz Medical Campus encourages and supports outside interactions of its faculty and student employees with federal, state, and local governments, and with business and industry as important parts of their research, education, and public service activities. In limited cases, similar opportunities are encouraged for University staff members as well.

Since outside interactions also carry with them an increased potential for conflict of interest and/or commitment, either actual or perceived, the University should have adequate procedures for identifying potential conflicts through annual disclosure, and ensure rigorous and consistent review of such disclosures. A disclosure in and of itself is not suggestive of any impropriety; rather, it is customary and usual and benefits both the individual and the University. Indeed, full disclosure of relevant information and the establishment of a public record are in the best interest of both the University and its faculty and student employees.

[Office of Regulatory Compliance Website](#)

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At initial hire, faculty have thirty (30) days to read and complete the University's Conflict of Interest Policy.

**Conflict of Interest Policy and Procedures document:**

<http://www.ucdenver.edu/research/ORC/COI/Documents/COI%20Policy%20and%20Procedures.pdf>

**Submission of Conflict of Interest link:**

<https://era.cu.edu/>

Annually in the Fall, all faculty must complete a conflict of interest statement through the website above.

**Per emails from the Office of Regulatory Compliance during the 2019 disclosure period:**

Individuals who have not completed the COIC Disclosures by the end of the disclosure period may be subject to the following penalties:

1. Cannot submit for PHS or NSF funding opportunities.
2. Termination of the activity that creates the conflict of interest, including inability to draw funds from grant and contract speed types or participate in IRB protocols.
3. Funds drawn from a federally funded grant may need to be returned.
4. Divestiture of significant financial interests.
5. Deactivation of employee's badge access to parking and labs.
6. Disciplinary action against the employee up to and including termination.
2. In the case of violation of criminal or civil law, violation may be subject to civil or criminal penalties.
3. Reporting to applicable federal agencies.

## Radiation Use Policy

Revised May 2018

The following policy has been developed in the interest of establishing a consistent standard concerning the use of ionizing radiation within the School of Dental Medicine. This radiation use policy complies with the Federal Radiation Control for Health and Safety Act of 1968, the Consumer-Patient Radiation Health and Safety Act of 1981, and the Rules and Regulations Pertaining to Radiation Control from the Colorado Department of Public Health and Environment. The primary goal of this policy is to assure the safe effective use of ionizing radiation and to minimize the potential risk from adverse biological effects to patients, students, faculty, and staff.

1. Deliberate exposure of an individual to dental radiographic procedures for training or demonstration purposes shall not be permitted unless there is a documented diagnostic need for the exposure by a member of the University of Colorado School of Dental Medicine faculty.
2. No operator (faculty, student, or dental auxiliary) shall hold an image receptor in place for the patient during the exposure. The use of receptor holding devices, bite tabs, or other positioning devices should be used to position the receptor during exposure.
3. The operator must stand at least 1.8 meters (6 feet) from the patient and behind the barrier provided for each x-ray exposure cubicle in the School of Dental Medicine. The operator shall be positioned outside the path of the useful beam and be able to directly observe the patient during each exposure.
4. The tube housing, the cone, or the position indicating device for wall mounted x-ray machines must never be hand held during the exposure. If equipment is not stable, report the problem to the radiation protection supervisor for the School of Dental Medicine, and use another unit. The use of hand held mobile x-ray machines is allowed only if the user is properly trained in its operation and State prescribed radiation exposure monitoring is followed.
5. Radiographic machines designed for use with an intraoral image receptor shall limit the source- to-skin distance to not less than 18 centimeters (7 inches).
6. Only shielded open-end position indicating devices will be used in order to minimize scatter radiation.
7. When a cylindrically collimated x-ray machine is being used, the circular beam shall be limited to no larger than 7.0 centimeters (2.75 inches) at the end of the cylinder. When rectangular collimation is used, the useful beam at the end of the collimator shall not have a diagonal measurement of greater than 7.0 centimeters (2.75 inches).
8. Only digital image receptors shall be used. Traditional intraoral film of speed rating "F" may be used in emergency situations.
9. Each dental x-ray machine shall contain filtration of 2 mm of aluminum equivalent if operated at less than 70 kilovolt peak (kVp), and 2.5 mm of aluminum equivalent if operating at 70 kVp or above.
10. Lead aprons will be used on all x-ray patients of the School of Dental Medicine as an additional precaution to prevent unnecessary scatter radiation exposure to the body of the patient. Thyroid shields shall be used in all situations, except when diagnostic information will be lost by their use (panoramic and some extraoral radiographic procedures).

11. Periodic radiation protection surveys and inspections will be made according to State Regulations. All recommendations by the radiation safety officer concerning collimation, filtration (HVL), beam alignment, roentgen output, radiation leakage, etc., will be implemented immediately.
12. All operators will follow prescribed exposure techniques. Appropriate exposure values will be mounted on the wall of each x-ray exposure cubicle or designated by the control panel of the x-ray machine. Instructions for scanning digital receptors will be available in the Oral and Maxillofacial Radiology area.
13. As a general policy, all newly admitted patients to the School of Dental Medicine must have adequate oral and maxillofacial radiographic examinations to assist in diagnosis prior to treatment in the school's clinics. In all situations, the need for radiographs shall be determined by using high-yield selection criteria as the basis of professional judgment. The following shall be adhered to in regards to criteria for exposure:
  - a. All radiographic imaging shall be prescribed in by a licensed dentist.
  - b. Imaging ordered on a routine basis or for screening purposes will not be permitted.
  - c. A radiographic examination shall not be ordered before the patient's medical and dental history has been reviewed and an initial extraoral and intraoral evaluation has been completed.
  - d. If prior radiographs are available, they should be evaluated by a faculty member before new images are prescribed. Only those additional views needed for complete diagnosis and treatment planning should be exposed. The faculty member will determine if sufficient time has passed, since the patient's last radiographic examination, to warrant a new examination.
  - e. Imaging should be completed only on patients capable of compliance or under appropriate sedation.
  - f. Subsequent follow-up (recall) radiographic examinations for School of Dental Medicine patients will be based on the diagnostic need of the patient as determined by the faculty dentist after a thorough health history review and oral examination of the patient.
  - g. Imaging obtained for administrative purposes only, including those for insurance claims or legal proceeding, should not be made.
  - h. Images of patients shall not be made merely for the purpose of training or demonstration.
  - i. The following shall apply to dental board examination patients:
    - 1) Request for images for all board examination patients shall be ordered by a licensed dentist.
    - 2) Images on patients should not be made for testing purposes alone. Images acquired should contribute to the proper diagnosis and treatment of the patient.
    - 3) Images made on site for, or as part of, board examinations shall be made in compliance with the School of Dental Medicine's radiation use guidelines.
    - 4) The type and number of images needed shall be dictated by the oral and maxillofacial disease clinically evident or suggested by the history or other tests.



- 5) Images should not be required at specific time intervals to document treatment progress for board certification purposes. Rather, the clinical progress as monitored by the candidate (and his or her mentor in the case of a student) should be used as a guide to the need for imaging.
- j. Newly admitted adult patients will generally receive a radiographic examination to determine a base-line for the patient. This may include a panoramic image, bitewings, selected periapicals, or a series of full mouth radiographs (FMX).
  - k. Edentulous patients may receive a complete edentulous periapical series, a panoramic image, or a combination of occlusal and periapical images as deemed appropriate by the faculty dentist. Nevertheless, edentulous surveys will usually contain fewer image receptors than a comparable FMX of dentate patients.
  - l. Patients under 12 years of age may receive either a complete child periapical survey and bitewings, a panoramic image with bitewings and selected periapical views (if indicated), bitewings only, bitewings and selected periapicals and occlusals, or no images if none are indicated. The complete child periapical survey will vary depending on the age of the child; however, all child surveys will contain fewer images than the adult periapical survey.
  - m. The radiation exposure of endodontic patients for pre-operative and post-operative images will be kept to a minimum level consistent with clinical requirements. The limits of exposure in each case will be determined by the professional judgment of the faculty dentist. Where possible, a single image at each stage of the endodontic procedure will be acquired. Multiple images from different angles may be acquired on a restricted basis and only when the information to be gained is considered to significantly enhance the diagnosis and treatment. When multi-angle projections are required, documentation of their need will be made in the treatment record by the supervising faculty.
  - n. Emergency patients will receive only those images needed to diagnosis and treat the immediate emergency problem.
  - o. The Dental Radiographic Selection Criteria Panel<sup>1</sup>'s recommendations shall be followed in regard to radiographic examination of pregnant patients. Quoting directly, "Accordingly, there appears to be no rationale to preclude a properly justified dental radiographic examination because of pregnancy. In some cases, radiography may be arbitrarily deferred during pregnancy for purely psychological reasons." Appropriate protective shielding of the patient will always be used.
14. Radiation monitoring of operator exposure will include the following:
- a. All members of the faculty and staff who regularly use x-ray equipment will wear a dosimeter at all times while at work.
  - b. Records of monthly, quarterly, yearly, and total cumulative exposures will be kept as a permanent record and will be available for inspection by the employee.
  - c. Radiation Safety Officer monthly and quarterly review of occupational Maximum Permissible Dose (MPD) limits and ALARA Levels

Table: Applied Annual Occupational Dose Limits for Adults\* and Related ALARA Reporting Levels for Cumulative Quarterly Totals (mSv)

Part of Body	Applicable Annual Occupational MPD	Quarterly ALARA Level I Limit	Quarterly ALARA Level II Limit
Whole Body <sup>1</sup>	50	1.25	3.75
Skin of Whole Body <sup>2</sup>	500	12.50	37.50
Extremity <sup>3</sup>	500	12.50	37.50
Lens of Eye <sup>4</sup>	150	3.75	11.25

The ALARA limits are defined by

- (I) one tenth of one quarter of the applicable annual MPD (ALARA Level I), and
- (II) three tenths of one quarter of the applicable annual MPD (ALARA Level II).

\*These limits apply to ADULTS ONLY -the limits for minors are one tenth of those shown in the table. The Maximum Permissible Dose for fetal dose to a declared-pregnant workers (form available from the Radiation Safety Officer for the School of Dental Medicine or from Environmental Health and Safety/Radiation Safety) is 5 mSv over the full term of gestation. The RSO shall make efforts to avoid substantial variation above a uniform monthly exposure rate to a declared pregnant woman. Reported fetal doses in excess of 0.1 mSv in any month are generally reported to the declared-pregnant worker and investigated by the Radiation Safety Officer.

<sup>1</sup>e.g, deep dose reported on the whole-body dosimeter

e.g., shallow dose reported on the whole-body dosimeter

<sup>3</sup>e.g., finger dose reported on a ring dosimeter

<sup>4</sup>e.g., eye dose when reported separately on an eyeglass dosimeter

15. Documentation of all images and radiation exposures will be maintained in the patient's electronic record. The patient's <sup>1</sup>treatment record should include the date, prescription detailing type and number of images and any remakes necessary. The number of images acquired should also be entered.
16. The School of Dental Medicine will have a Quality Assurance Program designed to produce images of consistently high quality with minimal exposure. This program will consist of the following:
  - a. Projection Techniques

- 1) Before students will be allowed to acquire images on a patient, they will have didactic instruction in oral and maxillofacial radiology plus laboratory instruction in acquiring images on a mannequin. Successful completion of required courses will be necessary in order to acquire images on patients.
  - 2) There will be direct supervision of all students during their first clinical experiences in radiology.
  - 3) All radiographic examinations will be reviewed for errors by faculty or staff immediately after they have been scanned or acquired. When practical, the patient will not be dismissed until indicated remakes have been completed. Students who must remake 4 or more images will be directly supervised and instructed by faculty and / or appropriate staff member.
  - 4) Receptor holders and alignment devices will be used to aid students in the correct alignment of the position indicating device, the receptor, and the area of interest.
- b. The x-ray equipment in the School of Dental Medicine will be inspected by an official approved by the State at a frequency that complies with current federal and state regulations. The results of these tests and any corrective measures taken will be maintained by the School of Dental Medicine radiation safety officer. If during the routine use of any x-ray machine, an error is noted in its operation, the machine will immediately be put out of service until the appropriate corrective repairs can be made. Any suspected malfunction should be reported to the radiation safety officer so that appropriate corrective measures may be instituted.
  - c. All digital processing systems shall be maintained and operated in such a manner that insures optimum diagnostic quality of images. The receptors should be inspected on a regular basis and any damaged or inoperable receptors will be removed from patient care activities.
  - d. All lead vests within the School of Dental Medicine will be inspected on a semi-annual basis. Defective vests will be removed from service and replaced with new vests accordingly. In order to track the inspection process and maintain records for each vest, an inspection label will be placed on each apron, which includes the dates of inspection. A summary of the inspections will be kept in an electronic format (such as Microsoft Excel). While there are no government guidelines in place to evaluate whether an apron passes or fails an inspection, there are some industry norms. Many states, hospitals and research organizations use the widely cited article entitled "Inspection of Lead Aprons: A Practical Rejection Model" of Ors. Pillay and Stam (Health Physics, volume 95, No. 2, August 2008). This article gives criteria to aid in determining when lead aprons should be discarded, such as:

#### Tearing

For a single apron with a .50 lead/lead equivalency, tears of more than 5.4 cm in length are cause for rejection. Smaller perforations or cracks in the edges can result in rejection as well, depending on the length and width of the apron as compared to the size of the defect.

### Thinning

Thinning of the lead and the outer protective layer of the apron also warrants rejection. Thinning is the result of prolonged use, and creates a floppy, comparatively lightweight apron that can expose the patient or health care worker to lead. Thinning is determined by measuring thickness in relation to the size of the apron.

### Defective Velcro, Buckles or Ties

Irreparably broken apron closures warrant an inspection failure. Each lead apron is designed to protect different areas of the body. For example, an apron used at a dentist's office is high around the neck to ensure complete coverage of the thyroid gland. Broken Velcro or other closure mechanisms will cause the unsecured apron to slide downward, exposing the gland to harmful x-rays, and is therefore not acceptable.

### Defects in relation to placement

Defects near certain organs will cause an apron to be rejected such as a 1.8 cm tear over the thyroid, etc. These values are for a single apron comprised of .5 mm lead (or lead equivalent).

**In the School of Dental Medicine, the following inspection process will be completed every 6 months:**

Visual (looking at the apron) Tactile  
(feeling the apron for holes) X-ray  
(when indicated)

**Visual** - lay the apron out on a clean, flat surface and visually inspect for any tears, perforations or imperfections (such as bumps) that may warrant further inspection. Take note of the apron closures (Velcro, buckles, etc.) to ensure that they are in proper working order.

**Tactile** - run your hands over the entire surface of the apron to find any thinning of the lead or creases. Some people prefer to lay the apron down to perform the inspection. Another method is to hang the apron on an apron rack and place one hand on the front and one hand directly on the back of the apron. Keeping your hands directly parallel to each other, slowly run both hands up and down the surface area of the apron, noting anywhere there is a thinning or creasing of the material.

**X-ray** - Fluoroscopic equipment is not readily available in the School of Dental Medicine, so an x-ray method will be used as a suitable alternative. Each vest will be closely inspected for kinks and irregularities. If identified, a radiograph of suspect areas may be acquired and interpreted for any breaks in the lining (typically appearing as dark slashes). Defective vests will be removed from service.

17. Radiographic procedures will be completed following institutional infection control guidelines. All patients will be treated as potentially infectious and the following will be adhered to:

- 1) Since potentially infectious patients may have no evidence of a problem, the patient's medical history will be evaluated for indications of infectious disease.

- 2) Protective gloves, masks, and eye wear will be worn during receptor and tube placement and during digital processing to minimize risks to the operator and the patient.
- 3) Operators will wash their hands as they enter the clinic and after removing their gloves at the completion of the procedure.
- 4) Supplies and receptors will be kept on a covered work surface.
- 5) Receptor holders will be sterilized prior to patient use and left unopened until the procedure begins. Disposable items and supplies will be used whenever practical.
- 6) The control panel, tube head, exposure button, and position indicating device will be covered with disposable plastic wrap. Any other surface likely to be touched during the radiographic examination will also be covered. At the completion of the procedure, all surfaces will be wiped down with the appropriate disinfectant while using the School's prescribed protective gloves, masks, glasses and gowns.

I have read and understand the CU School of Dental Medicine' Radiation Use Policy.

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Print Name

Date

---

Signature



ENVIRONMENTAL HEALTH AND SAFETY | RADIATION  
SAFETY

## Declaration of Pregnancy

In accordance with CDPHE regulation 6CCR 1007-1, "Dose to an Embryo\Fetus," I am declaring that I am pregnant.

The estimated date of conception is \_\_\_\_\_

I understand that the above regulation requires licensee to "ensure that the dose to an embryo/fetus during the entire pregnancy, due to occupational exposure of a declared pregnant woman, does not exceed 0.5 rem (5 mSv)," and also requires licensee to "make efforts to avoid substantial variation above a uniform monthly exposure rate to a declared pregnant woman." A declared pregnant woman is defined in 10 CFR 20.1003 as a woman who has voluntarily informed her employer, in writing, of her pregnancy and the estimated date of conception.

Signature\_\_\_\_\_Date\_\_\_\_\_

Printed Name\_\_\_\_\_Employee ID\_\_\_\_\_

Submit original signed form to EHS, Mail Stop F484, or deliver to Bldg. 401, Rm. 202.

## **Inclement Weather Policy**

Title: Inclement Weather Policy  
Source: Dean's Office  
Approved by: Dean Kassebaum  
Effective Date: November 29, 2012 (Revised 1/25/2013) (REVISED: 12/13/2013, 10/04/2019, 10/06/2020, 10/29/21)  
Prepared by: Dean's Office

### **Policy:**

To be consistent with the University of Colorado Anschutz Medical Campus' policy regarding the campus remaining open during periods of inclement weather, the CU School of Dental Medicine's educational and clinical operations will make every effort to remain open in the event of inclement weather. The decision to stay open and/or to cancel specific clinical operations or didactic classes, will be determined by the School's administrative committee (see Appendix A) and communicated to the students, faculty, and staff by email distribution and website announcement.

When the School's clinical operations remain open, personnel and students are expected to be at work/school. If faculty and staff are unable to make it in, due to acts of nature, they will be required to take a vacation day. Students who are unable to attend regularly scheduled clinical assignments and/or didactic classes will need to inform their coordinators, clinic managers, rotation program directors and course directors prior to the start of the work day.

Didactic classes will be held unless the course director or Associate Dean of Academic Affairs deems it necessary to cancel individual or all classes. Every effort will be made to conduct classes and course attendance policies outlined in the syllabus will be adhered to if the class is not cancelled. However, recognizing the varying severity of local weather and driving conditions within the Greater Metro Denver area, students will be given the opportunity to make up missed course work on days of severe inclement weather.

### **Protocols:**

#### *Inclement weather situations with advance warning:*

When possible, the School's administrative Inclement Weather committee (see Appendix A) will meet on the day preceding the storm to determine the potential impact of the storm on our educational and clinical operations. An email will be sent communicating any possibility for closure.

The morning of the storm, the administrative Inclement Weather committee will reconvene by conference call to make an assessment of the extent of the storms impact throughout Greater Metro Denver taking into consideration road and school closures throughout the area and their impact on our programs and operations.

*Inclement weather situations without advance warning:*

In the event that a weather situation unfolds during normal business hours, the administrative Inclement Weather committee should convene to discuss the forecast and impact on didactic and clinical schedules. Decisions should take into consideration the start of a significant wave of patient visits (e.g. prior to 9 am and 2 pm clinic starts), travel conditions for patients to get to the clinics, and the ability for patients, staff, students and faculty to safely leave the clinics.

Regardless of the timing or method for discussion, the administrative Inclement Weather Committee should determine one of three courses of action:

1. All educational and clinical activities will operate on a regular schedule;
2. All educational and/or clinical activities will be on a delayed start, early departure; didactic teaching may be done remotely and will be determined by Course Director.
3. Only emergency care services will be provided on site between 8:00 am – 5:00 pm with after hour care by the resident(s) on call. General Practice Residents will cover emergency clinical operations.

Should option 2 or 3 be selected, then an announcement will be made via email, text/email for patients, on Facebook, and on the website. Announcements should only be made that are agreed upon by the administrative team, at the time determined by the administrative team.

1. When the School's educational and clinical operations remain open, faculty, staff, and students are expected to be at work/school. In the case of emergent care only, the staffing requirement will be core personnel (see Appendix B). But note, remote or hybrid-remote faculty/staff scheduled to work that day(s) will still be required to work as per AMC Campus Remote Work Policy ("Campus Administrative Policy #4032, Alternative Work Schedules and Remote Work Arrangements"-Link: [https://www.ucdenver.edu/docs/librariesprovider284/default-document-library/4000-human-resources/4032--alternative-schedules-and-remote-work-arrangements.pdf?sfvrsn=3ee7f3ba\\_2](https://www.ucdenver.edu/docs/librariesprovider284/default-document-library/4000-human-resources/4032--alternative-schedules-and-remote-work-arrangements.pdf?sfvrsn=3ee7f3ba_2) )

***Clinical Operations when School is Open***

In an effort to ensure continuous clinical care, a core group of faculty and staff have been identified to make certain that each of their areas are functional on inclement weather days (see Appendix B). This core group will be responsible for communicating with those faculty and staff listed as primary and secondary core personnel to confirm that one or both of these individuals will be able to make it to campus (see Appendix C).

If faculty, staff, or students are unable to make it in on an inclement weather day in which the School is open, absences must be reported per the following:

1. Faculty must inform their department chairs and/or program directors;
2. Staff must inform their supervisors, back-up staff, and program directors/department chairs;
3. Students must inform their clinic coordinator, clinic manager, rotation program director, or course director, as appropriate per their daily schedule;
4. Department chairs must inform the Associate Dean of Clinical Operations.



### ***Canceling Didactic Classes when School is Open***

If a course director considers cancelling a didactic class when the School is open, he/she must first contact their department chair to determine if someone else is able to cover their class. If not, and the class is to be cancelled, it is the course director's responsibility to send an email to the entire class in a timely manner, keeping in mind that individuals give themselves additional time to get to campus during bad weather.

### ***Closing of Clinical Operations and Didactic Classes***

In the event of a storm with very significant snowfall or rain, the Associate Dean for Clinical Operations and the Associate Dean for Academic Affairs will consult about clinic and didactic class closure before 5:00 AM. They will alert the Director of Communications or Communications Manager/Coordinator who will ensure that:

1. An announcement will be made via email to all faculty, staff, and students prior to 5:30 am on the day of the storm (when possible); Responsibility: SDM Communications
2. The main phone line, as well as each of the clinic direct lines, will be forwarded to x46901; Responsibility: SDM IT
3. The message at x46901 will inform anyone calling the School that the building is closed due to inclement weather. Responsibility: SDM IT
4. The Director of Communication or Communications Manager/Coordinator will use the "Indeveau" patient communication tool to send email and text messages to patients scheduled for the day. Responsibility: SDM Communications
5. The Communications team member will work with SDM IT to create patient email messaging, voicemails and text messaging (if applicable) through the SDM IT's platform (draft messages below). Responsibility: SDM Communications and SDM IT
6. The Director of Communication or Communications Manager/Coordinator will place an announcement on the School's website announcing a delayed opening or closure. School's new website: [www.dental.cuanschutz.edu](http://www.dental.cuanschutz.edu).

***Draft messages- these are subject to change given the weather and different scenarios***

*Inclement weather situations with advance warning:*

#### **Email Subject Line: Severe Weather Predicted, Your Dental Appointment**

[CU School of Dental Medicine logo, email banner]

#### **Severe Weather Predicted**

*How it May Affect Your Dental Appointment*

Dear [First Name],

With severe weather predicted to hit our area, the CU School of Dental Medicine is closely monitoring conditions.

We ask that you **please check your email and text messages** for the latest information about your dental appointment.

All clinic delays and closure information will be available:

- On our website: [www.dental.cuanschutz.edu](http://www.dental.cuanschutz.edu),
- Our clinic phone line: 877-463-6070, and
- On our CU Dental Facebook page: [www.facebook.com/CUDental](https://www.facebook.com/CUDental)

If you have questions about your appointment, or if you need to reschedule please call your clinic:

- CU Dental Team Care Clinics: 303-724-2273
- Adolescent Dental Clinic: 303-724-8336
- Dental Faculty Practice: 303-724-5505
- General Practice Residency: 303-724-6941
- Graduate Periodontics Clinic: 303-724-7009
- Orthodontics Clinic: 303-724-7002
- Oral and Maxillofacial Surgery: 303-724-4672

Thank you and please stay safe.

Sincerely,

The CU Dental Team

### **All Clinics - Voicemail to Patient – Day Before**

Hello [First Name].

With severe weather predicted to hit our area, the CU Dental Clinics are closely monitoring conditions.


We ask that you **please check your email and text messages** for the latest information about your dental appointment.

All clinic delays and closure information will be available:

- On our website: [www.dental.cuanschutz.edu](http://www.dental.cuanschutz.edu),
- Our clinic phone line: 877-463-6070, and
- On our CU Dental Facebook page: [www.facebook.com/CUDental](https://www.facebook.com/CUDental)

Thanks and stay safe.

### **Day Before Text Message**

Your CU Dental appointment is  Please check text msgs for info about possible weather delays and closures.


### **Email Subject Line: Clinics on Delayed Start, Your Dental Appointment**

[CU School of Dental Medicine logo, email banner]

#### **CU Dental Clinics On A Delayed Start**

*Morning Appointments Cancelled, Afternoon Appointments On-Time*

Dear [First Name],

Because of severe weather, the CU School of Dental Medicine is on a delayed start today, . Morning appointments are cancelled. Someone from our clinic team will call you to reschedule your appointment.

At this time, all afternoon appointments are scheduled to occur on time. With the inclement weather and road conditions, please give yourself extra time to make it to your appointment.

If you need to reschedule your appointment, please call your clinic after 10:00 a.m. at the number below:

- CU Dental Team Care Clinics: 303-724-2273
- Adolescent Dental Clinic: 303-724-8336
- Dental Faculty Practice: 303-724-5505
- General Practice Residency: 303-724-6941
- Graduate Periodontics Clinic: 303-724-7009

- Orthodontics Clinic: 303-724-7002
- Oral and Maxillofacial Surgery: 303-724-4672

Thank you and please stay safe.

Sincerely,

The CU Dental Team

#### **Clinics (except DFP and Ortho) – Delayed Start Text**

Because of the weather, CU Dental Clinic morning appointments are cancelled. Afternoon appointments will happen on time. Check website for info.

#### **Clinics (except DFP and Ortho) – Delayed Start Voicemail to Patient**

Hello [First Name].

Because of severe weather, the CU School of Dental Medicine is on a delayed start today, [DATE]. Morning appointments are cancelled. Staff will call to reschedule your appointment. At this time, all afternoon appointments are scheduled to occur on time.

Thank you and please stay safe.

#### **All Clinics– Full Closure**

##### **Email Subject Line: CU School of Dental Medicine Closed Today**

[CU School of Dental Medicine logo, email banner]

##### **CU School of Dental Medicine Clinics Closed Today**

*Appointments Will Be Rescheduled*

Dear [First Name],

Because of severe weather, the CU School of Dental Medicine is closed today, [DATE]. Our staff will call to reschedule your appointment.

Thank you and please stay safe.

Sincerely,

The CU Dental Team

#### **All Clinics – Full Closure Text**

Because of the weather, the CU School of Dental Medicine is closed today, [DATE]. All appointments have been cancelled. Clinic staff will call to reschedule your appointment.

#### **All Clinics – Full Closure Voicemail**

Hello [First Name].

The CU School of Dental Medicine is closed/delayed, today, (DATE) due to hazardous weather. A clinic staff will call to reschedule your appointment. If you are experiencing an emergent or urgent issue, please contact the University of Colorado Hospital at 720-848-0000 and ask to speak to the Dental Resident on-call. If this is a life threatening situation, please go to your nearest Emergency Room, or dial 9-1-1. Thank you and please stay safe.

#### **DFP & Ortho Clinics– Delayed Start**

##### **Email Subject Line: Clinics on Delayed Start, Your Dental Appointment**

##### **CU School of Dental Medicine On A Delayed Start**

*Important Information About your Appointment*

Dear [First Name],

Because of severe weather, the CU School of Dental Medicine is on a delayed start today, [DATE].

Appointments for your clinic scheduled between 8:00 a.m. – 10:30 a.m. are cancelled. Staff will call to reschedule your appointment.

At this time, appointments will resume at 10:30 a.m. and are scheduled to occur on time. With the inclement weather and road conditions, please give yourself extra time to make it to your appointment.

If you need to reschedule your appointment, please call your clinic after 10:00 a.m. at the number below:

- Dental Faculty Practice: 303-724-5505
- Orthodontics Clinic: 303-724-7002

Thank you and please stay safe.

Sincerely,

The CU Dental Team

### **Day of Delay – DFP & Ortho Phone**

Dear [First Name],

Because of severe weather, the School of Dental Medicine is on a delayed start today, [DATE]. Appointments for your clinic scheduled between 8:00 a.m. – 10:30 a.m. are cancelled. Staff will call to reschedule your appointment.

At this time, appointments will resume at 10:30 a.m. and are scheduled to occur on time. With the inclement weather and road conditions, please give yourself extra time to make it to your appointment.

If you need to reschedule your appointment, please call your clinic after 10:00 a.m.

Thank you and please stay safe.

### **Day of Delay – DFP & Ortho Text**

CU Dental is on a delayed start [date]. Appointments before 10:30 a.m. are cancelled. Appointments will resume after that time. Check our website for more info.

### ***Closing of the School- Due to Campus Closure***

In the event of a storm with very significant snowfall or rain, and the campus leadership closes the campus, the school is also to be closed to meet campus requirements. In that case, the same protocols above for “***Closing of Clinical Operations and Didactic Classes***” shall be implemented to communicate the school closure to all faculty, staff, patients and students.

*Per AMC Campus Remote Work Policy ([https://www.ucdenver.edu/docs/librariesprovider284/default-document-library/4000-human-resources/4032---alternative-schedules-and-remote-work-arrangements.pdf?sfvrsn=3ee7f3ba\\_2](https://www.ucdenver.edu/docs/librariesprovider284/default-document-library/4000-human-resources/4032---alternative-schedules-and-remote-work-arrangements.pdf?sfvrsn=3ee7f3ba_2)), during a school and/or campus closure all remote/hybrid-remote work staff, who are scheduled to work, are still required to perform their job duties during the closure.*

## **Clinic Policies and Procedures Manual**

The University of Colorado School of Dental Medicine exists to provide exceptional educational experiences for the next generation of dental professionals, and to provide access to high quality, low cost dental care to the citizens of Colorado and the region.

This Clinic Policy and Procedures Manual serves as a resource for our faculty, staff, students and residents to enhance his/her clinical experience. In addition to School and University policies, as health care providers you must also adhere to State and Federal regulations that are incorporated into the policies and procedures outlined in the CU School of Dental Medicine's Clinic Manual.

The manual is located on the School's website under Faculty Resources:

<https://dental.cuanschutz.edu/faculty/faculty-resources>

Feedback on the manual is always welcome and should be discussed with the Senior Associate Dean of Clinics and Professional Practice.

## Clinic Education Manual

The delivery of patient care by students is an important component of the educational program at the University of Colorado Denver School of Dental Medicine (CUSDM). Just as there are guidelines, requirements and expectations for didactic courses in the curriculum, there are those for clinical courses.

Presently, clinical courses are comprised of two main types - those directed by the comprehensive care faculty and those directed by the clinical divisions such as endodontics, periodontics, orthodontics, pediatric dentistry, oral surgery, operative dentistry, fixed prosthodontics, and removable prosthodontics.

The Clinic Education Manual includes descriptions of clinical course evaluation procedures, clinical divisional expectations and competency examination details. While there is variability in the way that clinical evaluations are performed in all clinical courses, there are some principles common to all.

It is expected that students attend all scheduled clinic sessions and provide ethical, high quality, patient-centered care in all circumstances. Students should follow established clinical procedures and protocols when providing patient care. Violations of these procedures can result in loss of student clinic privileges, a failure to be promoted or dismissal from the School of Dental Medicine depending upon the nature of the violation.

The Clinic Education Manual is provided to students during the Managing Your Student Practice course. The Manual is also located in the Comprehensive Patient Care course shell in Canvas.

## Continuing Education Policy

### Continuing Dental Education (CDE) Discounted Rates Policy for Faculty, Staff, ACTS Preceptors, Active Students, and Alumni

The following policy pertains to current and verifiable faculty, staff, ACTS preceptors, active students, and alumni of the University of Colorado School of Dental Medicine (SDM). Academic Year and Eligibility Cycle begins on January 1 each year. All accommodations supported if space is available, and as a first come first served basis.

#### ALL OPTIONS BELOW ARE FOR THE TWO FREE SPOTS PER COURSE

##### **SDM Faculty**

- Full-Time Faculty
  - Eligible to receive up to 18 hours (18.0 CEUs) of lecture only courses – Free
  - Eligible to attend a maximum of one (1) hands-on/clinic course – Free
  - Local Anesthesia and/or Nitrous Oxide courses – Free
- Part-Time Faculty
  - Eligible to receive up to 9 hours (9.0 CEUs) of lecture only courses – Free
  - Local Anesthesia and/or Nitrous Oxide courses – Free

##### **SDM Staff**

- Full-Time Staff
  - Eligible to receive up to 18 hours (18.0 CEUs) of lecture only courses – Free
  - Eligible to attend a maximum of one (1) hands-on/clinic course – Free
  - Local Anesthesia and/or Nitrous Oxide courses – Free
- Part-Time Staff
  - Eligible to receive up to 9 hours (9.0 CEUs) of lecture only courses – Free
  - Local Anesthesia and/or Nitrous Oxide courses – Free

##### **ACTS Preceptors**

- Eligible to receive up to 9 hours (9.0 CEUs) of lecture only courses – Free

#### IF THE TWO FREE SPOTS PER COURSE ARE TAKEN, HERE ARE YOUR NEXT OPTIONS

##### **SDM Faculty, Staff, and/or Students**

- Eligible to receive 20% off all courses
  - Active Students cannot attend any course with a Company Sponsor involved.

**SDM Alumni**

- ✓ Eligible to receive 10% off all courses
- ✓ All current and verifiable faculty, staff, preceptors, and/or alumni wishing to apply their discounted rates through the CDE Program, must contact the CDE office directly for registration process.
- ✓ Online discounted rates through the RegOnline website not accepted.
- ✓ No Active SDM Students are allowed to register for a Sponsored Course.
- ✓ Registration is not transferable.
- ✓ No combined discounts accepted.
- ✓ Regular rates apply to all guests and/or public.
- ✓ Online discounted rates through the registration website not accepted. There are no discounts available for anyone at our Annual OMFS Refresher Course.
- ✓ If you are unable to attend, please contact us immediately, so we can remove your registration from the class.
- ✓ We will revoke your Discounted Rates for CDE benefit, for two full years, if you do not attend (a 'no call, no show') and/or do not contact us about a need to remove your registration.
- ✓ Please complete the information below and return to [Heidi.Utt@CUAnschutz.edu](mailto:Heidi.Utt@CUAnschutz.edu) to register (an email with this information is also accepted):

Full Name \_\_\_\_\_ University ID Number \_\_\_\_\_

Professional Title and/or Credentials \_\_\_\_\_ Company/Business \_\_\_\_\_

Physical Mailing Address: \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Class you are registering for (title or number) \_\_\_\_\_

Emergency Contact (full name) \_\_\_\_\_ (and phone #) \_\_\_\_\_

Do you have any DIETARY RESTRICTIONS? (Please be specific)

---

Signature \_\_\_\_\_ Date \_\_\_\_\_

If you have any questions, concerns, and/or comments, please contact our office immediately. Sincerely,  
and always encouraging your continued education, Dr. Fernando Astorga, CDE Director and Heidi Utt,  
CDE Manager.



## **Required Training**

## Mandatory Trainings for Non-Research Faculty and Staff



### School of Dental Medicine

UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS

#### Mandatory Trainings for the University of Colorado School of Dental Medicine Faculty and Staff Non-Research

As a health care facility within the University of Colorado, our faculty, students, and staff are required to complete numerous training sessions to remain in compliance with State, Federal, and University laws and policies.

The University of Colorado School of Dental Medicine requires all faculty, staff, and students to complete specific on-line and in-person training sessions as a condition of employment. These trainings, as well as the frequency of completion may change over time and are dictated by State, Federal and University law and policies.

During orientation, new employees will be directed as to which trainings are required within 30 days of hire. Orientation will be in the form of the University held program, as well as the orientation conducted by supervisors or their designees during new employee training. The SDM HR Office will schedule the time for the faculty member to attend the University sponsored Orientation Program.

Reminders for initial completion and renewal of annual trainings will be sent from the School of Dental Medicine's Compliance Portal.

If required training is not completed within set deadlines, employees may be removed from the clinic or other daily responsibilities until all training is completed.

If individuals have any questions or concerns regarding required training, they can contact the School of Dental Medicine's Compliance Officer, Mr. Brian Davis, Associate Dean.

Online trainings can be accessed through the **my.CU** portal (<https://my.cu.edu>). Sign into the my.cu portal using your assigned network sign-on from SODM IT. Choose the "TRAINING" tab on the left. Click on the "Start SkillSoft". SkillSoft will load. Search for the trainings below:

#### **CU: Discrimination and Harassment**

**ID:** \_scorm12\_cu\_u00067\_0001

##### **Overview/Description**

In this course you will learn how to distinguish between discrimination and harassment, explain the different types of discrimination and harassment, identify cases where accommodations must be made (or not made) for a situation, deal with discrimination and harassment behavior, and monitor your own behavior for discriminatory or harassing practices.

## **CU: HIPAA Regulations (this is an annual requirement)**

**ID:** \_scorm12\_cu\_a00020\_0001

### **Overview/Description**

This course will focus on the privacy and security segments of the Health Insurance Portability and Accountability Act (HIPAA).

## **CU: SODM - Bloodborne Pathogens (this is an annual requirement)**

**ID:** \_scorm12\_cu\_u00119\_0001 **Overview/Description**

### **Overview/Description**

This course briefly explains the nature of bloodborne pathogens, how they are spread, and methods of preventing the spread of infections at the School of Dental Medicine.

## **CU: SODM - Chemical Waste Management (this is an annual requirement)**

**ID:** \_scorm12\_cu\_u00120\_0001

### **Overview/Description**

This course describes the types of hazardous chemicals used at the School of Dental Medicine; how to use, store and dispose of chemicals safely; and how to respond to emergencies.

## **CU: Information Security and Privacy**

**ID:** \_scorm12\_cu\_u00063\_0001

### **Overview/Description**

This course will explain why and how you, as an employee of CU, may protect private information.

## **CU: FERPA (Family Educational Rights and Privacy Act)**

**ID:** \_scorm12\_cu\_u00049\_0001

### **Overview/Description**

This course will enhance your understanding of the confidentiality protections that federal law affords the records and information that the university maintains about our students.

## Other Recommended Trainings:

### **CU: Tenure Review**

**ID:** \_scorm12\_cu\_u00071\_0001

#### **Overview/Description**

In this review, you will be introduced to the important components of the tenure track process, as well as university policies that explain the tenure requirements.

### **CU: Research Administration for Faculty**

**ID:** \_scorm12\_cu\_a00139\_0001

#### **Overview/Description**

This course was designed to offer a start to finish guide on the process of applying, receiving, and administering sponsored funding.

**Other Grants and Contracts Training** can be found under the University of Colorado – Courses section of the SkillSoft training environment accessible through the *my.cu* portal. Titles include: ***Budgeting for Clinical Trials, Clinical Trials Recruiting, Direct Charging to Sponsored Projects, ePER electronic Personnel Effort Reporting and Sub-Recipient Monitoring.***

### **CU: Lab Safety Training**

**ID:** \_scorm12\_cu\_u00050\_0001

#### **Overview/Description**

This course covers such risk management and administrative points as the hazards of chemicals and equipment; how to control those hazards; what protective equipment is needed; how to manage inventory and waste; and how to prepare for emergencies.

## Mandatory Trainings for Research Faculty and Staff

### **SKILLSOFT TRAINING FOR ALL RESEARCH FACULTY**

#### **REQUIRED**

CU: RESEARCH ADMINISTRATION FOR FACULTY

CU: SUBRECIPIENT MONITORING

CU HIPAA REGULATION: A00020

CU EPER, ELECTRONIC PERSONNEL EFFORT REPORTING: U00055

CU INFORMATION SECURITY AND PRIVACY AWARENESS: U00063

CU DISCRIMINATION AND SEXUAL MISCONDUCT – CU DENVER/ANSHUTZ MEDICAL CAMPUS: U00067

CU FISCAL CODE OF ETHICS: F00001

CU DIRECT CHARGING TO SPONSORED PROJECTS: U00059

CU BLOODBORNE PATHOGENS-WEB U00069

CU CHEMICAL WASTE MANAGEMENT-WEB: - U00068

CU LAB SAFETY-WEB: U00050

#### **PURCHASING**

CU PROCUREMENT CARD CARDHOLDER TRAINING: U00053

CU: CONCUR – RECONCILING PROCUREMENT CARD: U00093

CU MARKETPLACE – REQUESTOR: U00084

CU PROCURMENT – PURCHASING AND CONTRACT MANAGEMENT

CU MARKETPLACE - RECEIVER

#### **TRAVEL**

CU: TRAVEL AND TRAVEL CARD TRAINING

CU: CONCUR - RECONCILING TRAVEL

CU: CONCUR - BOOKING TRAVEL

#### **(IF WORKING WITH ANIMALS)**

CU: ANIMAL PROGRAM ORIENTATION

CU: DISEASE PREVENTION AND CONTROL IN THE ANIMAL HOUSING FACILITIES

CU: STANDARD OPERATING PROCEDURES IN THE ANIMAL HOUSING FACILITIES

#### **(SUGGESTED)**

CU: ACTIVE SHOOTER AWARENESS

#### **OPTIONAL (IF INVOLVED WITH HUMAN SUBJECTS)**

CITI TRAINING [HTTPS://ABOUT.CITIPROGRAM.ORG/EN/HOMEPAGE/](https://about.citiprogram.org/en/homepage/)

<https://www.citiprogram.org/?pageID=668>

## **SKILLSOFT TRAINING FOR NEW LAB EMPLOYEES (PRAs, Senior PRAs, Research Associates)**

### **REQUIRED**

CU Bloodborne Pathogens-WEB U00069

CU Chemical Waste Management-WEB: - U00068

CU Lab Safety-WEB: U00050

CU HIPAA REGULATION: A00020

CU EPER, ELECTRONIC PERSONNEL EFFORT REPORTING: U00055

CU INFORMATION SECURITY AND PRIVACY AWARENESS: U00063

CU DISCRIMINATION AND SEXUAL MISCONDUCT – CU DENVER/ANSHUTZ MEDICAL CAMPUS: U00067

### **OPTIONAL (IF INVOLVED IN PURCHASING WITH POSITION):**

CU FISCAL CODE OF ETHICS: F00001

CU DIRECT CHARGING TO SPONSORED PROJECTS: U00059

CU PROCUREMENT CARD CARDHOLDER TRAINING: U00053

CU: CONCUR – RECONCILING PROCUREMENT CARD: U00093

CU MARKETPLACE – REQUESTOR: U00084

CU PROCURMENT – PURCHASING AND CONTRACT MANAGEMENT

CU MARKETPLACE - RECEIVER

### **(ADDITIONAL TRAINING REQUIRED IF TRAVEL IS INVOLVED FOR EMPLOYEE)**

[CU: Travel and Travel Card Training](#)

[CU: Concur - Reconciling Travel](#)

[CU: Concur - Booking Travel](#)

### **(IF WORKING WITH ANIMALS)**

CU: ANIMAL PROGRAM ORIENTATION

CU: DISEASE PREVENTION AND CONTROL IN THE ANIMAL HOUSING FACILITIES

CU: STANDARD OPERATING PROCEDURES IN THE ANIMAL HOUSING FACILITIES

### **(SUGGESTED)**

CU: ACTIVE SHOOTER AWARENESS

### **OPTIONAL (IF INVOLVED WITH HUMAN SUBJECTS)**

CITI TRAINING

[HTTPS://ABOUT.CITIPROGRAM.ORG/EN/HOMEPAGE/](https://ABOUT.CITIPROGRAM.ORG/EN/HOMEPAGE/)

<https://www.citiprogram.org/?pageID=668>

## **CU Dental Teams (CUDT) Clinics**

## CUDT Teams, Practice Leader/Advocate Guidelines

**University of Colorado School of Dental Medicine**  
**Abridged Version**  
For full document please go to G:drive/Practice Leader Documents

### OUR STUDENT POPULATION

Dental students are divided into four groups corresponding to their year of study: DS1 (Dental Student First Year), DS2 (Dental Student Second Year), DS3 (Dental Student Third Year), and DS4 (Dental Student Fourth Year). Additionally, dental students in our International Student Program (ISP), an accelerated 2-year program, are divided into two groups corresponding to their year of study: ISP1 (International Student Program First Year) and ISP2 (International Student Program Second Year).

### COMPREHENSIVE CARE PRACTICE TEAMS

All dental faculty members and students are assigned to one of four teams: TEAM C, TEAM U, TEAM D, and TEAM T.

Each team consists of a team leader, practice leaders, coordinators, and students (see Exhibit A). One dental faculty member from the team serves as the *Team Leader*. Some dental faculty members serve as *Practice Leaders*. Staff members serve as *Coordinators* who are responsible for facilitating daily activities. The students on each team are divided into *Practice Groups* and assigned to one of the Practice Leaders.

### TEAM LEADERS:

In addition to the responsibilities of the practice leader (of which the Team Leader is on) the Team Leader is responsible for the distribution of information regarding clinic rules and regulations to team members, assist with patient assignment in cooperation with the screening coordinator, submission of comprehensive care grades, monitoring the students' patient pools to assist in patient treatment needs, management of adverse treatment outcomes, team representation at Student Performance Committee meetings, assist in the development of remediation plans and is the overall evaluator of the student's attainment of clinical competency to be a general dentist.

### PRACTICE LEADER/ ADVOCATE:

A practice leader is the advocate for a group of DS or ISP students. Dental students (DS) meet regularly with their assigned Practice Leader throughout their DS3 and DS4 years. International Student Program (ISP) students meet regularly with their assigned Practice Leader during their ISP1 and ISP2 years.

### MEETINGS:

Faculty and students attend the following regularly scheduled meetings to ensure adequate clinical progress: Advocate Meetings, Practice Meetings, and Team Meetings. In addition, students are also scheduled to meet with the group coordinator in pre-advocate meetings.

Pre-Advocate Meetings are scheduled individual meeting between a student and his/her coordinator to prepare for the Advocate Meeting.

*Advocate Meetings* are scheduled individual meetings between a student and his/her Practice Leader.

*Practice Meetings* are scheduled group meetings between a Practice Leader and assigned Advocate group.

*Team Meetings* are scheduled team meetings between the Practice Leaders, Team Leaders, Coordinators, and students to discuss general information pertinent to the semester.



**Pre-Advocate Meetings** - Prior to the Advocate meetings, the student will meet with his/her coordinator to gather the following information to report to the Practice Leader:

- Patient pool
  - Is it adequate?
  - Management of pool (overdue / not seen)
  - Filter patients (irregular/non-compliant)
- Procedures completed
- Demonstration of progress towards clinical experience thresholds towards the demonstration of clinical competency
- Competencies completed
- Number of unapproved notes and findings
- Number of RVUs ( Relative Value Units - soon to be Educational Value Units)
- Self-Evaluation Form

The Coordinator will ensure delivery of this information, and her Formative Evaluation of the student, to the Practice Leader prior to the Advocate meeting.

**Advocate Meetings** - The Practice Leader serves as a mentor, advisor, and advocate for the individual students in the assigned practice.

Goals:

- monitor that the student is making appropriate clinical progress and has a patient pool that is adequate for the student's level of experience.
- provide a safe environment for the student to be able to relay any sensitive information that might be causing an effect on his/her education
- serve as a point of contact for student/administration interactions
- serve as the primary patient case management resource.
- evaluate students' progress towards ADEA (American Dental Education Association) Domains of Competency to be a general dentist and use a rubric to quantify this progress (See Exhibit B)
  - Critical Thinking
  - Professionalism
  - Communication and Interpersonal Skills
  - Health Promotion
  - Practice Management and Communication
  - Patient Care
  - [http://www.adea.org/about\\_adea/governance/Pages/Competencies-for-the-New-General-Dentist.aspx](http://www.adea.org/about_adea/governance/Pages/Competencies-for-the-New-General-Dentist.aspx)

Practice Leader Responsibilities

Based on the information provided, the Practice Leader and student will collaboratively determine the following:

- areas of strengths
- specific strategies to improve in a weakness area
- progression toward Domains of Competency Rubric
- how to address concerns, find solutions, discuss ways to increase confidence
- the appropriate and ethical management of the students patient pool
- management of patient treatment status at all meetings

**MEETING REQUIREMENTS**

The time and dates of all meeting is located in the student semester schedule.

A. Team Meetings:

All Practice Leaders and students are assigned to one of four teams: Team C, Team U, Team D, and Team T. Team meetings are held periodically, usually once or twice a semester, in order to present information pertinent to the faculty and student involving procedures, clinical protocol, etc. and is also a venue for students to voice concerns about issues they may have at the school. The meetings are organized and presented by the Team Leaders of the Practice Leaders's group.

REFERENCE: CU TEAM STRUCTURE  
STUDENT SEMESTER SCHEDULE

B. Practice Meetings:

The Practice Leaders is responsible for organizing and leading periodic Practice Meetings according to a schedule established by the scheduling coordinator. DS3-4 students have approximately nine Practice Meetings and ISP students have approximately 10 practice meetings.

REFERENCE: GUIDELINES FOR MEETINGS  
RECOMMENDED TOPICS FOR PRACTICE MEETINGS  
STUDENT SEMESTER SCHEDULE

C. Advocate Meetings:

These are individual one-on-one meetings with your advocate students which are scheduled by the scheduling coordinator on a regular basis and are always preceded by a meeting of the student with their coordinator (Pre-Advocate Meeting). These meetings are designed to review the student's clinical progress and particularly, analyze the student's patient pool to ensure that each student has sufficient procedures within their pool to at least meet the semester requirements for competencies. The Practice Leader utilizes the many reports in axiUm to evaluate student performance. It is also an opportunity for the student to discuss personal issues that may influence clinical participation and performance.

REFERENCE: COMPETENCIES  
REPORTS  
STUDENT SEMESTER SCHEDULE

D. Grading Sessions:

Grading Sessions are held prior to the end of each semester and are chaired by Dr. Johnson and the Team Leaders in order to assign End of Semester grades and to address any concerns regarding individual student progress or issues during the semester.

REFERENCE: GRADING

## **PRACTICE MEETING SCHEDULE - DS**

### **1<sup>ST</sup> PRACTICE MEETING (DS2 – Summer Practice Meeting)**

- Introduce Team Structure and practice leader (advocate), coordinator, and team leader
- Establish ground rules and expectations
- Discuss organizational skills in effectively managing a practice
- Discuss work in Axiom
- Discuss how the clinic works
- Discuss patient pool to determine whether students have enough patients and procedures to be in clinic
- Discuss Treatment Plan sequencing
- Discuss leave requests and unexcused absences
- Establish student responsibilities in practice meetings, such as meeting minutes, presentations (if any), food, etc.
- Discuss how to contact patients (phone communication, etc.)
- Discuss George's Rule: Butts in seats (yours and patients) to graduate

### **2<sup>ND</sup> PRACTICE MEETING (DS3 – 1<sup>st</sup> Fall Practice Meeting)**

- Discuss operative competencies
- Discuss specific cases of treatment planning
- Discuss periodic exam
- Use enrichment bank of Power Point presentations developed by other faculty as resource to facilitate discussion or invite other faculty to present
- Invite representatives as guest speakers to discuss various products but with caution as free items cannot be accepted (i.e. lunch, samples, branded materials, gifts, etc.)
- Determine any educational field trips to labs, but be sure to check with Dr. Johnson and Dr. Wilson on protocol\*

\*Note - If you take students off campus please document the event as being part of the educational process. An exchange of emails with the acknowledgement of your chairman will suffice.

### **3<sup>RD</sup> PRACTICE MEETING (DS3 - 2<sup>nd</sup> Fall Practice Meeting)**

- Discuss operative competencies, requirements, and thresholds
- Discuss specific cases of treatment planning
- Use enrichment bank of Power Point presentations developed by other faculty as resource to facilitate discussion or invite other faculty to present
- Invite representatives as guest speakers to discuss various products but with caution as free items cannot be accepted (i.e. lunch, samples, branded materials, gifts, etc.)

4<sup>TH</sup> PRACTICE MEETING (DS3 - 1<sup>st</sup> Spring Practice Meeting)

- Discuss operative competencies, requirements, and thresholds
- Discuss specific treatment planning cases
- Discuss importance of knowing your patients
- Discuss ACTS – DS3 Students only

5<sup>TH</sup> PRACTICE MEETING (DS3 - 2<sup>nd</sup> Spring Practice Meeting)

- Discuss operative competencies, requirements, and thresholds
- Discuss specific treatment planning cases
- Discuss ACTS – DS3 Students only (Most ACTS decisions already made)

6<sup>TH</sup> PRACTICE MEETING (DS3 - Summer Practice Meeting)

- Discuss fixed and removable treatment plans
- Discuss importance of knowing your patients
- Discuss Boards
  - DS4 take National Boards Part II

7<sup>TH</sup> PRACTICE MEETING (DS4 - 1<sup>st</sup> Fall Practice Meeting)

- Discuss case presentations / EBD

8<sup>TH</sup> PRACTICE MEETING (DS4 - 2<sup>nd</sup> Fall Practice Meeting)

- Discuss the process of transferring patients
- Discuss case presentations / EBD

9<sup>TH</sup> PRACTICE MEETING (DS4 – 1<sup>st</sup> Spring Practice Meeting)

- Discuss the process of transferring patients
- Discuss job hunting strategies and career plans

## **ADVOCATE MEETING SCHEDULE - DS**

### **Year 1 – Start Fall DS 3**

#### **1<sup>ST</sup> ADVOCATE MEETING - Fall**

- Introduce yourself
- Provide information about clinic
- Provide an overview of clinical expectations
- Discuss how to manage and build patient pool
- Create rapport with student
- Discuss an efficient workflow as it relates to diagnosis and treatment planning
- Answer questions related to diagnoses and treatment planning (each meeting!)

#### **2<sup>ND</sup> ADVOCATE MEETING - Fall**

- Educate on how to complete ODs efficiently
- Determine status of operative Inform DS3 student that they need to take operative competencies by end of spring semester
- Determine whether patient pool would allow student to be clinically active in all disciplines except endo
- Educate on how to complete ODs efficiently

#### **3<sup>rd</sup> ADVOCATE MEETING - Spring**

- Discuss strategies to build patient pool (should be near complete; one year of clinic left)
- Discuss challenging competencies
- Specifically discuss single unit fixed competencies
- Determine whether DS3 student is ready to go to ACTS\*

\*This meeting will be primarily to assess the students' progression to allow the student to go off campus to provide patient treatment with limited supervision. At this point the students have been in the clinic for a period of 7 to 8 months.

#### **4<sup>th</sup> ADVOCATE MEETING - Spring**

- Discuss strategies to build the patient pool.
- Assess that the student is adding very specific patients that fulfill minimal expectations prior to challenging competencies
- Discuss challenging competencies
- Specifically discuss single unit fixed competencies
- Discuss denture competency
- Discuss multi – unit competency – patient/ manikin
- If DS3 student not released to ACTS – plan need for summer clinic\*

\*Note: If the student is not released to ACT's they will be behind approximately 4 weeks of ACT's time that they will need to make up. They can make this time up by participating in emergency/oral surgery clinic during school breaks.

#### 5<sup>th</sup> ADVOCATE MEETING - Summer

- Discuss single unit fixed competencies
- Discuss denture competency
- Discuss multi – unit competency – patient/ manikin
- Discuss limited transfers to control patient pool size
- Discuss ACTS successes, challenges, and possible solutions to challenges\*

\*Note: If student not in ACT's need to identify and correct deficiencies and advise student of how to make up ACT's time. (Participation in emergency/OS clinic during breaks)

#### **Year 2 – Start Fall DS 4**

#### 6<sup>th</sup> ADVOCATE MEETING - Fall

- Discuss patient pool and any difficulties (endo & removable)
- Discuss denture competency
- Discuss multi – unit competency – patient/ manikin
- Discuss patient transfers

#### 7<sup>TH</sup> ADVOCATE MEETING - Fall

- Determine whether DS4 students have fulfilled all Domains of Competency
- Discuss finishing cases and treatment plans
- Assess progress in organization, work flow, and efficiency

#### 8<sup>TH</sup> ADVOCATE MEETING - Spring

- Determine whether DS4 students have fulfilled all Domains of Competency
- Discuss finishing cases and treatment plans
- Assess progress in organization, work flow, and efficiency
- Assess preparedness
- Ensure that students are transferring patients

#### 9<sup>TH</sup> ADVOCATE MEETING - Spring

- Last DS4meeting – should be little to discuss
- Any problems that may be present – come up with a solution path
- Ascertain if the student is ready to be an independent clinician

## ISP PRACTICE MEETINGS

The ISP class is very diverse in their education, ethnicity and cultural backgrounds. Also, everyone's experience in dentistry is vastly different. Further, everyone's exposure to US, its culture and education system is also very different. Some students have lived in the US for years while others have moved here for the sole purpose of this education. At this time, they have eight practice meetings starting in the summer (entering into clinics) of their ISP 1 year, going on until they graduate. The following would be an option to add 2 additional practice meetings in their first semester agenda, schedule permitting. The goal is to have the ISP students more comfortable/ settled prior to them starting clinics. This way, when they are actually in clinics, they can concentrate on clinics.

### 1<sup>st</sup> PRACTICE MEETING - Spring 1

- Introduction to the practice leader
- Orient to the system – Practice leader, advocate meetings, Practice meetings, Role of Coordinator
- Establish ground rules and expectations
- Reinforce "Cultural Norms" i.e. personal space, line behavior, consumerism of US patients, etc.
- Discuss leave requests and unexcused absences
- Address any concerns and questions
- Keep it cordial – get to know each of your student
- Discuss about your role in their 2 year education

### 2<sup>nd</sup> PRACTICE MEETING – Spring 2

- Reinforce/reiterate 1st Practice meeting discussion
- Address any issues with their time so far
- How axiUm works
- Discuss how to contact patients (Phone communication, etc)
- Comprehensive dental care model
- Establish student responsibilities in practice meetings : time, presentations

### 3<sup>rd</sup> PRACTICE MEETING – Summer

- Discuss how the clinic works
- Discuss patient pool to determine whether students have enough patients and procedures to be in clinic
- Discuss Treatment Plan sequencing
- Discuss leave requests and unexcused absences - again

### 4<sup>th</sup> PRACTICE MEETING – Fall 1

- Discuss operative competencies
- Discuss specific cases of treatment planning
- Use enrichment bank of Power Point presentations developed by other faculty as resource to facilitate discussion or invite other faculty to present
- Invite representatives as guest speakers to discuss various products but with caution as free items cannot be accepted (i.e. lunch, samples, branded materials, gifts, etc.)
- Determine any educational field trips to labs, but be sure to check with Dr. Johnson and Dr. Wilson on protocol\*
- For ISPs encourage completing NBDE Part2

#### 5<sup>th</sup> PRACTICE MEETING - Fall 2

- Discuss operative competencies, requirements, and thresholds
- Discuss specific cases of treatment planning
- Use enrichment bank of Power Point presentations developed by other faculty as resource to facilitate discussion or invite other faculty to present
- Invite representatives as guest speakers to discuss various products but with caution as free items cannot be accepted (i.e. lunch, samples, branded materials, gifts, etc.)
- Evidence Based Dentistry Importance
- Discuss importance of knowing patients

#### 6<sup>th</sup> PRACTICE MEETING – Spring 1

- Discuss operative competencies, requirements, and thresholds
- Discuss specific treatment planning cases
- Discuss importance of knowing your patients
- Assess NBDE 2 Completion status and reinforce
- Schedule Evidence Based Dentistry model – presentation by students

#### 7<sup>th</sup> PRACTICE MEETING – Spring 2

- Discuss fixed and removable cases & competencies
- Tx Planning complex cases – attention to detail
- Initiate Boards thought process
- Encourage students to bring complex cases for Tx Planning

#### 8<sup>th</sup> PRACTICE MEETING – Summer

- Time to be done with ODs and should be actively treating established TX plans
- Boards plans
- Post Graduate Education options
- Job hunting plans

#### 9<sup>th</sup> PRACTICE MEETING – Fall 1

- Resume/CV writing
- Discuss the process of transferring patients

#### 10<sup>th</sup> PRACTICE MEETING – Fall 2

- Complete paperwork & Signatures
- Address any concerns/ issues, questions



## **ADVOCATE MEETINGS – ISP**

**Since the ISP students have an academic calendar Jan – Dec for 2 years, and also taking into consideration that they do not enter clinics till summer, they have a total of eight sessions beginning in Summer of ISP 1 year.**

### **Year 1 - Start Fall of ISP 1**

#### **1<sup>ST</sup> ADVOCATE MEETING - Fall**

- Introduce yourself
- Provide information about clinic
- Discuss how to manage and build patient pool
- Create rapport with student
- Answer questions related to diagnoses and treatment planning
- Educate on how to complete ODs efficiently
- Determine status of operative experiences with identifying level of experience for ISP students
- Talk about competencies and appropriate timelines

#### **2<sup>nd</sup> ADVOCATE MEETING - Fall**

- Determine whether patient pool would allow student to be clinically active in all disciplines except endo
- Educate on how to complete ODs efficiently
- Follow up on competency requirements
- Discuss strategies to build patient pool (should be near complete; one year of clinic left)
- Assess that the student is adding very specific patients that fulfill minimal expectations prior to challenging competencies
- Discuss challenging competencies

### **Year 2 – Start Spring ISP 2**

#### **3<sup>rd</sup> ADVOCATE MEETING - Spring**

- Discuss Operative & single unit fixed competencies
- Discuss challenges with coping with the didactic and clinic system, address specific concerns
- Assess patient pool management, organizational skills

#### **4<sup>th</sup> ADVOCATE MEETING - Spring**

- Discuss patient pool and any difficulties (endo & removable)
- Discuss denture competency
- Discuss multi – unit competency – patient/ manikin
- Determine whether ISP2 students are approaching the completion of Domains of Competency
- Discuss CRDTs/ WREBs

5<sup>th</sup> ADVOCATE MEETING - Summer

- Determine whether ISP2 students have fulfilled all Domains of Competency
- Discuss finishing cases and treatment plans
- Assess progress in organization, work flow, and efficiency
- Discuss Boards – CRDTs or WREBs

6<sup>th</sup> ADVOCATE MEETING - Fall

- Determine whether ISP2 and DS4 students have fulfilled all Domains of Competency
- Discuss finishing cases and treatment plans
- Assess progress in organization, work flow, and efficiency
- Assess preparedness
- Ensure that students are transferring patients

7<sup>th</sup> ADVOCATE MEETING - Fall

- Last ISP 2 meeting – should be little to discuss
- Any problems that may be present – come up with a solution path
- Ascertain if student is ready to be an independent clinician

### **EXHIBIT A Team Structure (Team C)**

CU Dental Teams					
2019 Fall					
TEAM C					
Team Leader: Dr. Kenneth Peters					
Endodontics: Dr. Emanouela Carlson					
Prosthodontics: Dr. Alan Sutton					
Periodontics: Dr. Font					
Dental Hygienist: Meghan Crow					
Associates: Drs. Bloom and Hakala					
Periodontics Residents: Omar Albayati					
Coordinator: Alix Navarrete			Coordinator: Nancy Groswold		
Group 1			Group 2		
ISP 1 - Baskaran	DS 4 - Dr. Peters	DS 3 - Dr. Peters	ISP 2- Dr. Brown	DS 4 - Dr. Doug Wilson	DS 3 - Dr. Evans
Student 1	Student 1	Student 1	Student 1	Student 1	Student 1
Student 2	Student 2	Student 2	Student 2	Student 2	Student 2
Student 3	Student 3	Student 3	Student 3	Student 3	Student 3
Student 4	Student 4	Student 4	Student 4	Student 4	Student 4
Student 5	Student 5	Student 5	Student 5	Student 5	Student 5
Student 6	Student 6	Student 6	Student 6	Student 6	Student 6
Student 7	Student 7	Student 7	Student 7	Student 7	Student 7
Student 8	Student 8	Student 8	Student 8	Student 8	Student 8
Student 9	Student 9	Student 9	Student 9	Student 9	Student 9
Student 10	Student 10	Student 10	Student 10	Student 10	Student 10
	DS 2			DS 2	
	Student 1			Student 1	
	Student 2			Student 2	
	Student 3			Student 3	
	Student 4			Student 4	
	Student 5			Student 5	
	Student 6			Student 6	
	Student 7			Student 7	
	Student 8			Student 8	
	Student 9			Student 9	
	Student 10			Student 10	

For up-to-date information on faculty and student assignments to Teams C, U, D, and T, go to the G:drive/Team Structure.

## Student Clinical Rotations

### OVERVIEW

As part of the clinical education experience, students are assigned to various rotations starting in the summer semester (DS 2 / ISP 1) and continue until graduation. Rotations will be assigned through CalendarLab, a computer software designed specifically for dental school rotation schedules.

The CU DT Academic and Clinical Systems Coordinator will be responsible for ensuring that students are assigned to relatively the same number of applicable rotations each semester. As a student progresses in his/her clinical education, additional rotations will be added. New rotations can be added at any time depending on student needs, patient needs, changes in clinical protocols, and funding sources, among other reasons.

### ROTATIONS

**Screening** – The CU School of Dental Medicine has a school-wide screening clinic staffed by DS and ISP students beginning in the summer semester DS 2 and ISP 1 years through graduation. The purpose of the Screening clinic is to ensure an adequate number of new patients are being accepted into the School. If patients are deemed too complex for the pre-doctoral students, patients may be referred to the GPR program, to the Dental Faculty Practice, or to an outside dental provider.

- Report to: Screening Coordinator (Pam Moore)
- Location: Third Floor Futures Clinic
- Days: Monday – Thursday
- Time: AM Session: 9:00 – 12:00  
PM Session: 2:00 – 5:00

**EM/OS Assist (Emergency/Oral Surgery Assist)** – Each student must complete one EM Clinic Assist and two or more OS Clinic Assist rotation prior to be assigned as an operator in these two clinics, as well as the Oral Surgery Practicum. Rotations begin in the summer semester DS 2/ISP 1 year, and will continue into the fall semester until all students complete two sessions.

- Report to: Advanced Care Clinics Coordinator (Annette Wand)
- Location: First Floor Specialties Clinic
- Days: Monday – Friday
- Time: AM Session: 9:00 – 12:00  
PM Session: 2:00 – 5:00

**Assist** – As part of the initial clinical learning experience, students will be assigned assist sessions when they enter the clinic in the DS 2 and ISP 1 summer semester. Starting in the Fall semester, the assist non-clinic time exception will be removed 14 days prior to that clinic session in order for students to request an appointment if there are any clinic chairs still available at that time. However, if a chair is not available, the student is required to assist another student. The student must have an attendance form approved by the covering faculty member for the appointment at which they are assisting.

- Report to: Covering Faculty Member
- Location: Second, Third or Fourth Floor (appointment where student is assisting)
- Days: Varies depending on clinic schedule
- Time: AM Session: 9:00 – 12:00  
PM Session: 2:00 – 5:00

**EM (Emergency)** – Beginning in the fall semester of their DS 3 / ISP 1 year, students will be assigned as operators in the Emergency Clinic after completion of one session of EM Clinic Assist and two or more OS Clinic Assist sessions and will be assigned each semester until graduation. The Emergency Clinic provides dental services to individuals in the community who may otherwise not have access to care. Patients of records are provided emergency services through the On-Call rotation.

- Report to: Advanced Care Clinics Coordinator (Annette Wand)
- Location: First Floor Advanced Care Specialties Clinic
- Days: Monday – Friday
- Time: AM Session: 9:00 – 12:00  
PM Session 2:00 – 5:00

**OS (Oral Surgery)** – Beginning in the fall semester of their DS 3 / ISP 1 year, students will be assigned as operators in the Oral Surgery Clinic once they have completed two or more OS Clinic Assist sessions and passed their OS Practicum. Students will be assigned to this clinic each semester until graduation.

- Report to: Annette Wand
- Location: First Floor Advanced Care Specialties Clinic
- Days: Monday – Friday
- Time: AM Session: 9:00 – 12:00  
PM Session 2:00 – 5:00

**On-Call** – Patients of record are provided emergency services through the On-Call rotation. During these sessions, students will be treating SDM patients whose regular student provider is not available for emergency procedures; students should not consider this rotation as an opportunity to bring their own patients in for regular treatment procedures. On-Call rotations begin in the fall semester of the student's DS 3/ISP 1 year and assignments continue each semester until graduation.

- Report to: Clinic Coordinators/Covering Faculty Member
- Location: Second Floor CUDT East Clinic
- Days: Monday – Friday (depending on didactic schedule)
- Time: AM Session: 9:00 – 12:00  
PM Session 2:00 – 5:00

**Healthy Smiles** – As an important part of the dental curriculum, pediatric dentistry experience is gained through assignment to the Healthy Smiles Clinic, which is a part of Children's Hospital Colorado. DS 3 and ISP2 students are assigned to the Healthy Smiles rotation half days for a five week period in the fall, spring, and summer semesters until all students have completed one, five week rotation. Students will be contacted by administrative staff at the Healthy Smiles Clinic prior to the start of the rotation to schedule badging and drug testing appointments.

- Report to: Healthy Smiles Clinical Director (Joe Beling)
- Location: Children's Hospital Colorado, Healthy Smiles Clinic
- Days: Monday – Friday (depending on didactic schedule)
- Time: AM Session: 8:00 – 12:00  
PM Session 1:00 – 5:00

**Endo Rotations** – Students are assigned to endodontic rotations in order to assess, treat, triage emergencies, and assist with endodontic procedures. All patients needing endodontic treatment are referred to the Endo Clinic where they will receive a no charge consultation to assess the complexity of their endodontic treatment needs. From there, the patient will either be appointed in the student Endo Clinic, or referred to GPR/Dental Faculty Practice for further assessment and treatment. Students start with the Endo Assist rotation in the summer semester of the DS2 and ISP1 year. Starting the fall semester of the DS3 and ISP1 year, they are assigned to Endo Clinic, Endo Emergency, and Endo Consult rotations and assignments continue each semester until graduation. .

- Report to: Covering Faculty Member
- Location: Second Floor CUDT West Clinic
- Days: Monday – Friday (assignments depend on didactic schedule)
- Time: AM Session: 9:00 – 12:00  
PM Session 2:00 – 5:00

**Special Care Clinic** – It is imperative that student gain experience in treating patients with special needs. During the DS 3 and ISP 2 spring and summer semesters, and the DS 4 and ISP 2 fall semester, students will be assigned to the Special Care Clinic.

- Report to: Special Care Clinic Course Director (Ms. JoAnn LeClaire)
- Location: First Floor Advanced Care Specialties Clinic
- Days: Monday afternoons, Friday afternoons
- Time: AM Session: 9:00 – 12:00  
PM Session 2:00 – 5:00

**Ortho Assist** – as part of the Ortho 3 course requirement, students are assigned to three Ortho Assist rotations in their DS 3 spring semester.

- Report to: Orthodontics Department Chair/Clinic Care Coordinator  
(Dr. Craig Shellhart/Ms. Tsigereda Feseha)
- Location: Third Floor Orthodontics Clinic
- Days: Monday – Friday (depending on ortho didactic schedule)
- Time: AM Session: 8:30 – 12:00; PM Session 1:30 – 5:00

**Adolescent Dental Care (ADC)** – To address the gap of access to care between pediatric dentistry and general dentistry for adults, the Adolescent Dental Clinic was established provide dental care for adolescents.

- Report to: Covering Faculty Member
- Location: Third Floor Futures Clinic
- Days: Varies per semester
- Time: AM Session: 9:00 – 12:00  
PM Session 2:00 – 5:00

**ACTS** – The Advanced Clinical Training and Service rotation provides students with clinical experiences in underserved areas through service at Community Health Centers throughout Colorado. Starting in the

summer semester of the DS 3 year, students who have been approved by the Competency Review Board will spend approximately 50% of the next three semesters assigned to off-site locations supervised by volunteer faculty (preceptors). Clinical assignments are made by Dr. Tamara Tobey. Dr. Tobey reserves the right to remove any student from ACTS if feedback from preceptors indicate the student's skills, abilities, and/or professional behavior are not acceptable.

***IPE*** – as part of the inter-professional education curriculum, students are assigned to several IPE rotations as a DS 3 and ISP 1 student.

***CAPE*** – as part of the community dentistry education curriculum, students are assigned to rotations in the CAPE simulation clinic.

## **Dental Faculty Practice**



## Dental Faculty Practice Bylaws

# UNIVERSITY OF COLORADO DENVER FIRST AMENDED AND RESTATED BYLAWS

## ARTICLE I PURPOSES AND OBJECTIVES

**Section 1. Authority.** The Dental Faculty Practice (“DFP”) Bylaws were approved by a majority vote of the Faculty Practice Members on January 19, 2010.

**Section 2. Purposes and Objectives.** The DFP is the centralized faculty practice for the faculty of the University of Colorado Denver School of Dental Medicine (the “UCSDM”) and is authorized to bill, collect and disburse patient revenues earned by School of Dental Medicine faculty, and to enter into contracts for the collection of such revenues. The DFP is organized for the benefit of the University of Colorado Denver. The DFP’s charitable, scientific, and educational purposes and objectives are:

- (a) To support the UCSDM in its educational missions, which include patient education and practitioner continuing education;
- (b) To support the UCSDM’s clinical research activity;
- (c) To enhance the breadth and quality of clinical expertise of the UCSDM faculty through patient care; and
- (d) To support the funding of UCSDM faculty compensation in order to aid in the recruitment of new faculty and retain existing faculty.

**Section 3. Facility.** The DFP may be operated within or outside existing UCSDM clinics. Specific areas and equipment will be recommended by the DFP Executive Committee to the Dean. The equipment and spaces provided should accommodate all participating DFP Practicing Members (dental and dental hygiene). Facility space should include reception, laboratory, administrative, clinical and radiology areas.

## ARTICLE II MEMBERSHIP

**Section 1. Eligibility.** All paid faculty members at the rank of assistant professor or higher of the UCSDM are required to become Members of the DFP. Membership will be limited to one of three categories:

- (a) DFP Practicing Member - an individual who 1) practices dental medicine in one of the DFP approved or run clinics; and 2) does not have an outside dental practice. Practicing members are eligible for base, supplement and incentive compensation. The UCSDM will provide Practicing Members space, equipment, billing and collections, malpractice insurance and practice management and oversight.

- (b) DFP Non-Practicing Member - an individual who either is not eligible to practice or chooses not to practice dental medicine. By way of example, basic science faculty whose primary activity is research will serve in this member category. Non-Practicing members are eligible for the base and supplement compensation.
- (c) Community Practicing Member - an individual who 1) has less than 100% time appointment in the UCSDM; and 2) has an outside private practice. Community Practicing Members are eligible for base and supplement compensation. Community Practicing Members private practice activity will not be supported or governed by the UCSDM. Community Practicing Members are protected by the University of Colorado Medical Malpractice Trust for their supervision of students and residents, but must provide their own malpractice insurance that not only provides coverage for their actions in private practice but also for their own negligence while providing patient care while working for UCSDM.

All DFP Practicing Members must be licensed consistent with current Colorado licensure requirements for the practice of medicine, dentistry, or dental hygiene, as applicable to the Member's profession. DFP Membership in the DFP precludes eligibility for the one-sixth rule (unless otherwise grandfathered when the DFP was created in October 2004.)

**Section 2. Appointment.** The Dean of the UCSDM ("the Dean"), with advice from the Dental Faculty Practice Executive Committee ("the DFP Executive Committee"), shall appoint UCSDM faculty as Members of the DFP as part of the recruitment process. Faculty members are required to sign a member practice agreement as a condition of employment. The DFP membership is not effective until formal appointment by the Dean and the execution of the Member Practice Agreement.

**Section 3. Voting Rights.** Each DFP Practicing Member shall have one (1) vote, which may be cast in person, by proxy, or by written or electronic ballot as provided in Article III herein. DFP Non-Practicing and Community Practicing Members do not have voting rights.

**Section 4. Compliance Obligations.** Each DFP Practicing Member is required to comply with:

- (a) The clinical practice standards of the UCSDM and the DFP;
- (b) All requirements imposed on the UCSDM/the DFP by third party payers, including government payers such as Medicare and Medicaid;
- (c) All provisions of the Member Practice Agreement; and
- (d) All policies and procedures (including those related to quality improvement and utilization review) of the UCSDM and the DFP.

**Section 5. Membership Not Transferable.** Membership in the DFP is personal to the individual Member and shall not be transferable or assignable to another individual or entity. Furthermore, no right, title or interest associated with the DFP membership shall be transferable or assignable to another individual or entity, nor subject to attachment or judgment by any creditors of the Member.

**Section 6. Termination of Membership.**

- (a) Grounds for Termination. An individual's membership in the DFP and all rights of such membership (including the right to receive payment) shall terminate upon the occurrence of any of the following:
  - (i) The individual's employment with the UCSDM is terminated for any reason, including retirement;
  - (ii) The DFP Practicing Member is not compliant with current Colorado licensure requirements for the practice of medicine, dentistry, or dental hygiene (including, by way of example and without limitation, suspension or revocation of the individual's license);
  - (iii) The individual violates or fails to comply with any material term or condition of the DFP Member Practice Agreement;
  - (iv) The individual fails to comply with any compliance obligation listed in Article II, Section 4 of the Bylaws;
  - (v) For cause, which will include but not be limited to substantial non-compliance with these Bylaws, any applicable third-party agreement, or federal or state laws and regulations; or
  - (vi) If the individual is declared incapacitated by a court of law.
- (b) Notice of Termination. The Dean shall give the affected individual written notice of termination, which notice must be approved by the DFP Executive Committee. The notice shall describe the reason the individual is being terminated.
- (c) Termination of Faculty Appointment. Termination of membership in the DFP is grounds for termination of appointment as a faculty member in the UCSDM.
- (d) Termination of DFP Executive Committee Members. If an individual's membership in the DFP is terminated in accordance with these Bylaws, and the individual holds a position on the DFP Executive Committee, the individual's position on the DFP Executive Committee shall terminate simultaneous with the termination of Membership.
- (e) Member's Right to Appeal Termination. A Member shall have the right to appeal his/her termination of membership to the DFP Executive Committee provided written notice of his/her appeal is delivered to the Dean within twenty (20) days after receiving the written notice of termination. The notice of appeal shall contain the individual's reasons for appeal and such other information or documents as are relevant to the matter. The Dean shall distribute copies of the notice of termination and the individual's appeal to the DFP Executive Committee. The individual may request the opportunity to personally present his/her appeal to the DFP Executive Committee, but the DFP Executive Committee shall have absolute discretion to decide whether to grant the request. The Dean shall have the right to personally present his/her reasons for terminating the individual to the DFP Executive Committee but shall leave the room when the DFP Executive Committee votes on the appeal. The DFP Executive Committee shall act on each appeal within 60 (sixty) days after the appeal is delivered to the Dean. The decision of the DFP Executive Committee shall be final.

## **ARTICLE III MEETINGS OF MEMBERS**

**Section 1. Annual Meeting.** The Members of the DFP shall hold their annual meeting on such day and at such time and place as is selected by the Dean and the DFP Executive Committee, for receiving the annual report of the Executive Director and for the transaction of such other business as may come before the meeting.

**Section 2. Special Meetings.** Special meetings of the Members may be called by the Dean, the Executive Director, or by a 2/3 vote of the DFP Executive Committee. In addition, a special meeting shall be held if the Dean receives a written demand for a special meeting that is dated and signed by at least twenty-five percent (25%) of the Members and which specifies the purpose(s) of the meeting. Within 30 (thirty) days after the Dean receives such a written demand, the Dean shall give notice of the special meeting to all the Members.

**Section 3. Notice of Meetings.** Members shall be given notice of the place, date and time of each annual meeting and each special meeting at least ten (10) days before the date of the meeting. Notice of an annual meeting shall include a description of any matter or matters for which the Members' approval is sought at the meeting. Notice of a special meeting shall include a description of the purpose of the meeting. If an annual or special meeting of Members is adjourned to a different date, time or place, notice need not be given of the new date, time or place, if the new date, time or place is announced at the meeting before adjournment.

**Section 4. Quorum and Manner of Acting at Meetings of Members.** One-half (1/2) of the voting Members, whether present or represented by a written proxy, shall constitute a quorum. At any annual or special meeting at which a quorum is present, action by the voting Members on any matter or issue that is properly before the Members shall require a majority vote of the voting Members present or represented by a written proxy at the meeting.

**Section 5. Member Proxy.** A voting Member who is absent from any annual or special meeting of Members shall be entitled to vote or act by proxy at such meeting by delivering to the Dean or Executive Director a written notice signed by the absent Member designating another Member as his/her proxy at the meeting specified in the notice. The proxy designation shall be valid only for the meeting specified in the notice. Unless the proxy specifies how the Member wants to vote on a matter or issue, it will be assumed that the Member has delegated the decision of how to vote to the individual holding the proxy. No proxy shall be valid after 60 (sixty) days from the date it is signed. Proxy designations shall be limited to Members only and any individual who is not a Member shall not be permitted to be a proxy. A Member shall not be allowed to hold more than three proxies.

**Section 6. Voting by Written or Electronic Ballot.** Voting on any matter or issue may be accomplished, at the discretion of the Dean, by written or electronic ballot (via e-mail or any similar method). In order for the results of a written or electronic ballot to be valid and binding, at least one-half (1/2) of the voting Members must complete written or electronic ballots. Action on any matter or issue voted on by written or electronic ballot shall require a majority vote of the ballots completed.

## **ARTICLE IV ADMINISTRATION**

**Section 1.     Generally.** The DFP will be organized and operated as a centralized practice plan. The Dean will be responsible for the management of the DFP. The Dean will delegate policy development and oversight for the DFP to the DFP Executive Committee. The Dean will delegate the implementation of the DFP policies and day-to-day management of the DFP to the DFP Executive Director. The Dean, upon concurrence by the DFP Executive Committee, may designate Units within the DFP; such Units will be established to accommodate off-site practice locations and/or specialty practice activity that is maintained within the primary practice site.

**Section 2.     Executive Director.** An Executive Director of the DFP will be appointed by the Dean of the UCSDM with concurrence of the DFP Executive Committee. The Executive Director will be responsible for the day-to-day management operations of all of the DFP Units, unless such management functions are otherwise delegated to the Unit by the DFP Executive Committee. The Executive Director's areas of responsibility include, but are not limited to:

- (a) Billing and collections;
- (b) Fee schedules;
- (c) Hiring and supervision of the DFP clinical and administrative staff;
- (d) Purchase and maintenance of the DFP supplies equipment;
- (e) Third party contracts;
- (f) Facility Management, lease, and design;
- (g) Clinical Analysis;
- (h) Quality management/improvement;
- (i) Fund distribution recommendations, including incentive payments;
- (j) Recommendations to the Dean regarding approval of Members for DFP participation;
- (k) Facility use schedule for faculty;
- (l) Termination of DFP membership as described in Article II, Section 7 herein;
- (m) Assurance that DFP accounts are not operated in a deficit;
- (n) Initiation of new DFP business ventures;
- (o) Regular quarterly and annual fiscal reports to the DFP Executive Committee;
- (p) Semi-annual reports (and quarterly reports as determined necessary by the DFP Executive Committee) to the DFP Executive Committee regarding management objectives; and
- (q) Oversight of compliance with DFP Bylaws and policies.

**Section 3. DFP Executive Committee.**

- (a) Membership. The DFP Executive Committee will consist of the following individuals, who will serve as voting members unless noted otherwise below:
  - (i) Dean of the UCSDM;
  - (ii) Associate Dean for Administration or designated representative (as a non-voting member);
  - (iii) Associate Dean of Clinics or Director of Clinics or designated representative (as non-voting member, unless active DFP Member);
  - (iv) Executive Director of the DFP;
  - (v) Four (4) representatives from the DFP Practicing Members, as elected by the DFP Practicing Members, each such representative to serve a three (3) year term;
  - (vi) Chair(s) of the Unit Management Committee(s); and
  - (vii) The DFP Business Manager (as a non-voting member).
- (b) Responsibilities. The DFP Executive Committee shall be responsible for:
  - (i) DFP policy development;
  - (ii) Oversight of DFP's administrative, financial, and clinical functions;
  - (iii) Evaluation of proposals for modification of DFP Bylaws or Member Practice Agreement, and recommendations to the Dean regarding the approval of such proposed modifications;
  - (iv) Recommendations to the Dean regarding acceptance and dismissal of DFP Members; and
  - (v) Recommendation to the Dean regarding the selection of the DFP Executive Committee's chairperson.
- (c) Chairperson. The chairperson of the DFP Executive Committee shall be elected by the DFP Executive Committee. The DFP Executive Committee's election will be established by committee vote in accordance with Article, IV, Section 3(d) below.
- (d) Voting. Each DFP Executive Committee member (except those designated as non-voting within these Bylaws) shall have one vote on issues before the DFP Executive Committee. Approval of issues shall be the majority of votes cast by members at an DFP Executive Committee meeting, with quorum met upon the presence of 50% of voting DFP Executive Committee members (whether by physical presence at the meeting or represented by proxy). Voting may be done in person or by proxy as described below.

- (e) Representation by Proxy. A DFP Executive Committee member who is absent from a DFP Executive Committee meeting (but who is otherwise entitled to vote) shall be permitted to vote or act by proxy at such meeting by delivering to the DFP Executive Committee Chairperson a written notice signed by the absent DFP Executive Committee member designating another DFP Executive Committee member as his /her proxy at the meeting specified in the notice. The proxy designation shall be valid only for the meeting specified in the notice. Unless the proxy specifies how the absent DFP Executive Committee member wants to vote on a matter or issue, it will be assumed that the DFP Executive Committee member has delegated the decision of how to vote to the individual holding the proxy. No proxy shall be valid after 60 (sixty) days from the date it is signed. Proxy designations shall be limited to DFP Executive Committee members only and any individual who is not a DFP Executive Committee member shall not be permitted to be a proxy. A DFP Executive Committee member shall not be allowed to hold more than one proxy.
- (f) Meetings.
  - (i) Schedule. The DFP Executive Committee will meet a minimum of four (4) times per DFP Fiscal Year. Meetings may be called more frequently by the Dean or the DFP Executive Committee Chairperson as necessary to carry out the Committee's duties. Meetings will be called and scheduled in a manner to promote maximum attendance.
  - (ii) Minutes. The DFP Business Manager will serve as the DFP Executive Committee's secretary and will be responsible for the minutes of each meeting.
  - (iii) Procedure. The most recent edition of *Robert's Rule of Order* will be applied to DFP Executive Committee meetings.
  - (iv) Agenda. The chairperson will be responsible for setting the meeting agenda in advance of each meeting. Each DFP Executive Committee member has the right to add items to a scheduled meeting agenda. The chairperson may prioritize agenda items for each meeting, but must list all agenda items requested by DFP Executive Committee members. The DFP Executive Committee shall determine which agenda items to discuss at each meeting.
- (g) Other Committees. The DFP Executive Committee may, by resolution, designate and appoint other committees. Each committee shall consist of one (1) or more DFP Executive Committee members. The designation and appointment of any such committee and any delegation of authority to any committee shall not operate to relieve the DFP Executive Committee of any responsibility imposed upon the Board by law or these Bylaws.

**Section 4. Unit Management Committees.** A Unit Management Committee may be formed for each the DFP designated unit. The Unit Management Committees will report through their Committee Chairperson to the Executive Committee.

- (a) Membership. The Unit Management Committees will consist of the following individuals:
  - (i) A maximum of five (5) full-time DFP Practicing Members within the Unit;

- (ii) Where appropriate, one hygienist who practices within the Unit; and
  - (iii) The DFP Executive Director (as a non-voting member).
- (b) Responsibilities. The Unit Management Committee will be responsible for the following:
  - (i) Determining profit and loss distributions to unit members, in a manner consistent with the DFP's policies and procedures;
  - (ii) Overseeing the unit and unit operations;
  - (iii) Recommending policy changes to the DFP Executive Committee;
  - (iv) Initiating equipment acquisitions, subject to review by the DFP Executive Director;
  - (v) Establishing unit staffing requirements, subject to review by the the DFP Executive Director; and
  - (vi) Initiating unit leasehold improvements, subject to review by the the DFP Executive Director.
- (c) Unit Management Committee Chairperson. The members of the Unit Management Committee elect the Committee Chairperson with the concurrence of the Dean and the DFP Executive Committee. The Unit Committee Chairperson must be an active DFP Practicing Member of the DFP and the Unit. The Chairperson will be responsible for coordinating oversight of the unit's operations with the Unit Director and the DFP Executive Director to ensure compliance with the DFP Bylaws and policies.
- (d) Meetings. The Unit Committee Chairperson will be responsible for scheduling Unit Committee meetings. The Chairperson will schedule at least four (4) meetings each fiscal year or more frequently as necessary to carry out the Unit Committee's duties. The Chairperson will arrange for timely notification to Unit Management Committee members of meeting date, time, location, and purpose. The Chairperson will appoint a committee secretary who will be responsible for maintaining committee meeting minutes. The most recent edition of *Robert's Rules of Order* will govern the conduct of Unit Management Committee meetings.
- (e) Voting. Each member of the Unit Management Committee shall have one vote. Approval of issues shall be by simple majority of voting members present at each meeting. Quorum shall be at least 50% of Unit Management Committee members.
- (f) Subcommittees. The Unit Management Committee may designate and appoint one or more subcommittees. Such subcommittees may not exercise the authority of the Unit Management Committee, but shall make recommendations to the Unit Management Committee in accordance with assigned objectives.

**Section 5. Vacancies.** Any vacancy in the voting members of the DFP Executive Committee shall be filled by a majority vote of the DFP Members. The individual selected shall serve for the remainder of the term.



## **ARTICLE V THE DFP'S FUNDS**

**Section 1.     Funds Defined.** The DFP's funds shall include all monies collected by or paid to the DFP for patient care services, contracts with affiliated clinics and other third parties, network management fees, equity investments and interest and other investment income, including, without limitation, all funds assigned to the DFP under the Member Practice Agreement.

**Section 2.     Balanced Budget.** DFP program accounts shall not operate in a deficit at any time. Responsibility for the fiscal integrity of the DFP shall jointly rest with the Dean, Executive Director, and Executive Committee.

**Section 3.     Use of Funds.** Funds from the DFP's net collections shall be disbursed to DFP Practicing Members, as available, after the following expenditures are funded:

- (a)     Program Support.
  - (i)       DFP staff support (salary and fringe benefits)
  - (ii)       Operating expenses (e.g., supplies)
  - (iii)       Faculty base salary and fringe benefits (practice-related salary support);
  - (iv)       Reserve requirements as approved by the DFP Executive Committee; and
  - (v)       UCSDM Academic Enrichment Fund (5% of collections) and University of Colorado Denver allocations.
- (b)     Surplus Funds. Funds remaining after Program Support expenditures will be disbursed to DFP Practicing Members, subject to the following guidelines:
  - (i)       Surplus Funds shall be distributed to DFP Practicing Members, on a quarterly basis, as Faculty Incentive Payments. The determination of the amount of the Faculty Incentive Payment to be allocated to each DFP Practicing Member will be based on the net collections of the Member and the net profits generated by the DFP for that quarter. Unless otherwise approved by the Dean and the Executive Committee, Faculty Incentive Payments will only be provided if the DFP has generated a net profit for the pertinent quarter.
  - (ii)       Annual Faculty Incentive Payments in any one Fiscal Year may not exceed 50% of Total Salary without approval of the Executive Committee and the Dean.

**Section 4. Fiscal Year.** The DFP's Fiscal Year shall be the period of July 1 through June 30. The DFP's accounts shall be closed and balanced as of the end of each Fiscal Year.

**Section 5. Annual Audit of Financial Statements.** The DFP will be subject to audits as scheduled by the University of Colorado Denver Department of Internal Audit. The scope of such audits will be the review of DFP's accounts of revenues, expenses and such other transactions as are usually entered in accounts kept for a nonprofit corporation engaged in charitable, scientific and educational purposes.

**Section 6. Reserves.** The DFP Executive Committee shall have the authority to establish reasonable reserves to meet any actual or anticipated loss, payment or expense or for the purpose of investing in clinical program expansions and enhancements. The establishment of a reserve fund shall require an affirmative vote of two-thirds (2/3) of the DFP Executive Committee. In each instance when the DFP Executive Committee establishes a reserve, it shall determine the amount and the period of time for fully funding the reserve amount. Payments required for each reserve fund shall be made before any monies are paid into the Academic Enrichment Fund and before any monies are paid to individual Members.

## **ARTICLE VI AMENDMENTS TO THE BYLAWS**

These Bylaws may be amended by a majority vote of the DFP Members. The proposed amendment may be submitted for approval at the Annual Meeting or a Special Meeting of Members, provided that the notice of the meeting includes notice of the proposed amendment. Approval of an amendment shall require an affirmative vote of a majority of the Members present or represented by a written proxy at a meeting at which a quorum is present. Any number of amendments may be submitted and voted upon at any one meeting.

## **ARTICLE VII DISSOLUTION OF THE DFP**

**Section 1. Adoption of Proposal to Dissolve.** The DFP Executive Committee may adopt a proposal to dissolve the DFP upon an affirmative vote of a majority of the DFP Executive Committee members.

**Section 2. Formation and Responsibility of Dissolution Committee.** Upon the adoption of a proposal to dissolve, the DFP Executive Committee shall serve as the Dissolution Committee which shall be responsible for developing a dissolution plan that the Committee will recommend to the Chancellor of the University of Colorado Denver.

**Section 3. Dissolution Plan.** The Dissolution Plan shall be based on the following principles:

- (a) The DFP's accounts receivable and other assets shall be collected and/or accounted for;
- (b) The DFP's accounts payable, debts and other obligations shall be paid and discharged and/or appropriately accounted for;

- (c) The DFP's accounts payable, debts and other obligations, including dissolution expenses, shall be charged to the appropriate Unit according to the same principles and guidelines stated in these Bylaws for assessing expenses to Units;
- (d) In the event that a Unit's assets (including cash and accounts receivable) are insufficient to meet the Unit's obligations, the obligations shall become the general obligations of the DFP and shall be assessed first against the un-segregated assets of the DFP and, if the obligations remain incompletely satisfied, the balance of the obligations shall be prorated against all segregate DFP assets in a manner determined by the Dissolution Committee; and
- (e) On the dissolution of the DFP, any funds and property remaining after payment of such expenses, debts and obligations properly chargeable to the DFP shall be distributed as provided in these Bylaws,

**Section 4. Dissolution.** The DFP may be dissolved by an affirmative vote of two-thirds (2/3) of the Executive Committee members, subject to the approval of the Dean, Chancellor of the University of Colorado Denver, and the University of Colorado Board of Regents. Upon obtaining the approval of the Board of Regents, the Dissolution Committee shall act as liquidating directors and shall proceed with reasonable promptness to dissolve the DFP. No DFP Executive Committee member or other DFP Member shall be entitled to any compensation for his or her services in connection with the dissolution of the DFP.

**APPROVED BY:**

\_\_\_\_\_  
Chancellor  
University of Colorado Denver

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean  
University of Colorado School of Dental Medicine

\_\_\_\_\_  
Date

## Dental Faculty Practice Member Agreement

### University of Colorado Denver Dental Faculty Practice MEMBER PRACTICE AGREEMENT

This Member Practice Agreement (this "Agreement") is made by and between the undersigned Member (herein so called) and the Regents of the University of Colorado, a body corporate, on behalf of the University of Colorado at Denver ("UCD"), which includes the University of Colorado School of Dental Medicine ("UCSDM"), to be effective as of the date set forth opposite the signature of the UCSDM Dean on the final page of this Agreement. The Dental Faculty Practice (the "DFP") is limited to individuals who hold appointments of Assistant Professor or above as Faculty members of the University of Colorado, School of Dental Medicine. This Agreement states the rights, responsibilities and obligations of the Member and the UCSDM with respect to Member's participation in the DFP. This Agreement is intended to replace and supersede any existing Member Practice Agreements.

- I Acceptance of Organizational Documents. Member hereby agrees that Member's rights, responsibilities, and obligations arising in this Agreement are in addition to those rights, responsibilities, and obligations which are stated in or arise from the University of Colorado policies, as may be amended from time to time, and the Laws of the Regents, as may be amended from time to time. Member further agrees to accept and abide by the Dental Faculty Practice Bylaws, as may be amended from time to time and which are incorporated herein by reference.
- II Member Category: The member will participate in the following Dental Faculty Practice member category:  
  
Practicing Member \_\_\_\_\_  
  
Non Practicing Member \_\_\_\_\_  
  
Community Practicing Member \_\_\_\_\_
- III UCSDM Duties - UCSDM agrees to make available clinical space within UCSDM's facilities (or other USCD-mandated space) for DFP Practicing Members to use for patient care purposes. UCSDM also agrees to provide for practicing members billing and collection services for Clinical Care Income, and to administer and distribute all Clinical Care Income received in accordance with the terms set forth in this Agreement and DFP Bylaws. UCSDM shall have the right to deduct reasonable Administrative Fees (herein so called) from Clinical Care Income received prior to distributing the income. Administrative Fees include, by way of example, UCSDM Academic Enrichment Fund contributions, billing and collection expenses, clinic operating expenses, facility lease and maintenance expenses, and UCD administrative support expenses. The provision of facilities and billing/collection services will not be provided to Community Practicing

Members; nor will the UCSDM administer and distribute any income generated in the Community Practicing Member's private practice.

IV Assignment of Clinical Care Income. In consideration of the services provided by UCSDM, DFP Practicing Member hereby assigns to UCSDM for purposes of billing, collection, administration, and distribution in accordance with DFP Bylaws, all of DFP Practicing Member's Clinical Care Income (as that term is defined below) earned by DFP Practicing Member at any time during the term of this Agreement. Member shall have no direct interest in the accounts receivable, billings, or cash proceeds therefrom arising from or attributable to DFP Practicing Member's income assignable under this Agreement. This assignment of Clinical Care Income shall not include any income earned by Member:

- E. In the DFP Practicing Member's pre-existing professional practice in an outside facility as approved by the UCSDM Dean.
- F. While on official leave of absence from the University of Colorado during which time the Member does not receive any salary, fringe benefits, or malpractice coverage from the University of Colorado.
- G. In a Community Practicing Member's private practice

V Clinical Care Income.

- A. Generally. For purposes of this Agreement, any reference to "income," "compensation," "revenue," or "remuneration" received for professional activities covered by this Agreement shall include, but not be limited to, income as defined under Section 61 of the Internal Revenue Code of 1986, as amended from time to time (26 U.S.C. §61), the regulations issued hereunder, and applicable federal case law. Without in any way limiting the definition of the terms "compensation," "income," "revenue," or "remuneration," such terms shall include cash compensation, deferred compensation (whether pursuant to a qualified or non-qualified plans or arrangements), qualified or non-qualified deferred compensation plans, warrants, phantom stock, qualified, statutory and non-qualified stock option plans or arrangements, stock appreciation rights, restricted property plans or arrangements, book value and junior stock plans, and any other compensation or benefit plans or arrangements similar to any of the foregoing.
- B. Clinical Care Income Defined. The term "Clinical Care Income" shall mean all revenue earned by or owed to the DFP Practicing Member through direct clinical activities, including, by example and without limitation, the following:
  - 1. Fees or payments from patients;
  - 2. Fees or payments for patient services from any third party payer or other person or entity; and

3. Payments for professional services, patient care services or clinical teaching services from any clinic, hospital, laboratory, state agency or other institutions (except as excluded by Paragraph V(C) below);
- C. Exclusions from Clinical Care Income. The following fees and payments are expressly not considered Clinical Care Income, are not assigned by the Member to UCSDM and may be retained by the Member. Consultant and honoraria fees and non-clinical income generated by DFP members may be generated while on official leave of absence, vacation or outside of normal business hours. DFP members are not eligible for the one-sixth rule.
1. All consultant fees not related to direct clinical care;
  2. Fees or payments from medical/legal services including expert witness fees;
  3. One time honoraria for visiting lectureships );
  4. Payments for consultations not related to direct patient care from corporations or governmental agencies, such as NIH;
  5. Subject to University of Colorado policies on intellectual property, royalties, licensing fees and other income from publications, editorial services, patents, copyrighted materials and trade secrets (provided that the member is in compliance for commercializing intellectual properties); and
  6. Fees or payments in an approved Member professional practice in an outside facility as described in section IV(A & C) and listed on Addendum I of this Agreement.
- D. Dispute Resolution. In the event that a dispute arises as to whether any fee or payment should come within the definition of Clinical Care Income and therefore be assigned to DFP, the matter shall be referred to the Executive Committee. In the event that the Member disagrees with the decision of the Executive Committee, the Member shall have the right to have the question referred to the Dean of the School of Dental Medicine. The Dean will review the matter, including the Executive Committee's recommendation, and make a final decision which shall be binding on the Member and UCSDM.
- E. Establishing Fees and Fee Reductions The DFP Practicing Member shall have the right to establish a reasonable fee for professional services rendered but shall have no personal claim or right to such fees, which are assigned to DFP in accordance with this Article V. Member agrees not to reduce fees for clinical care rendered by DFP Practicing Member for the purpose of diverting clinical care income from DFP to other UCD accounts or other sources. In the event that the Member receives Clinical Care Income directly, the Member agrees to immediately report and remit it to the DFP

- F. Distribution of Clinical Care Income. UCSDM agrees to provide for the billing and collection of Clinical Care Income and to administer and distribute all fees in accordance with the Bylaws, organizational documents, and any applicable Incentive Plans. UCSDM will maintain its accounts and the funds held by it in such a manner as to insure that Clinical Care Income attributable to each Cost Center Unit is not commingled with any other fund or funds, after provision is made for: (1) reimbursement of allowable expenses attendant to the production of Clinical Care Income such as professional liability insurance premiums, as provided in the DFP Bylaws and approved by the DFP Executive Committee; (2) the School of Dental Medicine Academic Enrichment Fund as defined in the DFP Bylaws; and (3) any approved allocations or assessments.
- VI. Member's Compliance Obligations. While Member retains membership in the DFP, Member shall at all times fully comply with the Member covenants and duties listed in Article X, and abide by University appointment letter, UCSDM Compliance Plan, and applicable federal and State laws and regulation. Member hereby acknowledges and agrees that Member has reviewed Article X and hereby agrees to abide by Article X, the University Appointment Letter, UCSDM's Compliance Plan and applicable federal and state law and regulations.
- VII. One-Sixth Rule. Membership in the DFP precludes eligibility for the one-sixth rule unless otherwise grandfathered when the DFP was created in October 2004.
- VIII. Termination.
- A. Automatic Termination. This Agreement shall immediately terminate upon the Member's breach of this Agreement or Member's termination or loss of Membership in the DFP as provided in Article II of the DFP Bylaws (as may be amended from time to time). In addition, this Agreement shall automatically terminate upon the resignation, retirement, termination, or other cessation of Member's faculty appointment at UCSDM. Notices of termination will be provided in writing.
- B. Effect of Termination Upon Member's Faculty Appointment. Termination of this Agreement shall only terminate the Member's active practice agreement. Termination of this agreement without the initiation of a new agreement will result in the termination of the member's faculty appointment. Upon termination of this Agreement, Member shall have no right to receive money or proceeds from accounts receivable or other retained funds.
- C. Effect of Termination Upon Assignment of Clinical Care Income. Termination of this Agreement does not affect the rights of UCSDM or UCD to the assignment of all Clinical Care Income earned, generated, received or to which Member became entitled during the term of this Agreement, which provision shall survive any termination or expiration of this Agreement.
- D. Notice of Termination. Either party may terminate this Agreement, at any time, with or without cause, by providing the other party thirty (30) days written notice of intent to

terminate. Notwithstanding the foregoing, UCSDM retains the right to immediately terminate this Agreement (with no written notice required) when the Agreement is automatically terminated in accordance with Article VIII, Section A of this Agreement. The DFP will retain twenty-five percent (25%) of Clinical Income payments due to terminating Members for up to one hundred-eighty (180) days to allow for final resolution of outstanding billing and collection issues.

- IX     Liability Insurance Coverage.     In accordance with the Colorado Governmental Immunity Act, DFP Practicing Member is acting as a public employee when participating in approved programs and at approved practice sites of the School of Dental Medicine and, to the extent eligible for coverage in accordance with the University's professional liability trust coverage document, shall be covered by said document. After termination, Member shall continue to receive coverage under the University's professional liability trust coverage document for the specific period of time Member was a full-time faculty Member at the University of Colorado in such amounts and under such terms as are provided for in the University of Colorado professional liability trust coverage document, as amended from time to time. Community Practicing Members must provide their own medical malpractice coverage for their private practice activity. They will be eligible only for University coverage by the University professional liability trust for their supervision of students when in the School's Student Clinics and not for any other acts of Community Practicing Members.

X     Members Professional Conduct and Other Related Requirements

- A.     Professional Conduct. Member shall at all times during this Agreement conduct Member's professional activities in accordance and compliance with all applicable federal, state, city, and local laws and regulations and standards of the dental and or medical profession.
- B.     Medical Records and Recordkeeping. Member shall complete and maintain, in a timely manner, adequate, legible and proper dental, medical and administrative records with respect to all services rendered to or authorized for patients seen or treated by Member in the DFP. In addition, Member shall complete and maintain all documents necessary for DFP to obtain reimbursement for the services rendered by Member.
- C.     Quality Assurance and Utilization Review. DFP Practicing Member shall participate in risk management, utilization review and management, cost-effectiveness studies and quality assurance plans as are reasonably requested by DFP or third party payers with whom DFP contracts for the services of DFP members.
- D.     Managed Care and Insurance Plans. DFP Practicing Member shall participate in all managed care programs, Medicare programs or plans, Medicaid programs or plans, other federal and state health care reimbursement programs, Blue Cross/Blue Shield plans, any commercial health care insurance programs, and any other HMO, PPO, managed care or health benefit program (collectively "Payer") that DFP chooses to contract. To the extent permissible by a Payer, Member hereby assigns and shall



execute any other assignment of fees or compensation to DFP arising from a Payer contract if Member is listed as a signatory or participating or in-network provider.

- E. Preserving Member's Qualifications. Practicing Member represents that Member currently meets the following qualifications and shall at all times during the term of this Agreement maintain the following qualifications:
- a. Licensure requirements and ability to practice dentistry or medicine in the State of Colorado. Member shall have no qualifications, conditions or restrictions on his or her license to practice dentistry or medicine in the University of Colorado Denver programs. Member shall notify the UCSDM and the DFP immediately of any discipline, restriction, surrender or any other action which affects the Member's license to practice dentistry or medicine in the State of Colorado or any other jurisdiction.
  - b. Maintenance of an unrestricted federal DEA registration to prescribe all medications commonly prescribed by the Member's specialty.
  - c. Medical or Dental Staff membership at all affiliated hospitals where the Member provides patient care as part of the Member's regularly assigned duties, with appropriate practice privileges and compliance with the Medical or Dental Staff Bylaws and the administrative policies and procedures of said affiliated hospitals.
  - d. Eligibility to provide reimbursable dental or physician services, and participation in the Medicare and Medicaid programs, and other similar state or federal government-sponsored programs.

Maintenance of professional standing and competence by attendance at continuing medical education courses, institutes or seminars from time to time; and membership in such dental, medical or professional organizations as shall be determined by the parties to be in the best interests of the UCSDM and the DFP.

- XI. Notice. All notices concerning this Agreement shall be made in writing and shall be personally delivered, or sent by U.S. Certified mail, postage pre-paid to the other party. With respect to notices provided to Member, such notices will be sent to the address indicated by Member on the signature block of this Agreement. It is the responsibility of Member to notify UCSDM of any change of mailing address for purposes of notice under this Agreement.
- XII. Assignment Amendment. This Agreement shall be binding upon and shall inure to the benefit of the signatories hereto, their respective heirs, devisees, personal representatives, transferees, successors and assigns, except as such assignment is otherwise prohibited by this Agreement. This Agreement may be amended only by written agreement between the parties. This Agreement may be executed in more than one counterpart, each of which shall be considered an original.

The parties have signed this Agreement as of the date below written.

**MEMBER:**

Member Signature	Date
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Name: \_\_\_\_\_

Faculty Rank: \_\_\_\_\_

Department: \_\_\_\_\_

**MEMBERSHIP APPROVAL:**

Dean, School of Dental Medicine      Date

MAILING ADDRESS:  
Dean Denise Kassebaum  
University of Colorado School of Dental Medicine  
Mail Stop F831  
13065 East 17<sup>th</sup> Avenue, Room 302  
Aurora, CO 80045

Addendum I, Approved Member Professional Practice in Outside Facility

**APPROVED MEMBER PROFESSIONAL PRACTICE IN OUTSIDE FACILITY**

Pursuant to Article IV, Section C of this Agreement, Member's professional income generated at the practice locations listed below will not be considered Clinical Care Income for purposes of this Agreement and will not be assigned to the DFP. The member agrees to submit a revised addendum I if the member changes his/her practice in outside facilities.

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Submitted by:

\_\_\_\_\_  
Member Date

\_\_\_\_\_  
Printed Name

Approved by:

\_\_\_\_\_  
Department Chairperson Date

\_\_\_\_\_  
Printed Name

Approved by:

\_\_\_\_\_  
UCSDM Dean Date

\_\_\_\_\_  
Printed Name

Revised 6/10/2010

**Faculty Credentialing, Professional Liability, Development Support, Merit Evaluations, Interim Review, and Peer Review**

## Faculty Credentialing and Re-credentialing

Title: School of Dental Medicine Faculty Credentialing and Re-credentialing Policy  
Source: SDM Credentialing Committee  
Effective Date: February 1, 2010  
Revision Date: May 1, 2021  
Approved By: Faculty Senate (October 6, 2021)

**Background:** To stay consistent with best practices established by the University of Colorado Hospital for clinical faculty credentialing, the School of Dental Medicine revised the credentialing process for its faculty. The credentialing of all clinical faculty members will ensure that the SODM is granting faculty appointments and re-appointments only to highly qualified individuals with the appropriate knowledge and experience to train our students.

**Policy Statement:** All individuals seeking a clinical faculty appointment at the University of Colorado School of Dental Medicine, including full-time, part-time, volunteers, and preceptors, are required to be credentialed by the School's Office of Faculty Affairs. All clinical full-time, part-time, and on-site volunteers are required to have a Medicaid number affiliated with the School.

Re-credentialing of clinical faculty, excluding preceptors, will be performed every two years to ensure faculty members remain in good standing with state and federal regulatory agencies, as well as professional liability carriers. Faculty are required to provide the School of Dental Medicine with updated credentials as licenses, certifications, and trainings expire. Preceptors will be re-credentialed per their institution's credentialing policies and procedures.

Required documentation for initial appointment credentialing includes:

- Completed Colorado Health Care Professional Credentials Application (most current version)
- Copy of a current, active Colorado Dental/Dental Hygiene/Medical License or Colorado Academic License (license status cannot be in retired status)
- Copy of a current DEA License (unless waived by Department Chair and Sr. Associate Dean of Clinics and Professional Practice)
- Copy of a current BLS Card,
- Copy of a current ACLS and/or PALS (as required for specific disciplines)
- Sedation license (as required for specific disciplines)
- Copies of diplomas, certificates of training, and board certification (if applicable)
- Current curriculum vitae/resume
- Copy of Professional Liability Insurance

From information provided in the Colorado Health Care Professional Credentials Application, the Office of Faculty Affairs will perform the following:

- Verify all degrees, training, and board certification
- Request information through the National Practitioner Data Bank (NPDB)
- Verify dental/dental hygiene/medical licenses in Colorado and other states
- Check Medicaid provider eligibility on the U.S. Department of Health and Human Services

- Request a claims history report from professional liability carriers if a report has been submitted to the NPDB
- DEA verification

Re-credentialing documentation will include:

- Completed Colorado Health Care Professional Credentials Application (most current version provided by the State of Colorado Department of Public Health and Environment)
- Copy of a current, active Colorado Dental/Dental Hygiene/Medical License(s) or Colorado Academic License (license cannot be in retired status)
- Copy of a current DEA License (unless waiver approved by Department Chair and Sr. Associate Dean of Clinics and Professional Practice)
- Copy of a current BLS Card,
- Copy of a current ACLS and/or PALS (as required for specific disciplines)
- Sedation license (as required by specific disciplines)
- Board Certification (as required by specific disciplines)

Medicaid Revalidation (every 5 years)

Re-credentialing will also entail:

- Requesting information through the National Practitioner Data Bank (NPDB)
- Requesting a claims history report from professional liability carrier if a report has been submitted to the NPDB
- Verifying dental/dental hygiene/medical licenses in Colorado and other states
- Check Medicaid provider eligibility on the U.S. Department of Health and Human Services (required)
- DEA verification (if applicable)

**Credentialing Committee Review:** If any adverse events appear on the NPDB report, licensure, or professional liability, the Credentialing Committee will review the details and recommend whether or not the individual's application should be forwarded to the Promotion and Tenure Committee for appointment. The Credentialing Committee may ask for additional information from the Department Chair. If the Credentialing Committee recommends that the appointment not move forward, it is the Department Chair or Division Chair's responsibility to notify the candidate.

**SDM Compliance Portal:** Expiration dates and copies of Colorado dental/dental hygiene/medical licenses, DEA licenses, BLS/ACLS/PALS cards, the Colorado Health Care Professional Credentials Application, and professional liability will be maintained through the School of Dental Medicine Compliance Portal. The system notifies faculty 30, 15, and 2 days prior to the expiration of a credential; and again at one day and 15 days past the expiration date. Faculty who do not provide updated credentials in the portal may lose access to axiUm which could affect the ability to perform the job of a clinical faculty member.

## Malpractice Coverage - University Self-Insurance Trust

### Background

As a public entity, the University of Colorado's defense and indemnity of its employees, students, residents and volunteers is outlined in state statute, the Colorado Government Immunity Act (CGIA). The CGIA provides that the University of Colorado will indemnify and defend its employees against claims or lawsuits arising out of any act or omission that occurs during the performance of that employee's duties and within the course and scope of the employee's employment, except where those acts are willful and wanton. The CGIA also provides that the University will indemnify and defend any health care practitioner-in-training (student, intern, resident or fellow) who is enrolled and matriculated in a University of Colorado program for acts or omissions that occur within the course and scope of the individual's responsibilities as a student or trainee. The CGIA also protects health care providers and others who provide authorized volunteer service to the University.

The University can neither defend nor indemnify employees for actions that are outside the course and scope of their approved job responsibilities, nor can it defend health care trainees for activities that are outside the scope of their academic program responsibilities as approved by the University. The University does not assume responsibility for any punitive or exemplary damages awarded against its employees or trainees.

### Coverage

Per the Trust document:

#### "2.3 Dentists with Faculty Appointments

- (a) An individual employed full-time by the University who has a faculty appointment in the School of Dental Medicine is a Covered Person.
- (b) An individual employed less than full-time by the University who has a faculty appointment in the School of Dental Medicine and who does not have an independent or other health care practice is a Covered Person. Work performed as an employee or another public entity or of the United States government is not considered to be an independent or other health care practice. However, the individual will not be a Covered Person while performing work as an employee of another public entity or the United States government and the Trust will not provide coverage to the individual for such work.
- (c) An individual employed part-time by the University who has a faculty appointment in the School of Dental Medicine who additionally has an independent or other health care practice is a Covered Person only for an injury caused by a student, intern, or resident under the individual's supervision. The individual is not a Covered Person and is not covered by the Trust for an injury caused by his/her own acts or omissions. For this reason, all individuals in this category must have an individual professional liability insurance policy covering their own acts or omissions.
- (d) An individual who, although not employed by the University, has a faculty appointment in the School of Dental Medicine and volunteers services at or on behalf of the University is a Covered Person only for he services that are volunteered. However, if the individual receives payment or compensation from any source for providing the services, then the services will not be considered volunteer.

**For guidance, contact the Professional Risk Management Office (303-724-RISK [7475])**

**For malpractice coverage letters, please contact the CU SDM Office of Faculty Affairs 303-724-7112.**

## Malpractice Coverage for Volunteer Activities

Title: Guidelines for Ensuring Malpractice Coverage for Community Volunteer Activities and Student Career Development Activities in Clinical Settings

Source: Office of the Dean

Effective Date: January 6, 2015

### Background

As a public entity, the University of Colorado's defense and indemnity of its employees, students, residents and volunteers is outlined in state statute, the Colorado Government Immunity Act (CGIA). The CGIA provides that the University of Colorado will indemnify and defend its employees against claims or lawsuits arising out of any act or omission that occurs during the performance of that employee's duties and within the course and scope of the employee's employment, except where those acts are willful and wanton. The CGIA also provides that the University will indemnify and defend any health care practitioner-in-training (student, intern, resident or fellow) who is enrolled and matriculated in a University of Colorado program for acts or omissions that occur within the course and scope of the individual's responsibilities as a student or trainee. The CGIA also protects health care providers and others who provide authorized volunteer service to the University.

The University can neither defend nor indemnify employees for actions that are outside the course and scope of their approved job responsibilities, nor can it defend health care trainees for activities that are outside the scope of their academic program responsibilities as approved by the University. The University does not assume responsibility for any punitive or exemplary damages awarded against its employees or trainees.

While the language of the CGIA controls coverage provided by the University of Colorado Self-Insurance Trust ("Trust"), it does not always address the numerous situations and activities that involve students, residents, fellows and faculty. In general, it can be assumed that coverage by the University will be provided to employees whose activities are formally approved by their supervisors. Enrolled students will be covered to the extent that they are properly supervised, in activities that are approved by their academic CU program. **However, given the multiple fact situations and nuances, especially around "volunteering," all faculty members, administrators, students and residents should contact the Professional Risk Management Office (303-724-RISK [7475]) or the Office of University Counsel (303 315-6617), before assuming that CGIA and Trust insurance coverage apply.**

Faculty who are employees of Denver Health and Hospitals, the Veterans Administration Medical Center, National Jewish Health, affiliated ACT's clinical training sites or another affiliated institutions should contact their respective legal offices for advice.

Clinical Volunteer Activities by Faculty Who Are Employees of the University of Colorado who participate in community-based clinical volunteer activities are covered by the University of Colorado Self-Insurance and Risk Management Trust ("Trust"), *if two conditions are met:*

- First, the volunteer clinical activities must fall within the course and scope of the employee's job duties; for volunteer activities to be deemed "within the course and scope of employment," there should be a written Memorandum of Understanding (MOU) or other document that is signed by the individual faculty member's department chair, setting forth that this work is within the course and scope of the faculty member's job responsibilities.
- Second, the volunteer clinical activities should be performed at a location approved by the University of Colorado School of Dentistry.



Notes:

- If the clinical volunteer activities are performed during the work week, the employee should not take a vacation day.
- Examples of volunteer activities that *are unlikely to be covered* by the Trust: participation in any volunteer activity outside of the state of Colorado, participating at COMOM, participating at a community health fair that is not a CU activity; acting as the dentist for a charity event; or providing dental supervision for a high school sports team.
- Faculty members must understand that “moonlighting” is not permitted. That is, if a University employee (other than a resident or nurse) also has an outside health care practice in addition to his or her work for the University of Colorado, then the employee will not be covered by the Trust for any clinical activities, whether within or outside of the faculty member’s scope of employment.

### **Clinical Volunteer Activities by Residents and Fellows**

Only clinical volunteer activities that are within the course and scope of the individual’s responsibilities as a resident or fellow are covered by the Trust. The volunteer activities should be approved, in writing, by the Program Director, and the volunteer activities should count toward meeting the residency/fellowship program requirements. Residents and fellows who do not have active Colorado dental licenses and active University of Colorado faculty appointments cannot serve as the primary supervisors for a volunteer activity, or they must have individual malpractice insurance.

**Clinical Volunteer Activities by Dental Students** Clinical volunteer activities performed by dental and post-doctoral students enrolled at CU are covered by the Trust if they fall within the course and scope of the individual’s responsibilities as a student.

In most circumstances, the volunteer activity will be a recognized activity within the approved curriculum, and course credit will be awarded to the student.

In situations where course credit is not given (for example, dental school “clubs”, “tracks,” “threads,” interest groups, advisory college programs and various community outreach activities), contact the Professional Risk Management Office (303-724-RISK [7475]) or the Office of University Counsel (303 315-6617) for guidance. All non-course credit volunteer activities should also be approved, in writing, by the Senior Associate Dean for Academic Affairs or the Associate Dean for Student Affairs, or their designees). In determining whether a student volunteer activity will be covered by the Trust, consideration will be given to such factors as: a) whether the volunteer work is a structured part of the dental school curriculum; b) whether course credit is given; c) the level of faculty supervision provided to the student; and d) for offsite activities, whether approval has been granted by the School of Dental Medicine.

### **Student Career Development Activities**

“Career development” includes activities designed to promote clinical skill acquisition or career exploration and are carried out under the supervision of dentists or other licensed health care professionals. Activities can be at the shadowing level (which entails only observation and no direct clinical involvement) or at the hands-on level (which entails clinical activities, such as history taking, physical examinations and procedures). To a large extent, students are responsible for engaging in career development activities during their dental school tenure.

Career development clinical activities performed by dental students enrolled at CU are covered by the Trust if they fall within the course and scope of the individual’s responsibilities as a student. When the career development activity is part of an approved SODM course, where credit is awarded, no further approval is required.

In many situations, course credit is not given (for example, career exploration activities in a clinic, office or operating room, dental school “clubs”, “tracks (Education, Professional Leadership Research, Rural and Urban Underserved)” “threads,” advisory college and community education programs, student interest

group activities, or individually-arranged clinical activities). All non-credit career development activities, whether they take place during the academic year or during academic breaks, should be approved, in writing, by the Senior Associate Dean for Academic Affairs or Associate Dean for Student Affairs or a designee.

**There is no coverage by the Trust for externships or other volunteer opportunities that occur outside of the state of Colorado.**

In determining whether a student career exploration activity will be covered by the Trust, consideration will be given to such factors as: a) whether the career development activity is a structured part of the dental school curriculum; b) whether the activity is linked to a dental school career development program; and c) the level of faculty or health professional supervision provided to the student.

**For additional guidance, contact the Professional Risk Management Office (303-724-RISK [7475]) or the Office of University Counsel (303-315-6617).**

#### Approval

These Guidelines were approved by the School of Dental Medicine. The Guidelines should be reviewed at least once every two years.

#### References:

1. University of Colorado School of Medicine  
Guidelines for Ensuring Malpractice Coverage for Community Volunteer Activities and Student Career Development Activities in Clinical Settings. January 2013

## Dean's Development Fund



### University of Colorado School of Dental Medicine

#### **Dean's Faculty Development Fund Guidelines**

As of March 6, 2014 (Revised September 1, 2015)

**Purpose:** The aim of this fund is to encourage research and scholarly activity among SODM faculty members who have an appointment at 80% effort or higher. Therefore, this fund is intended to support faculty, who are beginning their academic career or who lack the opportunity to develop their own individual faculty development funds, in traveling and presenting their academic leadership and/or research accomplishments at appropriate conferences.

**CLARIFICATION: THIS POLICY IS SEPARATE AND DIFFERENT FROM THE SDM FACULTY DEVELOPMENT FUND POLICY:** No tangible items (Loupes, computers, iPads, books, etc.) are to be purchased with this funding. These funds are strictly for travel, registration and presentation support of academic/research productivity by the faculty member.

- A. Process for requesting funds from the Dean's Faculty Development Fund
  1. Meet with your Department Chair to discuss funding need. Please supply the abstract/academic product/research product for his/her review and a full list of costs to be covered through the fund.
  2. After reviewing the request and the available development funds available to the faculty member, the Department Chair will decide whether to forward the request on the faculty member's behalf to the Director of Faculty Affairs and Clinical Operations (currently Ms. Sheila Kennedy) via a form supplied by the Committee. On this form, the Chair should provide a brief statement describing why they support this proposal. In addition, the Chair will be required to acknowledge the dates of absence of the faculty from teaching or clinic activity.
  3. Once received, the committee will review the request within two weeks of the submission. The committee can send the request back to the Chair for more information during this time frame.
  4. The faculty member and Department Chair will be updated as to the approval/denial and amount of funds awarded within two weeks of the submission. The approval may include all funds requested or a portion based upon each individual request.
  5. The faculty member will coordinate travel, registration and any other details through their department support personnel, who will then work with the SODM Office of Financial Affairs.

B. School approved uses of these specific Dean's Faculty Development Funds

1. Travel (airfare, transportation costs, lodging, meals, etc.) for appropriate conferences/associated meetings where the faculty member participates in academic leadership and/or research presentations of their scholarly activity (papers, abstracts, etc.)
  - a. Includes both oral and poster presentations.
  - b. Does not include meeting attendance alone.
  - c. All University travel policies and procedures must be followed when traveling on University business, **including attaining approval for travel from your department Chair during initial chair approval process.**
2. Registration costs to attend appropriate conference where the faculty member is participating in or presenting their academic leadership/research productivity
3. Materials that would assist you in your presentation
4. Attendance for Diversity and Inclusion training and/or presentations.

C. Qualifying Faculty and other criteria

1. Instructors, Assistant Professors, Associate Professors. Full Professors are not eligible. Individuals must hold an appointment that is 80% effort or higher.
2. Faculty members who hold a significant leadership role in an appropriate organization (ADEA Section, NIDCR Section, etc.).
3. Each Faculty member's individual faculty development funds will be taken into account by the committee during the review process.
4. For any given leadership position that includes progression through the ranks of leadership, an individual will be limited to two awards.

D. Non-Qualifying Costs

1. Costs for spouses, significant other and children to attend events (travel, registration, meals).
2. Any charges for alcohol
3. Other prohibited costs as outlined by University policy.

E. Funding Limits and Appeals

1. Each faculty member who receives funding will be limited to a maximum cap of \$3,000 per fiscal year. In the event that a request for funding is denied, the faculty member may appeal the decision to the Faculty Development Committee.



School of Dental Medicine  
UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS

Dean's Development Fund Request Form

Requestor Name: \_\_\_\_\_  
Date: \_\_\_\_\_  
Department Chair: \_\_\_\_\_  
Funding for: \_\_\_\_\_  
Amount Requested: \_\_\_\_\_

Do you have other sources of development funds?      Yes                      No

**Complete if Requesting for Professional Meeting/Speaking Engagement**

Name of Meeting: \_\_\_\_\_

Presenting Abstract (poster, oral presentation)?      Yes                      No  
(If yes, please include copy of abstract and outline what/how you will be presenting)

Amount requested will cover (breakout of costs: airline tickets, registration, hotel):

\_\_\_\_\_  
(include meeting program, registration fee, copy of airline estimates and hotel estimates from websites)

Number of clinic coverage sessions missed: \_\_\_\_\_

**Complete if Requesting Funding for Research**

Research Topic: \_\_\_\_\_

Amount requested will be used for: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**To be completed by the Departmental Chair**

I acknowledge that \_\_\_\_\_ will be absent from his/her clinical  
or teaching duties on \_\_\_\_\_.

Please provide a brief statement explaining why you support this request.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Department Chair Signature

\_\_\_\_\_  
Date

## Innovation Project Fund Request

### University of Colorado School of Dental Medicine

#### Innovation Project Fund Guidelines

As of August 10, 2021

Purpose: The aim of this funding opportunity is to encourage innovation within the School of Dental Medicine in areas identified by the SODM Innovation Agenda. This opportunity is available to SODM faculty members who have an appointment at 50% effort or higher. The funding provided by this mechanism is not intended for the funding of basic science research, but rather is intended to fund small-scale projects to bring innovation to the curriculum and clinics in focus areas identified by the Innovation Agenda. The funding provided by this mechanism is specifically designed to support the activities of clinical faculty and faculty with teaching as their primary responsibility in innovative research, service and teaching endeavors, where other funding opportunities are limited. Projects bringing innovation to clinical, pre-clinical and didactic curricular elements will receive special attention.

#### THIS FUNDING OPPORTUNITY IS SEPARATE AND DISTINCT FROM OTHER FUNDING MECHANISMS AVAILABLE TO SODM FACULTY TO FUND BASIC SCIENCE RESEARCH:

No funds obtained through this mechanism can be used to support salaries. No tangible items (Loupes, computers, iPads, books, etc.) are to be purchased with this funding unless their purchase is justified by direct and sustained use in the SODM curriculum/clinics or as specifically required and justified in the budget to accomplish project goals. The budget will not include funds to support travel, registration and presentation of project results at a national/international meeting, since this funding is available by a different mechanism (see below).

#### Process for requesting funds from the Innovation Project Fund:

1. Meet with the appropriate Faculty Expertise Team Leader on the Innovation Task Force that best matches the primary focus of the project. Faculty Expertise Teams currently include Bio-banking, VR/AR/Gamification, Digital Dentistry, Person-Centered Care, iPad in the Classroom and Clinics, and Biomedical Materials. The Faculty Expertise Team Leader will provide guidance on the application process to request Innovation Project Funding.
2. After reviewing the request with the Faculty Expertise Team Leader, the Innovation Project Fund Request Form should be submitted to Ms. Sheila Kennedy. As noted on the Innovation Project Fund Request Form, Department Chairs are required to review and approve the request. This should be done prior to submitting the request to the Task Force.
3. Applications are due quarterly with the following deadlines: January 15, April 15, July 15, October 15.
4. Innovation Task Force members submitting a proposal will be excluded from the discussion and vote for funding.

5. Items included in the Application Form include:
- Project Leader and name of involved faculty, as well as the role of each on the project
  - Date
  - Name of Project
  - Project Timeline
  - Amount Requested
  - Description of Innovation Project
  - Description of how project results will be implemented and lead to innovation in the SODM
  - Budget & Justification – \$5,000 maximum budget; larger requests may be considered on an individual basis and require pre-approval from the Dean’s Innovation Task Force.
  - Plans to Publish &/or Present Project Results at National/International Meeting – Funds to support these activities should not be included in (e) Budget & Justification” (above) but can be requested by a separate mechanism as described in the “Dean’s Faculty Development Fund Guidelines” document.
6. In addition, please answer the following questions in your proposal write-up:
- Please specify the innovative aspects of the project- i.e. how does this qualify as being innovative? Are there similar studies in literature over the past 5 years or so that will answer the questions being asked?
  - Is your study hypothesis driven? Yes/No
    - If yes, please state the Hypothesis.
  - What is the outcome of your study? Please specify the outcome variable of your study. ( e.g. Accuracy of a tool, comparison between techniques, etc.)
  - How will you measure the outcome variable in your study? Please describe a method for how you will quantify the variables of the study? (here are a few example questions to think about)
    - Does more than one person measure the outcome variable? Yes/No
      - If Yes, then how will you calibrate the investigators?
    - Describe an assay for comparison between two techniques/tools/ procedures.
      - How will this be measured and quantified?
  - Are there any variables that will impact the outcome variable? Yes/No
    - If Yes, what are they?
    - How will you measure them?
  - How will you analyze the data produced from your study? What statistics will be used?

#### Application Review Process

Applications are reviewed by members of the Innovation Task Force as soon as possible after submission deadlines. Funding will be determined based on merit and availability of funds. Innovation Task Force member(s) submitting an application will be excluded from the discussion and vote for funding of that application.

#### Funding Limits and Appeals

Each faculty member who receives funding will be limited to a maximum cap of \$5,000 per fiscal year as project leader.

**Innovation Project Fund Request Form**

Project Leader: \_\_\_\_\_

Additional Faculty and Roles: \_\_\_\_\_

Date: \_\_\_\_\_

Name of Project: \_\_\_\_\_

Project Timeline: \_\_\_\_\_

Amount Requested: \_\_\_\_\_

**Attach** description of Innovation Project (include how it fits with the Innovation Agenda) (one page limit).

**Attach** description of how project results will be implemented and lead to innovation in the School of Dental Medicine (1/2 page limit). Include list of faculty members involved and roles.

**Attach** Budget and Justification (**no funding of salaries**) (\$5,000 maximum)  
(some examples to include in your budget: materials for the project, use of software, translation services, travel expenses, etc.)

**Attach** plans to publish and/or present findings at national/international meetings.

**To be completed by the Departmental Chair**

I acknowledge that \_\_\_\_\_ will be requesting funds for an innovation project to be incorporated into his/her daily workload.

Please provide a brief statement explaining why you support this request.

\_\_\_\_\_  
Department Chair Signature:

\_\_\_\_\_  
Date



## Annual Merit Evaluations

Annually, Department Chairs will conduct merit evaluations on each of the faculty members within his/her department. Merit Evaluations are separate and distinct from Interim (Comprehensive) Reviews and Promotion and Tenure Reviews. Merit evaluations are meant to provide faculty with annual feedback on their performance in teaching, both didactic and clinical, patient care, research, and leadership and service.

The performance of each faculty member is based in part on the goals established for the faculty member the previous year and the agreed upon manner in which the faculty member's effort was to be distributed for the year. All faculty have a Professional Plan that includes one- and five-year goals, as well as how the faculty member's work effort should be distributed in the year.

Performance of all full-time faculty is evaluated on an annual basis as part of the University salary setting process. This evaluation process begins with all faculty members being notified of the timeframe for completing the faculty review and planning process, and being provided a copy of the applicable forms to be used. Faculty complete the review form and attach supporting materials such as grant face sheets, copies of published articles, teaching materials developed, etc. These materials are submitted to the department chair who reviews the information. If there are questions concerning the material submitted, the department chair meets with the faculty for further clarification.

Each department chair submits the reviews to the Dean's Office for review and scoring. The department chair meets with the Dean to review and discuss the performance of and scoring for each faculty member. They jointly agree on the final performance rating for each faculty member. The Dean ensures that there is consistency of ratings across departments. It is the department chair's responsibility to meet with faculty to provide feedback on the evaluation of performance in teaching, patient care, research, and service and on the overall performance rating for the year.

### Salary Determinations

Although merit evaluations are part of salary determination, faculty should refer to the University's Faculty Handbook, <http://www.cu.edu/regents/article-11-compensation-benefits-and-other-personnel-matters>, for Board of Regent and University salary setting policies.

### Examples of Merit Evaluation Forms

The following documents are examples of forms used during the 2018 evaluation period. The University and the School of Dental Medicine reserve the right to change these documents from year-to-year. It is the faculty's responsibility to ensure they receive an annual merit evaluation each year.



Part I CY 2021 Faculty Review  
(January – December 2021)[illegible]

Part I CY 2021 Faculty Review  
(January-December 2021)

B. Student Advising/ Counseling

(1) Group Leader: Formally assigned as a faculty group leader for a cadre of students in a clinical setting for at least one complete semester.

Yes      No      (Circle One)

(2) Academic Advising: Academic planning and progress assessment for students outside of assigned classroom or clinic hours.

Hours per week: \_\_\_\_\_

(3) Student Counseling: Clinic consultation for students outside of assigned classroom or clinic hours.

Hours per week: \_\_\_\_\_

(4) Graduate Student Mentoring: Research related guidance and assistance for graduate students. Must occur for a minimum of one complete semester.

# Of Basic Science Students: \_\_\_\_\_

# Of Clinical Graduate Students: \_\_\_\_\_

(5) Graduate Students Lab Rotations: Research related mentoring of basic science students through a research lab setting.

# Of Basic Science Students: \_\_\_\_\_

(6) Special Mentoring Service: Faculty mentoring for unique circumstances such as rotations of students from other schools or University's for a minimum of one semester.

# Of Students: \_\_\_\_\_

C. Teaching Awards/Honors/ Recognition: Identify Each

School \_\_\_\_\_

Campus \_\_\_\_\_

University \_\_\_\_\_

D. Other Teaching Activities:

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Chairperson Comments:

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(January- December 2021)

Faculty Member: \_\_\_\_\_

## II. SCHOLARLY ACTIVITIES

A1. Publications **and Abstracts**: (Include only those works that have occurred within the evaluation period.)

TO RECEIVE SCORING FOR PUBLICATIONS, ATTACH A COPY OF THE TITLE PAGE OF EACH PUBLICATION WITH THE REFERENCE DATE STATED.

List Published Article or Presented Abstract Title(s)	(Check One Per Title)									
			Author/ Chapter	Editor Book	Abstract	Other	Date Published			Date Abstract Presented
	Journal	Journals								

A2. **List CATS** you have helped students with:

\_\_\_\_\_

## B. Research and Service:

Grants/Contracts

TO RECEIVE SCORING FOR RESEARCH OR SERVICE, ATTACH FACE PAGE OF AWARD(S) AND/OR SUBMISSION.

List Title(s)	Check One		Role		Award -Evaluation Period Only			Submission
	Submitted During Evaluation Period	Awarded During Evaluation Period	Principle Investigator	Participant	% of T&E	Direct \$ Cost of Award	Indirect \$ Cost of Award	\$ Budget Request Year One

(January-December 2021)

C. Peer Review

Identify Commitment

	Active Current Year (Check One)		Check One Per Title					
			Referee/Reviewer		Editorial BD Nat'l Prof Journal	NIH Study Section Member	Other Grant Review Member	Abstract Review
	Yes	No	Nat'l Prof Journal	Other Journal				

D. Scholarly Presentations: (Excludes UCSDM CE)

List Title(s) and Organizations	Activity (Check One)				Location (Check One)			Date	Length of Presentation (hours)
	Meeting Organizer	Plenary Session	Invited	Presenter	National	Regional	Local		
		Speaker	Panelist						

E. Other Scholarly Activity: (e.g. development of supplemental course material, manuscript reviews, videos, etc.)

Chairperson Comments:

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Part I CY 2021 Faculty Review  
(January-December 2021)

Faculty Member: \_\_\_\_\_

**III. SERVICE**

**A1. Patient Care (Dental Faculty Practice Only)**

Clinical Practice: # Of Half Day Sessions Per Week \_\_\_\_\_  
 Consulting: (Patient care not student advising) # Of Patients per Week \_\_\_\_\_  
 Community Service: (GKAS, Kind, etc.) # Of Events For Year \_\_\_\_\_  
 TO RECEIVE SCORING FOR COMMUNITY SERVICES, IDENTIFY COMMUNITY SERVICE EVENTS.

**A 2. Special Program Leadership: (describe role)**

**B. Committee Service**

Committee Title	Check One Per Committee		Check One Per Committee			
	Chair	Member	Department	School	Campus	University

**C. Governance**

Check as Applicable for Review Year							
Faculty Senate				Faculty Assembly			
Delegate	Secretary	VP	President	Delegate	Secretary	VP	President

**D. Professional Organizations**

Organization Title	Check as Applicable						Check One		
	Member	Site Visitor	Project Advisor	Expert Witness	General Consultant	Officer	National	Regional	Local

E. UCSDM Continuing Education

List Course(s)	Check One Per Course		Direct Hours Of Course Development		Direct Hours of Course Presentation		Date
	Course Director	Course Faculty					

F. Honors and Recognition:

G. Gifts/Donations Obtained:

Chairperson Comments:

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Part I CY 2021 Faculty Review  
(January-December 2021)

Faculty Member: \_\_\_\_\_

IV. Administrative Activity (Check As Appropriate)

Associate Dean \_\_\_\_\_  
Chairperson \_\_\_\_\_  
Division Head \_\_\_\_\_  
Program Director (Ortho, GPR, ISP, CE, etc.) \_\_\_\_\_  
Director (CE-JADA, ACTS, Specialty Clinics, etc.) \_\_\_\_\_  
Other non-reoccurring assignment (i.e. Accreditation team leader) \_\_\_\_\_

**Other Factors**

Professional growth, board certifications, academic promotions, etc.

Chairperson Comments:

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Signature of Faculty Member Providing Information for this Form

\_\_\_\_\_  
Faculty Member Signature

\_\_\_\_\_  
Date Submitted to Chairperson

THIS FACULTY MEMBER SIGNATURE DOES NOT IMPLY THE FACULTY MEMBER AGREES WITH THE  
COMMENTS OR EVALUATIONS OF THE CHAIRPERSON EVALUATION OF THE CHAIRPERSON

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Signature of Chairperson or Person Completing This Review:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Faculty Peer Review

### University of Colorado School of Dental Medicine Faculty Peer Review of Didactic Teaching Policy

June 2022

Replacing policy dated November 2013 (March 2009)

#### **Purpose:**

Peer reviews of didactic teaching will be offered to all faculty participating in didactic teaching to provide the opportunity for immediate and pertinent feedback. The intent of the feedback is to provide a means for enhancing teaching skill, performance, and outcomes.

#### **Process:**

There are three situations in which faculty members may be assessed:

1. Faculty are required to submit a Peer Evaluation of teaching with their Interim Evaluation and Promotion/Tenure dossiers. Peer Evaluation is a required method of teaching evaluation as outlined in the School of Dental Medicine's promotion documents.
2. A Department/Division Chair can request that any faculty within their department/division be assessed.
3. Any faculty member can request to be assessed at any time.

The faculty member being evaluated under any of these situations will contact their Department/Division Chair to arrange the logistics of the evaluation: 1) when the evaluation will take place; 2) who will conduct the evaluation ("reviewer"). The reviewer should be a senior faculty member who has knowledge of the intent and process of the review.

The agreed upon reviewer will observe a class session of the faculty and complete a standardized peer review form (Attachment 1). The standardized form will be used for each peer review to ensure the completeness and consistency of the review. As indicated on the review form, a faculty member will be assessed in each of the following categories:

1. Knowledge of Subject
2. Clarity and Organization of Lecture
3. Encouragement of Questions
4. Presentation/Rapport
5. Relating Material to Career Applications
6. Overall Presentation

The reviewer is encouraged to provide comments that will further clarify the strengths and weaknesses of the teaching performance. Prior to the review there should be an initial one-on-one meeting between the faculty member and Department Chair to set goals for the assessment. A follow-up meeting will be conducted to review the written assessment report.

Upon completion of the review form, the reviewer will present and discuss it with the faculty member. The faculty member will acknowledge the feedback by providing their signature to the form.

For those faculty being evaluated for Interim and Promotion/Tenure review, copies of the completed and signed form should be given to their Department Chair and included in their dossiers.

For those faculty requested by their Department/Division Chair to have an assessment, a copy of their completed and signed form should be given to their Department/Division Chair.

Those faculty members who request the assessment on their own may choose to keep the assessment confidential.

## Peer Assessment Summary

### Who will be assessed?

- All faculty at the SODM will be assessed prior to their Interim Review and prior to a review for promotion.
- A Department/Division Chair can request any faculty within their department/division to be assessed.
- Any faculty member wishing to be assessed at their own request.

### Who will be completing the assessment?

- A mutually agreed upon individual will conduct the assessment. The reviewer does not have to be a faculty at the School of Dental Medicine, but must be in an appropriate position at the University to conduct such an evaluation.

### When will assessments occur?

- The faculty member being evaluated will contact their Department Chair to schedule the assessment. Once the assessment is scheduled, the faculty member will notify the Office of Faculty Affairs of the date and time the assessment will take place.

### Who gets a copy of the evaluation?

- Faculty will forward a copy to their Department Chair and include a copy in their Interim Review and Promotion/Tenure dossiers.
- Faculty who have been requested by their Department Chair to have an assessment completed, will give a copy to the Department Chair.
- Faculty who request the assessment on their own, may choose to keep the assessment confidential.

Attachment 1

**University of Colorado School of Dental Medicine  
Peer Review of Didactic Teaching**

Course Title: \_\_\_\_\_  
Faculty Name: \_\_\_\_\_  
Reviewer Name: \_\_\_\_\_

**Knowledge of Subject**

The instructor (a) demonstrates a thorough and up-to-date knowledge of the subject matter, (b) answers questions clearly and accurately.

Comments: \_\_\_\_\_  
\_\_\_\_\_

**Clarity and Organization of Lecture**

The instructor (a) begins class on time, (b) presents goals or objectives for the period, (c) reviews prior material, (d) presents material in a logical sequence (e) periodically relates new material to previous learning and experience, (f) summarizes main points at the end of the period, (g) ends class on time.

Comments: \_\_\_\_\_  
\_\_\_\_\_

**Encouragement of Questions**

The instructor (a) encourages questions, (b) seeks active student involvement beyond simple questioning.

Comments: \_\_\_\_\_  
\_\_\_\_\_

**Presentation/Rapport**

The instructor (a) speaks clearly, (b) holds the students' attention throughout the period, (c) highlights important points, (d) presents appropriate examples, (e) attains active student involvement (f) explains assignments clearly and thoroughly, (g) listens carefully to students comments, questions, and answers and responds constructively, (h) checks periodically for student understanding, (i) treats all students in a courteous and equitable manner.

Comments: \_\_\_\_\_  
\_\_\_\_\_

**Relating Material to Career Applications**

Comments: \_\_\_\_\_  
\_\_\_\_\_

**Overall Presentation**

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reviewer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Things to Avoid in Peer Review

1. **The Halo Effect:** Allowing one positive factor to outweigh all other aspects of the assessment.
2. **The “I Don’t Like Your Face” Effect:** Allowing one negative factor to outweigh all others.
3. **Leniency:** Being uncritical in order to avoid controversy.
4. **Central Tendency:** Evaluating everyone as “average” because it is less trouble.
5. **Tunnel Vision:** Focusing on only one part of the performance rather than the whole picture.
6. **Going Through the Motions:** Not taking the evaluations seriously, or making up your mind in advance.
7. **I’m the Expert:** Using your own teaching performance as criteria for judgment rather than agreed upon evaluation standards.
8. **Gotcha:** Using the evaluation for political purposes or personal revenge.

\* Modeled after the University of North Carolina’s and The Ohio State University’s peer evaluation tools

## **Promotion & Tenure**

## **TENURE TRACK/TENURE FACULTY**

### **Appointment, Promotion and Tenure Requirements for Tenure Track Faculty with start of employment, or appointment track transition ON or AFTER February 11, 2022**

Approved by the University of Colorado School of Dental Medicine Faculty Senate on  
May 23, 2022

(Replacing version approved on April 1, 2014)

Approved by the Executive Vice Chancellor for Academic and Student Affairs,  
University of Colorado Anschutz Medical Campus

February 11, 2022



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## **Preamble**

This governance document outlines the process of appointment, promotion and evaluation of all Tenure Track faculty members. Appointment, promotion and tenure decisions for Tenure Track faculty are based on summary evaluations of the faculty member's cumulative performance. These processes are separate and distinct from the annual merit performance evaluation. Every candidate for interim evaluation, promotion, and/or granting of tenure shall consult with and be advised by the chair of their department regarding the areas of performance that will be examined, the standards of performance that must be met, and the criteria that the Promotion, Tenure, and Post-Tenure Review Committee uses in reaching a decision about the candidate's performance. As such, the chairperson or a departmental level advisory committee is expected to provide a first level assessment of a faculty member's readiness for consideration of promotion or granting of tenure.

In preparation for a faculty member's interim review and submission of their name for promotion or tenure, the chair of their department has the responsibility for providing leadership toward the achievement of the highest possible level of excellence in the teaching (didactic, preclinical, and clinical), scholarly activity, and leadership and service activities, as appropriate. The chair is expected to articulate the goals of the department and to maintain a climate that is hospitable to creativity and innovation. The chair is also expected to be knowledgeable of and be able to articulate the processes and procedures outlined in this document. The chair shall assist the faculty member with the development of their review, promotion, and tenure dossiers.

## **Definitions/Glossary of Terms**

**Five years full-time service:** will be based off 100% FTE and prorated for time less than 100% FTE.

### **Terminal Degrees:**

- 1) For Dental Hygienists, at least a Master's degree in a related field
- 2) For foreign-trained dentists, BDS/DDS from non-U.S. accredited school and Master's degree or advanced training certificate from a U.S. accredited institution;
- 3) For general dentists, DDS/DMD from a US accredited school;
- 4) For specialists, advanced training certificate in addition to the DDS/DMD;
- 5) and PhD or equivalent for basic science researchers.

**Scholarly presentations:** presenting work (oral or poster presentations) that has resulted from research, clinical trials or educational innovation at state, national, and/or international conferences.

**Continuing Education:** presenting or attending courses designed to enhance your clinical skills and to stay current on changes in the field of dentistry.

### **Related Policies/Cross References**

University Administrative Policy Statement (APS) 1022: Standards, Processes, and Procedures for Reappointment, Tenure, Promotion, and Post-Tenure Review

APS 1009: Multiple Means of Teaching Evaluation

APS 5008: Faculty Performance Evaluations

APS 5060: Faculty Titles

Campus Administrative Policy 1049: Reappointment, Tenure, and Promotion Review

Campus Administrative Policy 1050: Post-Tenure Review

Regent Law 5.C: Faculty Appointment and Tenure

Regent Policy 5.C: Faculty Appointments

Regent Policy 5.D: Reappointment (to a tenure-track position), Tenure, and Promotion

Regent Policy 5.G: Faculty Grievance

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# **REQUIREMENTS FOR APPOINTMENT, REAPPOINTMENT, PROMOTION, AND TENURE FOR FULL-TIME TENURE-TRACK FACULTY IN THE SCHOOL OF DENTAL MEDICINE, UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS**

## **1. INTRODUCTION**

The purpose of this document is to provide a written reference for the procedures and requirements for the appointment or promotion of tenure-track and tenured faculty within the University of Colorado School of Dental Medicine (CUSDM). Additional references that are also applicable are the sections which apply to the faculty appointments and rank in the Laws of the Regents of the University of Colorado, Administrative Policy Statement 1022, and Campus Administrative Policy 1049.

The department chair provides guidance in compiling a complete dossier for the candidate who then forwards it to the CUSDM Promotion, Tenure, and Post-Tenure Review Subcommittee via Interfolio. If a candidate is a department chair or a department chair refuses to nominate the candidate, the faculty member may be nominated by another full-time CUSDM faculty member of equal or higher academic rank for the position under consideration.

Departments shall ensure that reasonable mentoring opportunities are available for tenure-track faculty members during their probationary period. Department chairs have the responsibility to assist any faculty member who requests a mentor during their probationary period to locate an appropriate mentor on the campus. At times, it may be helpful to identify an external mentor from another CU campus or from outside the University.

## **2. TENURE ELIGIBILITY**

A tenured appointment can only be held by a faculty member in one of the academic ranks of Professor or Associate Professor. Tenure may be awarded to faculty members who have demonstrated at least meritorious performance in each of the three areas of teaching, scholarly/creative work, and leadership and service, and demonstrated excellence in either teaching or scholarly/creative work. Tenure may not be granted based on excellence in leadership/service (Regent Policy 5.D – Reappointment (to a tenure-track position), Tenure, and Promotion; and APS 1022). Once attained, tenure remains in effect regardless of promotion to higher rank.

Administrative positions do not carry the possibility of tenure, but an administrator holding an eligible academic rank may be granted a tenured appointment in that rank as a faculty member.

A decision on a tenured appointment as a member of the CUSDM faculty is usually made after a maximum probationary period of seven years of continuous full-time service in the ranks of Professor, Associate Professor, or Assistant Professor. The tenure

probationary period shall begin when the faculty member is first appointed to the rank of assistant professor or a higher rank. Normally, the tenure review for a faculty member will commence at the beginning of the seventh year of service. A faculty member who is not awarded tenure will be given a one-year terminal appointment.

After appropriate consideration, and special circumstances, tenure may be awarded by the Board of Regents in less than seven years. Up to three years of full-time service in the ranks of Assistant Professor, Associate Professor, or Professor in an educational setting may be included in the probationary period or a faculty member may submit their dossier earlier than seven years.

A tenure-track faculty member may request an extension of the probationary clock (see Appendix A for request form). The request will be considered in extenuating circumstances so long as the letter is submitted prior to the start of the review for promotion or tenure by the School of Dental Medicine's Promotion, Tenure, and Post-Tenure Review Subcommittee. (See also Page 8.) Extensions may be granted in one-year increments, and must comply with university and/or campus policy and be approved by the Dean and the Chancellor or the Chancellor's designee.

A tenure-track faculty member may request a Clinical Teaching Track Appointment or a Research Track Appointment before the sixth year of a faculty appointment, or in the year prior to the expiration of an extension. Tenured faculty may also request appointment to the Clinical Teaching Track or Research Track. New faculty may be recommended for Clinical Teaching Track or Research Track during the hiring process. Clinical Teaching Track and Research Track faculty may request a Tenure Track appointment while at the rank of Assistant Professor or Associate Professor. The probationary period will begin at the time of appointment to the Tenure Track. Faculty will be held to the requirements, processes, and procedures of a Tenure Track faculty in the most current Promotion and Tenure document at the time of appointment. Interim tenure review (comprehensive review) is an important part of the tenure process. Each faculty member below the rank of Associate Professor shall be evaluated in a comprehensive manner and in accordance with the Administrative Policy Statement (APS 1022): Standards, Processes, and Procedures for Reappointment, Tenure, Promotion, and Post-Tenure Review, and Campus Administrative Policy 1049 at least once during the tenure probationary period apart from the review for award of tenure. This review typically takes place in the fourth year after appointment to the tenure track. Such evaluation may include external letters of evaluation of the candidate if requested by the Chair of the Promotion and Tenure and/or Dean's Review Committees. Each faculty member shall be informed orally and in writing of the results of the evaluation by the chair of their department, which will be one of two outcomes: a) reappointment to a tenure-track position, or b) one-year terminal appointment and the tenure-track appointment will not be continued. Guidelines for Interim Review are outlined in Appendix B.

Per Regent Policy 5D, A recommendation of tenure based on excellence in scholarly/creative work shall include evidence of impact beyond the institution. A recommendation for tenure based on excellence in teaching shall include multiple

measures of teaching evaluation and demonstrated achievement at the campus, local, national, and/or international level that furthers the practice and/or scholarship of teaching and learning beyond one's immediate instructional setting.

In addition to the School of Dental Medicine's Promotion and Tenure document, tenure track faculty should be familiar with Regent Policy 5.D, University Administrative Policy Statement (APS) 1022, and Anschutz Medical Campus Administrative Policy 1049.

### **3. CRITERIA FOR APPOINTMENT, REAPPOINTMENT, AND PROMOTION OF FULL-TIME FACULTY MEMBERS, CUSDM**

A. The three primary categories that are used to evaluate faculty members are:

1. Teaching (and clinical activity where relevant)
2. Scholarly/Creative Work
3. Leadership and Service

In addition, a faculty member is expected to demonstrate professional growth and professional behavior. Professional behavior includes interactions with patients, staff, students, and colleagues. These two general aspects will, consequently, also be taken into account. The nature of the faculty member's duties must be considered but a faculty member who has administrative duties must meet standards for academic promotion and tenure as other faculty members.

During promotion review, faculty will be evaluated in the three areas of teaching, scholarly/creative work, and leadership and service as 1) Excellent, 2) Meritorious, or 3) Not Meritorious. For promotion to Associate Professor and granting of tenure, the candidate must be excellent in either teaching or scholarly/creative work.

Tenure Track Promotion to Associate Professor and Granting of Tenure	
Teaching	Excellent or Meritorious
Scholarly/Creative Work	Excellent or Meritorious
Leadership and Service	At least Meritorious
Tenure Track Promotion to Full Professor	
Teaching	Excellent (required)
Scholarly/Creative Work	Excellent (required)
Leadership and Service	Excellent (required)

Candidates for promotion should refer to Appendix C for guidelines on compiling their dossiers for submission to the Promotion, Tenure, and Post-Tenure Review Subcommittee.

*The following written criteria are intended to serve as a guide for the appointment, reappointment and/or promotion of faculty members, and the awarding of tenure. In addition, they must be used in post-tenure review procedures. A Promotion Criteria Matrix is provided in Appendix D to evaluate teaching, scholarly/creative work and leadership and service activities.*

*The CUSDM Evaluation Committees will use the Promotion Criteria Matrix (Appendix D) to determine Meritorious or Excellent achievement in the three areas.*

B. Criteria:

**1. Teaching**

High quality teaching is an important part of the mission of this School. As such, teaching will be evaluated rigorously. The following general criteria will be considered regarding a determination of teaching achievement:

- a. Active support of the teaching program of the School and University.
- b. Teaching responsibilities (e.g., contact hours, course directorship).
- c. Dedication of the faculty member to teaching, as shown by their knowledge of the subject and by such factors as course organization, innovations in teaching, objectivity and fairness in student evaluation, availability, enthusiasm, and ability to stimulate students to enhance their capacity for critical thinking. Evidence should be presented of continued mastery of subject areas (e.g., attendance at courses, conferences or teaching laboratories specifically designed to enhance teaching and clinical abilities). Presenting CE is considered under Leadership/Service.
- d. Preparation of teaching materials, evidence of teaching skills development (e.g., teaching portfolio), and use of appropriate methods of student evaluation for outcomes-based improvements.
- e. Evaluation by the candidate's department chair and/or peers (Peer Evaluation Form) of the faculty member's command of the subject and general effectiveness as a teacher in the didactic, clinical, and/or pre-clinical laboratory setting.
- f. Advising and mentoring of undergraduate, post-baccalaureate, pre-doctoral, post-doctoral, and graduate students.
- g. Student evaluations of the overall effectiveness of the faculty member as a teacher.
- h. Teaching awards, specialty training and other appropriate Board certification/recertification, and other significant accomplishments.
- i. Clinical Teaching as it relates to being a Practice and/or Team Leader.
- j. Developing/designing/revising courses that incorporate diverse scholarly perspectives, concepts, readings and/or scholarship representing diverse authors as relevant to course material.

- k. Participation in workshops or trainings on unconscious bias, diversity and inclusion, or other topics intended to improve classroom culture, teaching or mentorship.

## **2. Scholarly/Creative Work**

All full-time, tenure-track members of the faculty of CUSDM must engage in scholarly/creative work appropriate to their scientific and/or educational interests. The following general criteria will be considered in evaluating a faculty member's scholarly achievement:

- a. The quality and quantity of papers published in peer reviewed journals. These may include original research articles, review articles and extensive case/technique/application reports as outlined in Appendix E. The quality of the journals themselves and the position of authorship will also be considered. Publication is a critical component of scholarly activity and should be a continuous process as well as ideally displaying some degree of technical focus that allows definition of areas of expertise. External letters of reference should speak to the quality of the publications.
- b. To a lesser extent, the quality and quantity of papers published in State journals or non-peer reviewed journals.
- c. Contributions to textbooks (e.g., book author and/or editor, chapter author, etc.).
- d. Contributions to audiovisual works published by a company or institution other than the University of Colorado. In general, such items should be scholarly and not represent continuing education, which is considered under Leadership and Service.
- e. Funded research grants with external peer-reviewed applications receiving greater weight than internally funded or unfunded scholarly work.
- f. Unfunded research grant proposals. Reviewers' comments in these cases must be considered.
- g. Presentations of research and/or scholarly material (oral or poster presentations) and published abstracts associated with professional or scientific meetings. Invited presentations to speak at other institutions or at international/national meetings will receive greater weight than oral and/or poster presentations. This criterion does not include presenting continuing education courses, which is considered under Leadership and Service.
- h. Creation of new, original, advanced educational materials using innovative technologies including, but not limited to, digital dentistry, haptics, virtual/augmented reality, gamification, and/or iPads and



applications. Creation of new PowerPoint/Keynote lectures will not be considered scholarship.

- i. Development of new techniques, therapies, clinical guidelines, patient care pathways or health care delivery systems that have improved the health of patients or populations.
- j. Inventor status on patents or patent applications, or invention disclosures, or electronic teaching media creation.
- k. A national or international reputation as a scholar/researcher, as evidenced by honors/awards, service as a grant reviewer, NIH study section participant, external program evaluator, or other significant accomplishments.
- l. The actual thesis involved in obtaining an advanced degree will NOT be normally considered, although publications emanating from the thesis will be considered. The rationale for not considering a thesis is that writing a thesis is part of training and generally reflects the influence of the graduate study supervisor.
- m. Presentations or publications on the Scholarship of Teaching and Learning
- n. Secures funding for or publishes on educational initiatives related to diversity and inclusion, and health equity.
- o. Secures funding, or partners on one or more research projects with community organizations, for research that addresses diversity and inclusion, and health equity.

### **3. Leadership and Service**

The third component of typical faculty activities is leadership and service, which includes leadership and service to the School/University, the profession, and the community.

**Leadership and Service to the University-** This responsibility involves a general contribution to the University, over and above teaching and scholarly activity.

The following criteria will be considered:

- a. Participation in the administration and governance of the Faculty, the School, the Campus, and the University, including active and productive participation in committees at various levels.
- b. Representation of the School or University to organized dentistry and other professional groups, including participation on behalf of the School.

- c. Representation of the School or University to government agencies, when formally requested by the Dean or Department chairperson.
- d. Helping and encouraging the professional growth of junior faculty members and other colleagues.
- e. Doctoral dissertation and Master's committee participation and/or thesis committee member of students other than those in their program.
- f. Participation on or leading a committee that aims to support or promote diversity and inclusion, and health equity.

**Leadership and Service to the Community and Profession-** Leadership and service to the scientific and dental community is very important to the School and is essential to the future prosperity and survival of this and other dental schools. It involves both leadership and service to the dental profession, the scientific community, the surrounding region, the nation, and to the people of the State of Colorado.

The following criteria will be considered:

- a. Leadership and service to the profession and appropriate discipline(s) at the state, national, and international levels.
- b. Participation on NIH study sections, grant reviewer, and external program evaluation.
- c. Editorship of a journal, editorial board/reviewer for a journal, table clinic participation, panelist on professional panels.
- d. Consultative services to other health professionals, hospitals, institutions of higher education, and government agencies.
- e. Presenting continuing education lectures and/or clinical workshops at university, local, state, national, or international meetings. This criterion involves presentations that represent continuing education, rather than the presentation of research and/or other scholarly activity.
- f. Presentations on dentistry and related topics to the lay public.
- g. Participation in community dental health education projects.
- h. Participation on or leadership of a state, regional, national, professional task force related to diversity and inclusion, and health equity.

*NOTE: While leadership and service to the community as described in this section is important and casts a favorable light upon the School, faculty members must be careful to balance this activity with the University's legitimate expectations of them in teaching, scholarly/creative work, and leadership and service to the School.*

#### **4. QUALIFICATION FOR FACULTY RANK, PROMOTION, REAPPOINTMENT, AND TENURE**

##### **A. Assistant Professor**

1. General Statement- An assistant professor is expected to have some successful teaching experience in dental education or equivalent. Faculty at this level will demonstrate advanced formal training beyond the doctoral dental degree, the Bachelor of Science in dental hygiene degree, or other terminal degree in an appropriate field. An important consideration is the balance between the teaching, scholarly activity, and leadership and service activities. Minimal activity in any of the three areas must be balanced by increased quality and quantity of activities in the other areas. The person under consideration must show evidence of considerable potential to the University.
2. Criteria for Assistant Professor
  - a. An appropriate terminal degree as defined in the Glossary of Terms.
  - b. Successful completion of advanced education/training beyond the terminal degree, receiving an MS, MPH, MSD, PhD, or ScD, certificate, or equivalent, or successful completion of an acceptable postgraduate training program not leading to a degree.
  - c. Documented evidence of interest and abilities in research and scholarly activity as demonstrated by research activities and/or publications, abstracts, etc. The quality of the scholarly activities will be considered as described in Appendix E and in the Promotion Criteria Matrix (Appendix D).
  - d. Evidence of leadership and service. For promotion only, as post-doctoral fellows do not normally have leadership and service activities to evaluate for initial appointment.
  - e. For promotion, three letters of recommendation from experts in the faculty member's field, solicited by the appropriate department chair/nominator after consultation with the applicant.

##### **B. Associate Professor**

1. General Statement- Normally, evaluation for promotion to associate professor and the award of tenure will be considered at the same time. Promotion to associate professor and the awarding of tenure mark a significant point in the development of a person as an academician. Consequently, the individual's activities and contributions in the three categories of teaching, scholarly/creative work, and leadership and service will be considered.

## 2. Criteria for Associate Professor

- a. Qualification for assistant professor.
- b. Typically, five or more total years full-time experience at the level of assistant professor in appropriate higher educational settings or its equivalent, and education/training beyond the terminal degree.
- c. For promotion, each faculty member below the rank of Associate Professor must have completed a comprehensive (Interim) review in accordance with the University's "Standards, Processes, and Procedures for Reappointment, Tenure, Promotion, and Post-Tenure Review" document at least once during the tenure probationary period apart from the review for award of tenure. Such evaluation shall include internal letters and may include extramural letters of evaluation.
- d. Documented evidence of meritorious teaching, scholarly/creative work, and leadership and service activities. Excellence must be documented in either teaching or scholarly/creative work.
- e. To receive an excellent rating in teaching, a candidate must have demonstrated achievement at the campus, local, national, and/or international level, which furthers the practice and/or scholarship of teaching and learning beyond one's immediate instructional setting.
- f. Faculty must show accomplishment (at least to the level of meritorious achievement) in scholarly/creative work as demonstrated by completed research and/or publications. The quality and quantity of the scholarly activities, as well as the extent of involvement and the initiative of the individual, are considered. Guidelines for publication are in Appendix E.
- g. For promotion, six letters of evaluation. Three of the evaluators should be from faculty within the University of Colorado and three must be from outside the University of Colorado. The external reviewers should be nationally recognized professionals who are experts in the applicant's field and be tenured associate professors or professors. The list of evaluators should be solicited by the appropriate department chair/nominator after consultation with the applicant. See Campus Administrative Policy 1049 for additional information on external letters. External reviewers must be asked to provide a biographical sketch or short vita to be included in the dossier.

## 3. Tenure Clock Extension

An extension to the seven-year probationary period to become an Associate Professor may be requested by a tenure-track faculty member and may be granted in accordance with current policies, which stipulate

that: a) any Assistant Professor in the 5<sup>th</sup> or 6<sup>th</sup> year may submit a letter to the Dean requesting an extension (see Appendix A); b) prior to submission of the request, an ad hoc Promotion/Tenure Advisory Committee must review the faculty member's readiness for promotion; and c) the chair of the department must concur with the request for extension. Extensions of the probationary period may be granted in one-year increments and must be approved by the Dean and Chancellor (or Chancellor's designee).

The request for an extension will be considered in extenuating circumstances, so long as the letter is submitted prior to the start of the review for promotion or tenure by the School of Dental Medicine's Promotion, Tenure, and Post-Tenure Review Subcommittee.

Valid reasons for an extension might include interruption of one's career because of illness or family obligations, a significant change in career focus, assumption of major administrative, teaching or research responsibilities, or other extenuating circumstances as deemed valid by the Promotion/Tenure Advisory Committee.

If an extension is denied by the department chair, the faculty member may appeal to the Dean. An individual granted an extension to the probationary period shall not be subject to additional scholarship, leadership and service or teaching requirements above or beyond those normally required for promotion or tenure.

### **C. Professor**

1. General Statement- Faculty at this rank typically have a minimum of five years at the rank of associate professor, demonstrate outstanding accomplishments in teaching, scholarly activity/creative work, and leadership and service, and have the terminal degree appropriate for their field or its equivalent. At this stage of development, the faculty member should have a strong record of academic leadership in the school as demonstrated by outstanding teaching, accomplishment in research and/or other scholarly activities, contributions to the development of junior faculty, and recognition as a scholar. Per APS 1022 Section V.G when a faculty member is evaluated for full professor, the most current primary unit criteria shall apply.
2. Criteria for Professor
  - a. Qualification for associate professor.
  - b. National/international recognition as demonstrated by major publications, invitations to present at national/international meetings, leadership in select national/international professional organizations, and/or significant consultantships.
  - c. Demonstrated excellence in teaching.

- d. Demonstrated excellence in scholarly activity/creative work. Promotion criteria are included in Appendix D.
  - e. Demonstrated excellence in leadership and service to the University and the community.
  - f. A record that, taken as a whole, is judged to be excellent.
  - g. A record of significant contribution to graduate and/or undergraduate education,
  - h. A record since receiving tenure or promotion to Associate Professor that indicates substantial, significant, and continued growth, development, and accomplishment in teaching, scholarly/creative work, and leadership and service.
  - i. For promotion, six letters of evaluation. Three of the evaluators should be from faculty within the University of Colorado and three must be from outside the University of Colorado. The external reviewers should be by nationally recognized professionals who are experts in the applicant's field and be tenured professors. The list of evaluators should be solicited by the appropriate department chair/nominator after consultation with the applicant. External reviewers must be asked to provide a biographical sketch or short vita to be included in the dossier.
-

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## **INTERIM EVALUATION PROCEDURES AND GUIDELINES FOR TENURE-TRACK FACULTY**

### **1. INTRODUCTION**

Interim evaluations (Comprehensive Reviews) are intended to facilitate faculty development consistent with the academic needs and goals of the School of Dental Medicine and in compliance with the University of Colorado rules and regulations.

These procedures apply to all tenure track faculty in their probationary period.

The Interim Review for reappointment is conducted in the fourth year of their appointment. If the interim review is unsatisfactory, the fifth year is the terminal year.

There will be one of two possible outcomes from the review: 1) the faculty member is reappointed to a tenure-track position, or 2) the faculty member is informed that they will be given a one-year terminal appointment and the tenure-track appointment will not be continued.

### **2. GENERAL GUIDELINES**

- a. Each tenure-track faculty member shall be evaluated in a comprehensive manner at least once during the tenure probationary period apart from the review for promotion and/or award of tenure. The tenure probationary period shall begin when the faculty member is first appointed to the rank of Assistant Professor or a higher rank. The evaluation shall include external evaluation of the candidate if determined necessary by the committee. Each faculty member shall be informed orally and in writing of the results of the evaluation.
- b. Interim evaluations shall generally occur in the fourth year of a faculty member's full-time appointment to the rank of Assistant Professor. If a faculty member receives credit for experience at another institution toward the probationary period, the interim review would normally be conducted earlier than the fourth year. During the first year of a faculty member's appointment, the department chairperson (or the Dean, if the faculty member is a department chairperson) and faculty member shall jointly determine during which year the interim evaluation will be conducted, and state the agreed-upon year in writing (see Appendix F). The written agreement shall be maintained in the departmental files (or the Dean's office, if the faculty member is a department chairperson) and a copy forwarded to the CUSDM Office of Faculty Affairs.
- c. Department chairpersons (or the Dean, if the faculty member is a department chairperson) shall advise each faculty member regarding the criteria and standards that

the School of Dental Medicine uses in reaching a decision about the candidate's performance, and will provide the criteria and standards in writing to each faculty member well in advance of the interim evaluation period. In addition, department chairpersons (or the Dean, if the faculty member is a department chairperson) will advise individual faculty members at least once each year as to how they are progressing toward fulfilling the criteria for promotion and/or tenure.

- d. The criteria for evaluating the performance of faculty shall include those that are used in the School of Dental Medicine for promotion and tenure of full-time faculty. The faculty member's accomplishments in teaching, scholarly/creative work, and leadership and service shall be the main focus of the evaluation. The general guideline in determining acceptable performance is whether the faculty member's growth and accomplishments in these three areas are progressing at a level consistent with university expectations, showing that the faculty member is on a trajectory for tenure at the University of Colorado School of Dental Medicine.
- e. External evidence of a faculty member's performance should be incorporated in the evaluation. This evidence should include, but is not limited to, national awards, honors, offices in national or international academic professional organizations, editorial functions for scholarly journals, publications in refereed journals and papers presented at regional, national, or international meetings and obtaining of internal/extramural research grant support.

### **3. PROCEDURES**

- a. The chairperson of each department (or the Dean, if the faculty member is a department chairperson) is responsible for annual evaluations of the faculty member. These evaluations should provide faculty with feedback in performance and progress in meeting standards for promotion and/or tenure.
- b. Faculty members and their department chairpersons (or the Dean, if the faculty member is a department chairperson) will be notified by the CUSDM Office of Faculty Affairs in the summer of the academic year in which the formal interim evaluation is to be conducted.
- c. The department chairperson (or the Dean, if the faculty member is a department chairperson) shall counsel the faculty member concerning updating their vitae (see Appendix G) and identifying supporting documentation to be submitted for the interim evaluation. This includes identification of peers to evaluate the candidate's performance.
- d. The faculty member, in consultation with the department chairperson (or the Dean, if the faculty member is a department chairperson), shall compile all documents to be submitted for the interim evaluation and forward them to the chairperson of the Promotion, Tenure and Post-Tenure Review Subcommittee.



*An electronic version should be submitted through Interfolio to the SDM Office of Faculty Affairs no later than October 15th. The documentation must include at least the following:*

1. Current curriculum vitae as outlined in Appendix G.
2. Letter of evaluation from department and division chairperson, when applicable
3. At least three internal evaluation letters that focus on the candidate's accomplishments in teaching, scholarly/creative work, and leadership and service.
4. A list of three authorities in the faculty member's field outside the Anschutz Medical Campus. Care must be taken to exclude any evaluators whose evaluations may constitute a conflict of interest, such as a dissertation director.
5. Student teaching evaluations or summary of student teaching evaluations prepared by the department chair or division chairperson.
6. Completed Peer Evaluation of teaching. See CUSDM Peer Evaluation Policy.
7. At least one additional means of evaluation of teaching. Examples include, but are not limited to instructional materials, curriculum development efforts, professional development and innovations related to teaching, teaching awards, grants for teaching and education improvements, documented efforts to create inclusive and equitable educational experiences for students, scholarly research and presentation or publication on teaching and learning. See APS 1009 for additional examples.
8. A single pdf file containing all publications since appointment at CUSDM. Include a cover sheet listing all career publications.
9. A single pdf file containing all Notice of Grant Awards (NOAs) or similar documentation, if applicable. Full grant applications are not required, only NOAs.
10. Summary of national, international invited presentations.
11. Other materials deemed appropriate for the committee to evaluate progress toward satisfying all promotion and/or tenure criteria. This could include summary statements for unfunded grants, list of other non-governmental unfunded grants manuscripts under review, planned clinical trials or clinical trials in progress, in progress scholarship of teaching and learning (submitted COMIRB applications, IRB applications), etc., and leadership/service activities.

- e. The Promotion, Tenure and Post-Tenure Review Subcommittee conducts a comprehensive evaluation of the faculty member's performance and accomplishments and progress toward promotion and/or tenure or may recommend termination at the end of the year following the review (5<sup>th</sup> year) (Campus Administrative Policy 1049).
  - f. The Promotion, Tenure and Post-Tenure Review Subcommittee will vote on the three areas of review, teaching, scholarly/creative work, and leadership/service as 1) on track for tenure; 2) not on track for tenure, but could meet standards for tenure with appropriate corrections; or 3) not on track for tenure. An overall vote will be taken with one of two outcomes: 1) a recommendation for reappointment to tenure-track position, or 2) a recommendation for one-year terminal appointment (the tenure-track appointment will not be continued).
  - g. The written summary and the candidate's dossier are forwarded to the chairperson and members of the Dean's Review Committee through Interfolio.
  - h. The Dean's Review Committee evaluates the Promotion, Tenure and Post-Tenure Review Subcommittee summary with full access to the faculty member's interim review dossier and then prepares a written letter. The Dean's Review Committee will vote on the three areas of review, teaching, scholarly/creative work, and leadership/service as 1) on track for tenure; 2) not on track for tenure, but could meet standards for tenure with appropriate corrections; or 3) not on track for tenure. An overall vote will be taken with one of two outcomes: 1) a recommendation for reappointment to tenure-track position, or 2) a recommendation for one-year terminal appointment (the tenure-track appointment will not be continued). If required, through a vote of not on track for tenure, but could meet standards for tenure with appropriate corrections, the Dean's Review Committee makes recommendations for the development of a plan to assist the faculty member in meeting the relevant criteria for promotion and/or tenure.
  - i. The Dean's Review Committee sends its letter to the CUSDM Office of Faculty Affairs who forwards both letters to the faculty member, the department chairperson, and the Dean.
  - j. The department chairperson (or the Dean, if the faculty member is a department chairperson) and the faculty member meet to discuss the results of the evaluation.
  - k. If requested, the faculty member and department chairperson (or the Dean, if the faculty member is a department chairperson) can meet with the chairpersons of the Promotion, Tenure and Post-Tenure Review Subcommittee and the Dean's Review Committee to discuss the evaluation letters and to seek clarification.
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## **PROMOTION AND TENURE REVIEW PROCESS**

### **1. INTRODUCTION**

In accordance with the University's Administrative Policy Statement 1022: Standards, Processes and Procedures for Reappointment, Tenure, Promotion, and Post-Tenure Review and Campus Administrative Policy 1049: Reappointment, Tenure and Promotion Review, each tenure track faculty member will be reviewed for promotion, to Associate Professor, and tenure by their seventh year, unless granted an extension of up to three years. Usually, the promotion to Associate Professor and granting of tenure happen at the same time.

Comprehensive (Interim) Reviews should be conducted in the fourth (4<sup>th</sup>) year as outlined in the section above. If the comprehensive review is unsatisfactory, the fifth year is the terminal year.

Only tenured faculty may vote on granting of tenure. Only tenured full Professors may vote on promotion to full Professor (tenured).

The School of Dental Medicine's Primary Unit Evaluation Committee (PUEC) is defined as the Promotion, Tenure, and Post-Tenure Review Committee. Members of this committee are voted on through the Faculty Senate Constitution protocols.

There are multiple levels of review to include the Promotion, Tenure, and Post-Tenure Review Committee (PUEC), Dean's Review Committee, Dean, Vice Chancellor's Advisory Committee, Executive Vice Chancellor, Chancellor, and Board of Regents.

If tenure is approved, it is effective at the beginning of the eighth year. For candidates denied tenure, the eighth year is the terminal year. After the granting of tenure, a faculty member may submit their dossier for promotion to Professor. This typically occurs after at least five (5) years of full-time service at the rank of Associate Professor, but a faculty member may apply for promotion earlier if they believe they meet the criteria.

### **2. PROCEDURES:**

- a. Prior to the submission of a dossier to the Promotion, Tenure, and Post-Tenure Review Committee, it is the Department Chair's responsibility to assist the candidate in assembling their dossier and requesting external letters of evaluation. External letters should be sent directly to the Chair of the Promotion, Tenure, and Post-Tenure Review Committee or the Office of Faculty Affairs.
- b. The candidate for tenure or promotion is responsible for preparing and submitting a clear, accurate, and detailed presentation of their record. Department Chairs shall advise the candidate on compiling the dossier.

- c. A Tenure Track faculty member should submit a dossier by the beginning of their 7<sup>th</sup> year of employment on tenure track. The candidate and department chair should be aware of the timeline for submission.
- d. Candidates submitting their dossiers for promotion and/or granting of tenure, should submit their materials, through Interfolio, to the Office of Faculty Affairs no later than October 15<sup>th</sup>.
- e. Dossiers should be compiled as outlined in Appendix C of this document.
- f. A dossier will not be reviewed if it does not contain all required documents from the candidate; incomplete dossiers will be returned. A complete dossier must be submitted by the established deadline to ensure further consideration.
- g. Candidates seeking promotion to Associate Professor or Professor should refer to the Guidelines for the Evaluation of Publications, Appendix E (tenure-track/tenured).
- h. Curriculum Vitae should be formatted as outlined in Appendix G of this document.
- i. Reviewers at all levels will review and judge the record of accomplishments in teaching, scholarly/creative work, and leadership/service only as presented in the dossier.
- j. Candidates may add materials to the dossier after the review process has begun to confirm a recent addition to the candidate's record: confirmation of an article accepted, a grant awarded, an academic honor or recognition, leadership position bestowed, etc.
- k. For promotion and tenure, the committees will evaluate the candidate's teaching, scholarly/creative work, and leadership/service. Each committee member will rate the candidate as either excellent, meritorious, or not meritorious in each of the evaluative areas. The committee will then issue a positive or negative recommendation for promotion and/or tenure. Separate votes must be taken for each category, for promotion, and for granting of tenure.
- l. Discussion at all levels of the personnel process is confidential. Individual reviewers may not have any communication with the candidate or with anyone else about the review process, the details of deliberations, or the outcomes of meetings or votes.
- m. Members of the committees should recuse themselves from the deliberations when they believe that there is or may be a real or perceived conflict of interest with the candidate.
- n. A candidate for promotion or tenure may request that a colleague be recused from the review process only if a conflict of interest has been documented previously via an official complaint made to the appropriate administrative office. See Campus Administrative Policy 1049 for additional information on processes.

- o. In instances regarding granting of tenure, dossiers must be submitted to the Vice Chancellor's Advisory Committee by March 1<sup>st</sup> and include the primary unit criteria and the campus vote tally document.
  - p. Committee letters should include a description and evaluation of the candidate's teaching, scholarly/creative work, and leadership/service accomplishments; salient points of external reviewer's analyses, with care taken to maintain confidentiality; and a statement describing the procedures followed, perceived strengths and weaknesses of the candidate, and the committee vote.
  - q. In an instant where these committees or the dean disagree about promotion and/or granting of tenure, dossiers and summary letters must be sent to the Vice Chancellor's Advisory Committee by March 1<sup>st</sup> unless the candidate withdraws their name from consideration. See Administrative Policy Statement (APS) 1022 for further information regarding disagreements between School committees.
  - r. For Appeal and Grievance Rights, faculty should refer to APS 1022.
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## **POST-TENURE REVIEW PROCEDURES and GUIDELINES**

Tenure is granted with the expectation of continued professional growth and ongoing productivity in teaching, scholarly/creative work, and leadership and service. Thus, every tenured faculty member has a duty to maintain professional competence. As required by APS 1022, after the award of tenure, a faculty member must be evaluated in a comprehensive manner every five years. Post-tenure Review (PTR) is a summative evaluation of a tenured faculty member's performance record over a five-year period.

Additional information regarding Post-Tenure Review and Performance Improvement Agreements can be found in Campus Policy 1050 and APS 5008, respectively.

### **1. General Guidelines**

- a. The intent of post-tenure peer review is to facilitate continued faculty development, and to ensure professional accountability by a regular, comprehensive evaluation of the performance of every tenured faculty member, undertaken every five years.
- b. Post-tenure review will be conducted by the Promotion, Tenure and Post-Tenure Review Committee in the Fall of each year. The evaluation materials will be submitted through Interfolio, to the CUSDM Office of Faculty Affairs no later than July 15th.
- c. Faculty members who fail to participate in any aspect of post-tenure review, as required, may be subject to sanctions for neglect of duty, which may include reduction in salary, reassignment of duties, unpaid suspension, or dismissal for cause.
- d. Faculty will normally be reviewed for the first time in the fifth year following the granting of tenure and at five-year intervals thereafter unless interrupted by promotion review. Promotion restarts the Post-Tenure Review clock. A faculty member whose annual review is below expectations may be subject to a Performance Improvement Plan prior to the fifth year.
- e. The criteria for evaluating the post-tenure performance of faculty shall include those that are used in the School of Dental Medicine for tenure evaluation of full-time faculty members. The faculty member's continued accomplishments in teaching, scholarly/creative work and leadership and service following the granting of tenure/promotion shall be the main focus of the review. The general guideline in determining acceptable performance is whether the faculty member's growth and accomplishments in these areas meet University of Colorado and School of Dental Medicine criteria and receive annual performance evaluations of at least "meeting expectations." The balance in accomplishments in these areas should also be evaluated in light of the goals of the School and department and any official changes

in job assignment, e.g., major increases or decreases in administrative, teaching, or research duties.

- f. Performance will be rated on the following scale: outstanding, exceeding expectations, meeting expectations, below expectations, or fails to meet expectations in each of the three areas of teaching, scholarly/creative work, leadership/service.
- g. External evidence of a faculty member's performance should be incorporated in the review. This evidence should include, but not be limited to national awards, honors, offices held in national or international academic professional organizations, editorial functions for scholarly journals, publications in refereed journals and papers at regional, national, or international meetings and obtaining extramural grant support. At the request of the Promotion, Tenure and Post-Tenure Review Committee, the review may also include evaluations from persons external to the University who have been selected from lists provided by the faculty member and the peer-review group.
- h. If a faculty member receives a PTR summary rating of "below expectations" or "fails to meet expectations," in any of the evaluated areas of teaching, scholarly/creative work, and leadership and service, the faculty member must undertake a Performance Improvement Agreement (PIA). If the goals of the PIA are not met, an extensive review will be conducted, and a development plan will be written. (See University of Colorado APS 5008 for information and procedures relating to PIAs and extensive review)
- i. **Post-Tenure Regular Review**

Faculty undergoing Regular Review will submit the following:

- 1. Current curriculum vitae
- 2. Letter(s) of evaluation from department chairperson and division chair, when applicable
- 3. At least three internal letters of evaluation
- 4. The five previous Annual Performance Rating forms
- 5. Differentiated Annual Workload and Professional Plans from each of the past five years
- 6. Updated Professional Plan for the next five years
- 7. A list of three authorities (name, title, affiliation and email address) in the faculty member's field, chosen by the department chair with input from the candidate, from outside the Anschutz Medical Campus to be used by the committee in the event it determines that external input is required.

8. Teaching/course evaluations from the previous five years or summary of student teaching evaluations that is prepared by the department or division chairperson
9. A single pdf file that contains a list of all publications since the previous review period along with full pdf reprints of up to five papers that the faculty member feels best reflects their performance.
10. A single pdf that contains a list of grant awards since the previous review period along with copies of the Notice of Grant Award (NOA) or similar notices.
11. List of Leadership and Service activities since the last review.
12. Other materials deemed appropriate.

## **2. Procedures**

- a. The chairperson of each department is responsible for annual evaluations of tenured faculty members. These evaluations should provide faculty with feedback on performance and progress in meeting post-tenure review standards.
- b. Faculty scheduled for a formal post-tenure review in a given year, their department chairperson, and the Chair of the Promotion, Tenure and Post-Tenure Review Committee will be notified by the CUSDM Office of Faculty Affairs of the review and the level of review to be conducted by June 1 of each year.
- c. The department chairperson shall counsel the faculty member concerning updating their vita and identifying supporting documentation to be submitted for the review. This includes identification of peers to evaluate the candidate's performance.
- d. The department chairperson shall counsel the faculty member on compiling all documents to be submitted for review. The faculty member will forward them to the chairperson of the Promotion, Tenure and Post-Tenure Review Subcommittee through Interfolio by July 15.
- e. The Promotion, Tenure and Post-Tenure Review Subcommittee appointed by the Faculty Senate, is responsible for the following:
  1. Review all materials submitted on behalf of faculty members being reviewed and identify additional materials needed to complete the review.
  2. Notify appropriate department chairperson of additional materials required to complete the evaluation and when such materials must be submitted.
  3. Select external experts to supply letters of evaluation on the faculty member, if it is determined that outside evaluations are necessary. The names selected are to be taken from the list provided by the faculty member/department chair or other



qualified individuals identified by the committee. If letters are solicited, the committee chairperson shall consult with the faculty member to ascertain if they have any valid objections to the individuals chosen.

4. Conduct a comprehensive evaluation of faculty member's continued performance and accomplishments following the granting of tenure.
  5. Prepare a written summary of the evaluation of each faculty member and, if required, recommendation for the Department Chair and the individual to develop a Performance Improvement Agreement.
  6. Forward all written summaries and evaluative reports to the Dean for review and distribution to the faculty member and appropriate department chairperson. A copy of the review summary (or evaluative report) will be placed in the faculty member's personnel file.
- f. The Dean may discuss the written summary prepared by the Promotion, Tenure and Post-Tenure Review Subcommittee with the faculty member and appropriate department chairperson.
- g. The Dean shall forward a report to the Executive Vice Chancellor for Academic and Student Affairs by October 1 of each year summarizing the outcomes of all post-tenure reviews and faculty development plans during the past year.
- h. For Extensive Reviews, see APS 5008 Section II.I Extensive Reviews.

### **3. Appeal Process**

Normal University procedures will be made available to any faculty member who feels aggrieved by the post-tenure review process. Within the School of Dental Medicine, these procedures include, but are not limited to:

- a. the faculty member's right to submit any additional materials to the Promotion, Tenure and Post-Tenure Review Subcommittee that the faculty member feels are relevant
- b. the right to appear before the committee
- c. the right to disagree with the conclusions of the committee
- d. the right to submit a grievance concerning the review process or outcome to the School of Dental Medicine Faculty Grievance Committee.

Requests to appear before the committee and disagreements with the outcome of the process, together with reasons for disagreement, shall be submitted to the Dean in writing. The Dean will be the final administrative arbitrator of the disagreement; however, a faculty member may have the right to file a grievance with the University Faculty Senate Privilege and Tenure Committee (see Regent Policy 5.G.1).

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## **REQUIREMENTS FOR PROFESSOR EMERITUS IN THE SCHOOL OF DENTAL MEDICINE, UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS**

### **1. INTRODUCTION**

The title “emeritus” should be bestowed only on those retired faculty members whose contributions warrant it. The award should not be automatic but rather bestowed only on the basis of merit to preserve the significance of the title.

Any faculty member may be allowed, upon retirement and in accordance with the campus-defined process and approval by the chancellor, to retain their title with the description "emeritus/emerita."

### **2. CRITERIA FOR APPOINTMENT OF EMERITUS, CUSDM**

The faculty member must be retired from a full-time, faculty position at the University of Colorado School of Dental Medicine and have had a distinguished career.

#### **PROCEDURE:**

1. A faculty member’s department chair may nominate a retired or retiring faculty member for the designation, “emeritus” (see Campus Administrative Policy 1011)
2. Supporting documentation required is a current curriculum vitae, a one-page summary of the faculty member’s accomplishments during their time at the University (to include promotion times, teaching honors and awards, etc.) a post-tenure review report completed within the past five years for tenured faculty, and the last three years of merit evaluations.
3. The nomination will be considered sequentially by the Promotion, Tenure, and Post-Tenure Review Subcommittee, and, by the Dean’s Review Committee, who will make their recommendation to the Dean. If the Dean concurs with the awarding of the emeritus status, the Dean will submit the recommendation to the Executive Vice Chancellor of Academic and Student Affairs for consideration for a recommendation of approval before forwarding to the Chancellor for consideration.

The effective date may be no earlier than the day following the faculty member’s retirement date.

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## JOINT APPOINTMENTS AT THE SCHOOL OF DENTAL MEDICINE, UNIVERSITY OF COLORADO

When joint or split appointments are made, the affected faculty member must be informed in writing, prior to the appointment, of:

1. The duties and expectations as agreed upon by all Schools/Departments involved.
1. Which School/Department will be responsible for such personnel recommendations as tenure, reappointment, promotion and salary.

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## FACULTY TITLES PER THE REGENTS OF THE UNIVERSITY OF COLORADO

For a list of current faculty titles, please refer to [APS 5060 Appendix A](#)

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## RELATED POLICIES, PROCEDURES, GUIDELINES, AND OTHER RESOURCES

1. APS 1022: Standards, Processes, and Procedures for Reappointment, Tenure, Promotion, and Post-Tenure Review, July 1, 2020
  - a. <https://www.cu.edu/ope/aps/1022>
2. Board of Regents Policy 5.C and 5.D
  - a. <https://www.cu.edu/regents/policy/5>
3. APS 5060: Faculty Appointments
  - a. <https://www.cu.edu/ope/aps/5060>
4. [Campus Policy 1050](#)
5. [APS 5008](#)
6. University of Colorado School of Dental Medicine Faculty Governance Document

## APPENDIX A

### UNIVERSITY OF COLORADO SCHOOL OF DENTAL MEDICINE

#### REQUEST FOR EXTENSION OF SEVEN-YEAR PROBATIONARY PERIOD FOR PROMOTION AND TENURE FROM ASSISTANT PROFESSOR TO ASSOCIATE PROFESSOR

Under the current policies, a one-year extension to the seven-year probationary period for promotion from Assistant Professor to Associate Professor may be granted, as long as the following criteria are met: (1) The standing Departmental Advisory Committee has reviewed the faculty member's readiness for promotion; (2) the chair of the department concurs with the request for extension; and (3) the request for extension is received prior to the start of the review for promotion or tenure by the School of Dental Medicine Faculty Promotion, Tenure, and Post-Tenure Review Subcommittee. The request is subject to final approval by the dean and chancellor or chancellor's designee. \*

*Please provide the following information regarding the faculty member requesting the promotion/granting of tenure extension:*

Name:

Department:

Date of Initial Appointment as Assistant Professor:

Has the standing Departmental Advisory Committee reviewed this faculty member's readiness for promotion?    Yes    No

Date of Mid-Course Review:

Reason for Extension:

I concur with this request for extension.

\_\_\_\_\_  
Department Chair Signature

\_\_\_\_\_  
Dean

\_\_\_\_\_  
EVC for Academic and Student Affairs

**THIS SECTION FOR FACULTY AFFAIRS USE**

New Probationary Period Deadline: \_\_\_\_\_

*\*If an extension is requested and approved, the faculty member's dossier can still be submitted before the end of the new probationary period.*

**APPENDIX B**  
**PROCEDURAL GUIDELINES FOR FACULTY REAPPOINTMENT, PROMOTION,**  
**TENURE, and POST-TENURE REVIEW PROCESS**

The following are guidelines that provide additional clarity to the reappointment, promotion, tenure, and post-tenure review process and should be followed whenever possible.

1. Promotion, Tenure, and Post-Tenure Review Subcommittee

- a. Only full-time, tenured associate/full professors or associate/full professors (C/T) should comprise committee membership.
- b. Selection of committee members will be by department chairs (1 person per department, although not necessary to be department member) with ratifying vote and continued oversight by officers of the Faculty Senate.
- c. Chair of the committee will be elected by the Promotion, Tenure, and Post-Tenure Review Subcommittee.
- d. The Promotion, Tenure and Post-Tenure Review Subcommittee will be the first level of review for all appointments, interim reviews, promotions, granting of tenure, and post-tenure reviews.
- e. Only members of the committee holding tenure may vote on decisions relating to granting of tenure.
- f. Only tenured full professors may vote on decisions related to promotion of tenured faculty to full professor.
- g. Committee members who are scheduled for promotion and/or post-tenure review, shall not be present during the review of their own dossier or the vote.

2. Dean's Review Committee

- a. Chair of the committee and members will be appointed at the discretion of the Dean.
- b. Faculty from outside the School of Dental Medicine may be appointed to the committee at the discretion of the Dean.
- c. Only full-time, tenured associate/full professors or associate/full professors clinical track should comprise committee membership.
- d. Only members of the committee holding tenure may vote on decisions relating to granting of tenure.
- e. Only tenured full professors may vote on decisions related to promotion of tenured or tenure-track faculty to full professor.
- f. The Dean's Review Committee will serve as the second level of review within the CUSDM for all appointments, interim reviews, promotions, and granting of tenure. The Dean's Review Committee does not evaluate faculty scheduled for post-tenure review.

### 3. Interim Reviews

- a. Each full-time faculty member below the rank of associate professor tenure track shall be evaluated in a comprehensive manner in accordance with the University's "Standards, Processes, and Procedures for Reappointment, Tenure, Promotion, and Post-Tenure Review" document at the end of year four by the Promotion, Tenure and Post-Tenure Review Committee and Dean's Review Committee. Findings will be communicated in writing to the candidate, the candidate's chair, Human Resources, and the Dean.
- b. The department chair should meet with the candidate to discuss the summary of findings and help plan appropriate strategies for improvement if necessary. Chairs of the Promotion, Tenure and Post-Tenure Review Committee and DRC should be available for clarification and suggestion if necessary.
- c. The candidate's dossier should be submitted through Interfolio to the Office of Faculty Affairs by October 15<sup>th</sup>.
- d. The dossier should be compiled as outlined in the Faculty Interim Evaluation Procedures and Guidelines.
- e. Information on the Differentiated Annual Workload and Professional Plan and annual performance ratings will be available to the chairs of each committee if necessary.

### 4. Promotion and Tenure Guidelines

- a. Tenure Track faculty should submit their dossier by the beginning of their 7<sup>th</sup> year of employment on tenure track, unless granted an extension of one-three years. The candidate and department chair should be aware of the timeline for submission.
- b. Departmental reviews should occur prior to submission to the CUSDM Office of Faculty Affairs.
- c. Candidates submitting their dossiers for promotion and/or granting of tenure, should submit their materials to the CUSDM Office of Faculty Affairs no later than October 15<sup>th</sup>.
- d. Candidates seeking promotion to Associate Professor or Professor should refer to the Promotion Criteria Matrix (Appendix D) and the Guidelines for the Evaluation of Scholarly Activities, Appendix E).
- e. Curriculum Vita should be formatted as outlined in Appendix G of this document.
- f. Dossiers should be compiled as outlined in Appendix C of this document.
- g. An electronic copy of the candidate's dossier should be submitted, through Interfolio, to the CUSDM Office of Faculty Affairs by October 15<sup>th</sup>.

## 5. Committee Protocols

- a. Pre-printed ballots, or electronic ballots when necessary, will be utilized when voting on tenure and promotion.
- b. All committee members should be present to register a vote and every effort should be made to have all committee members present when voting.
- c. Votes will be confidential and counted by the chair of the committee and one additional member, determined by vote of the committee.
- d. Letters of nomination/recommendation may be provided by members of committees for promotion and tenure candidates, but if received from the chair of either review committee an alternate chair should be appointed for evaluation of that candidate.
- e. If a committee member is being evaluated for promotion, the member should be excused from committee deliberations and votes on their promotion.
- f. For interim review of a tenure track faculty, the committees will provide an overall evaluation of the faculty member's performance in the three areas as either 1) on track for tenure, 2) not on track for tenure, but could meet standards for tenure with appropriate corrections, or 3) not on track for tenure. An overall vote will be taken with one of two outcomes: 1) a recommendation for reappointment to tenure-track position or 2) a recommendation to give a one-year terminal appointment.
- g. For promotion and tenure, the committees will provide an overall evaluation of the faculty member's performance as either excellent, meritorious, or not meritorious and separate category voting totals will be recorded (e.g., four (4) voted meritorious for teaching and three (3) non-meritorious, etc.) and communicated to the Dean for each candidate. A separate vote will be taken for promotion and a separate vote for granting of tenure.
- h. For post-tenure review, the committee will
  - i. Vote on the faculty member's performance as outstanding, exceeding expectations, meeting expectations, below expectations, or failing to meet expectations in each of the three categories of teaching, scholarly/work, and leadership and service,
  - ii. Vote on the overall performance of the faculty members as outstanding, exceeding expectations, meeting expectations, below expectations, or failing to meet expectations
  - iii. The committee must communicate in writing their evaluation of each candidate to the Dean.
- i. For post-tenure review, a copy of the evaluation summary will be given to the faculty member and a copy will be placed in the faculty member's personnel file.

- j. The Promotion, Tenure and Post-Tenure Review Committee should complete its evaluation(s) by the end of December; the Dean's Review Committee should complete its evaluation(s) by February 15<sup>th</sup>.
- k. In instances regarding granting of tenure, dossiers, committee letters, and a recommendation letter from the Dean, must be sent to the Vice Chancellor's Advisory Committee by March 1<sup>st</sup>.
- l. In the event the two committees and/or the Dean disagree about promotion (or granting of tenure), dossiers and summary letters must be sent to the Vice Chancellor's Advisory Committee by March 1<sup>st</sup> unless the candidate withdraws their name from consideration.
- m. Committee members may request a copy of the summary letter written by committee chairs to the candidate/Dean summarizing committee findings.



## **APPENDIX C**

### **ORGANIZATION AND REQUIREMENT OF EVALUATION DOSSIER FOR PROMOTION AND TENURE FOR TENURE TRACK**

Prior to the submission of a dossier to the Promotion, Tenure, and Post-Tenure Review Subcommittee, it is the Department Chair's responsibility to assist the candidate in assembling their dossier and requesting external letters of evaluation. External letters should be sent directly to the Chair of the Promotion, Tenure, and Post-Tenure Review Subcommittee or the Office of Faculty Affairs.

#### **Further instructions can be found in Interfolio.**

1. Curriculum Vitae- complete document in University of Colorado School of Dental Medicine format
2. Letters of Recommendation
  - a. Internal: three letters from individuals located on the Anschutz Medical Campus
  - b. External: three letters from individuals outside of the Anschutz Medical Campus
3. Teaching (Sequence with most recent first)
  - a. Teaching portfolio
    - i. Professional autobiography- concise review of professional and teaching experience (This also includes non-didactic teaching to include post-doc student mentoring.)
    - ii. Statement of teaching philosophy
    - iii. Statement of teaching advancements and accomplishments (teaching awards, classroom innovation)
    - iv. Evidence of student performance in your area (acceptance into residency programs, obtaining a post-doctoral position, evidence of advancement in field of study/research, student awards)
    - v. Teaching materials developed
    - vi. Teaching responsibilities (a short description of each class with contact hours)
  - b. Peer and Office of Education teaching evaluations
  - c. Student teaching evaluations
  - d. Evidence of professional growth in education
    - i. Continuing education in education- attended last 5 years
    - ii. Continuing education in your profession- attended last 5 years
    - iii. Research presentations/publications in education
    - iv. Board certification status for advanced trained dentists
    - v. Obtaining an education degree (i.e. Masters in Education)
4. Scholarly Activity (Sequence with most recent first)
  - a. Summary of scholarly activity
  - b. Publication list followed by a copy of publications.

- c. Grants- list of funded and unfunded grants with copies of Notice of Awards.  
Committees may request copy of entire grant for additional information. Include dates submitted and proposed lifetime of award.
  - d. Scholarly presentations
- 5. Leadership and service (Sequence with most recent first)
  - a. Summary of leadership and service activity
  - b. Committee membership and chairs- includes faculty governance and organized dentistry leadership and service
    - i. National/ International
    - ii. State
    - iii. University
    - iv. Campus
    - v. School of Dental Medicine
    - vi. Departmental
  - c. Patient care activities- university associated only (Dental Faculty Practice, UC Health)
  - d. Consultantships or internal/external advisory board

## APPENDIX D

### UNIVERSITY OF COLORADO SCHOOL OF DENTAL MEDICINE PROMOTION CRITERIA MATRIX (Tenure-Track/Tenured)

**Note:** The following is intended to present examples of various levels of accomplishment in the areas of teaching, scholarly/creative work, and leadership and service. It is not exclusionary, but is intended to assist faculty, department chairs, and promotion committees in matching candidates' accomplishments to the promotion criteria. Moreover, areas frequently overlap in practice, although they are presented as distinct entities here. It should also be noted that the matrix specifies just two categories, meritorious and excellent. Professors will need to achieve excellence in a **significant number** of criteria relevant to their academic profile. Associate professors will have met fewer of these criteria or in not as great depth. The promotion process is meant to describe and reward continued professional growth and achievement. Performance that does not meet the requirements/most of the criteria for meritorious will be deemed not meritorious.

TEACHING	
Meritorious	Excellent
Active participation in teaching activities of the department, school, campus or university, including two or more of the following: presenting a series of lectures covering one or more topics; coordinating a course; acting as a primary instructor in a course; advising or mentoring students, residents, post-doctoral fellows or faculty; attending on an inpatient or outpatient service; organizing or facilitating a seminar series, journal clubs or laboratory exercises; participating in CE courses.	Multiple course directorships or co-directorship and/or participation across the curriculum; development of innovative teaching methods, such as educational websites, simulations, packaged courses or workshops. Invitations to present courses outside of primary department.
Meritorious teaching evaluations from students and peers. Expectation of at least a 4.0 on average to be meritorious.	Consistently receives outstanding teaching evaluations.
Developing/revising assignments or lectures that incorporate diverse scholarly perspectives, concepts, readings, and/or scholarship and/or representing diverse authors, as relevant to the course material.	Designing/revising a course that incorporates diverse scholarly perspectives, concepts, readings, and/or scholarship and/or representing diverse authors, as relevant to the course material.
Participation in advanced faculty development programs and/or CE courses that enhance the faculty members teaching or pedagogy.	Completion of advanced faculty development programs that result in a certificate or degree in education, with evidence that the faculty member has applied these new skills or new knowledge to improve their teaching or pedagogy.
Participation in workshops or training on unconscious bias, diversity and inclusion, or other topics intended to improve classroom culture, teaching or mentorship.	Receipt of honors or awards by students/mentees, including students from underrepresented groups. and/or Developing teaching resources for faculty on diversity and inclusion, and health equity.
Self-improvement activities (for example, participation in workshops or courses that are designed to improve teaching or mentoring effectiveness).	Development of mentoring programs that focus on career development or academic promotion of students, residents, fellows or faculty.

<b>TEACHING</b> Continued	
<b>Meritorious</b>	<b>Excellent</b>
Participation in mentoring programs for students, fellows, residents, or other trainees.	Recognition as an outstanding and influential teacher and/or role model for students, fellows, residents, or other trainees (teaching awards, hooding, mentoring awards).
Self-improvement activities (for example, participation in workshops or courses that are designed to improve teaching and mentoring effectiveness).	Development of mentoring programs that focus on career development or academic promotion of students, residents, fellows, or faculty.
Doctoral Dissertation and Master's committee participation and/or thesis committee member.	Chairing a Doctoral Dissertation or Master's committee and/or thesis committee (not primary advisor).
Develops new or significantly revises educational materials on a consistent basis.	Creates new courses or curriculum that incorporates innovative technologies.
	Evidence of positive impact on teaching in the discipline, such as citations of publications or presentations related to teaching, or authorship of a critically reviewed textbook or other educational materials that have been widely adopted by others.
	Consistent participation in national educational activities (for example, residency review committees, programs sponsored by professional organizations, re-certification courses or workshops).
	Institutional, national, or international teaching awards that recognize contributions to the discipline (e.g., pedagogical innovation, curricular redesign).
	Evidence of continued growth and mastery of subject areas (e.g., attendance at courses to enhance teaching and clinical abilities, conference, teaching laboratories, etc.).
	Record of successful mentorship of students, residents, fellows or other faculty, as measured by: letters of support from mentees; publications, presentations, grants, awards or other evidence of mentees' academic success; evidence that mentees have pursued outstanding careers.
	Development of innovative courses, innovative delivery of course content, problem-based learning cases, laboratory exercises or other instructional materials.
	Published research and/or externally funded research designed to improve pedagogy.

SCHOLARLY/CREATIVE WORK	
Meritorious	Excellent
Abstracts at national meetings (ADEA, AADOCR, IADR, etc.), invited research seminars at this or other institutions. Service as an ad hoc member on study section,	A national or international reputation, as evidenced by: external letters of reference; invitations to present at national or international meetings; invitations to write reviews or chapters, or to provide unique expertise as a collaborator on a research project; visiting professorships; service as a regular member on study sections; organization of national meetings; service as a national consultant or on editorial boards of journals.
Authorship of papers in peer-reviewed journals that demonstrate the ability to generate and test hypotheses.	An on-going, peer-reviewed publication record as outlined in Appendix E.
<p>A principal and sustained role in the management of a research program with external funding, to include NIH, industry funding, or foundation funding.</p> <p>Management of internal grant funding.</p>	<p>Principal investigator status on competitive peer-reviewed research grants (for example: R03 or R21 awards or mentored K08 or K23 awards from NIH or private foundations for associate professors; R01, P0, HRSA awards, or other independent awards for professors).</p> <p>Ongoing record of peer-reviewed grant or contract funding.</p> <p>Secures funding to support educational initiatives related to diversity and inclusion, and health equity.</p>
Publishes articles on health care professional education with emphasis on hypothesis-driven research.	A continuous record of publications in health professional education and/or educational initiatives related to diversity and inclusion and health equity, including citation record.
Participation in the design, conduct, and publication of clinical and epidemiological research, including clinical trials.	Leadership in the design, conduct, and publication of clinical and epidemiological research, including clinical trials.
Written documentation of novel techniques in teaching on the delivery of care.	Development of new techniques, therapies, clinical guidelines, patient care pathways or health care delivery systems that have improved the health of patients or populations.
Development of patent applications for discoveries.	Awarded patents for discoveries.
	Principal Investigator (PI), Co-Investigator (Co-I) or Key Personnel status on grants or contracts.
	Member of review section or editorial board.

SCHOLARLY/CREATIVE WORK Continued	
Meritorious	Excellent
	Contributions to books, journals, or clinical information systems.
	Demonstrated evidence of significant independent intellectual contributions to successful research programs.
	Other evidence of clinical and epidemiological scholarship (for example, research, grants, publications or national presentations) that promote health care quality and patient safety or that advance the science and practice of health care quality improvement; or influence policy, direction or a field of research in diversity and inclusion, and health equity.
	Secures funding, or partners on one or more research projects with community organizations, for research that addresses diversity and inclusion, and health equity.

LEADERSHIP/SERVICE	
Meritorious	Excellent
Active leadership and service on committees or task forces within the program, division, department, school, campus or university.	Appointment to responsible positions within the institution such as chair of a committee; faculty officer; program director; academic clinical coordinator; membership on major decision-making Anschutz Medical Campus committees.
Leadership and service to local, state, national or international organizations through education, consultation or other roles.	Leadership and service as an officer or committee chair in professional or scientific organizations.
Presenting continuing education at the school and local level.	Presenting continuing education lectures and/or clinical presentations at state, national, or international meetings.
Participating in a task force for a professional or scientific association or on a state or regional committee that aims to support or promote diversity and inclusion, and health equity.	Chairing a task force for a professional or scientific association or serving on a national committee related to diversity and inclusion, and health equity.
Participation in community dental health education projects.	Election to responsible positions dealing with health care issues at the local, state, regional, national or international levels.
Mentoring and encouraging the professional growth of junior faculty members.	Chairing a junior faculty mentoring committee or development of a faculty-mentoring program.
Participation in community dental health education projects.	Leading community dental health education projects.
Presentations on dentistry and related topics to the lay public.	Election to responsible positions dealing with health care issues at the local, state, regional, national or international levels.
	Participation on NIH study section, grant reviewer, and external program evaluation.
	Leadership and service awards from an area of the University or from a local, national, or international organization (civic, scientific and/or professional).
	Leadership and service on editorial boards of professional or scientific journals.
	Consultative services to other health professionals, hospitals, institutions of higher education, and governmental agencies.
	Serving as the Director of or on the Executive Board of Dental Faculty Practice

**APPENDIX E**  
**GUIDELINES FOR THE EVALUATION OF SCHOLARLY/CREATIVE WORK**  
**TENURE TRACK/TENURED**

1. For Associate Professor: A consistent record of publication of research is required. The quality of the publications themselves and the position of the authorship will also be considered.
  - A. Number of Publications – A minimum of 5 refereed publications while at the rank of Assistant Professor
    - 1) Publication is a critical component of scholarly activity and should be a continuous process.
    - 2) Ideally displaying some degree of technical focus that allows definition of areas of expertise.
    - 3) Evidence of publishing/averaging at least one refereed paper for each year, demonstrating positive impact in the candidate's field.
    - 4) Quality of publications will take precedence over quantity in promotion and tenure decisions.
  - B. Examples of appropriate publications (refereed or otherwise)
    - 1) original research articles
    - 2) review articles
    - 3) extensive case history/technique articles
    - 4) chapters in professional books
    - 5) professional book author or editorship
  - C. Additional demonstrated evidence of scholarly activities to assist in achieving excellent in scholarly/creative work. See also Appendix D.
    - 1) Published abstracts
    - 2) Presentations at scientific meetings or other universities
    - 3) National reputation as evidenced by NIH Study Section reviewer, refereed journal reviewer
    - 4) Patents
    - 5) Grants
    - 6) Other activities demonstrating scholarship
    - 7) It is recognized that significant research can be conducted without the support of peer-reviewed grant awards (e.g. educational research, public health research)
2. For Professor: Faculty must show a continuous record of refereed publications from the time they are promoted to Associate Professor to the time they submit for promotion to



Professor. The quality of the publications themselves and the position of the authorship will also be considered.

- A. Number of Publications – A minimum of 5 additional refereed publications at the rank of Associate Professor
  - 1) All 5 of these publications must be in recognized refereed journals.
  - 2) Evidence of publishing/averaging at least one paper in a recognized refereed journal for each year since appointment date. Continued and consistent publications that contribute significantly to an area of knowledge.
  - 3) Based on new work accomplished since the last promotion review.
  - 4) Quality of publications will take precedence over quantity of publications in promotion and tenure decisions.
- B. Examples of appropriate publications (refereed or otherwise)
  - 1) Original research articles
  - 2) Review articles
  - 3) Extensive case history/technique articles
  - 4) Chapters in professional books
  - 5) Professional book author or editorship
- C. Additional demonstrated evidence of scholarly activity – more substantial than for Associate Professor – to assist in achieving excellence in scholarly/creative work activities. See also Appendix D.
  - 1) Published abstracts
  - 2) Presentations at scientific meetings or other universities
  - 3) National reputation as evidenced by NIH Study Section reviewer, refereed journal reviewer
  - 4) Patents
  - 5) Grants
  - 6) Other activities demonstrating scholarship
  - 7) It is recognized that significant research can be conducted without the support of peer-reviewed grant awards (e.g. educational research, public health research)
- D. Faculty member must have demonstrated continued excellent productivity for preceding 5 years as Associate Professor

In light of the increasing importance of interdisciplinary team-based research, the value of a faculty's meaningful and well-documented contributions to productive "Team Science" activities will be fully considered. However, it should be recognized that this evaluation will occur in conjunction with that of the more traditional individual faculty member achievements (i.e. publication record, funding as a principal investigator, invitations for national/international presentations, etc.).

## APPENDIX F

### SAMPLE OF AN INTERIM EVALUATION NOTIFICATION FORM

#### UNIVERSITY OF COLORADO SCHOOL OF DENTAL MEDICINE FACULTY INTERIM EVALUATION NOTIFICATION

FACULTY NAME (PRINT): \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

DATE OF INITIAL FULL-TIME APPOINTMENT: \_\_\_\_\_

CREDIT TOWARD PROBATIONARY PERIOD (if applicable): \_\_\_\_\_ Years

Interim evaluations are intended to facilitate faculty development, consistent with the academic needs and goals of the School of Dental Medicine and in compliance with the APS 1022 and Campus Administrative Policy 1049. Interim evaluations occur during the fourth year of a faculty member's full-time appointment. If a faculty member receives credit for experience at another institution toward the probationary period, the interim review would normally be conducted earlier than the third or fourth year. The faculty member and the department chairperson jointly determine which year the interim evaluation will be conducted, and state the agreed-upon year in writing.

**THE INTERIM EVALUATION FOR THE ABOVE-NAMED FACULTY  
MEMBER WILL BE SUBMITTED IN OCTOBER OF \_\_\_\_\_**

#### CONCURRENCE:

\_\_\_\_\_  
Faculty Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Chairperson Signature  
(or Dean, if applicable)

\_\_\_\_\_  
Date

The original notification form is maintained by the departmental office (or Dean's office, if the faculty member is a department chairperson), a copy is maintained by the faculty member, and a copy is forwarded to the Office of Faculty Affairs.

**APPENDIX G**  
**CU SDM CURRICULUM VITAE FORMAT**

**FULL NAME:**

**CURRENT DATE:**

**PERSONAL HISTORY**

**Office Address:**

**Phone:**

**E-mail:**

**Fax:**

**Home Address:** *(Optional)*

**Phone:** *(Optional)*

**EDUCATION:**

*(List highest earned degree first)*

*(Include Institution and Location; Degree; Date(s) Attended; Degree Major)*

*(Include Postdoctoral Training [Residency/Fellowship]; Graduate School; Dental School; College)*

Examples

- |             |  |
|-------------|--|
| 1998 - 2001 | Doctor of Dental Medicine<br>Dental College of Georgia<br>Augusta University<br>Augusta, Georgia   |
| 1998 - 2004 | Ph.D. in Oral Immunology<br>University of Texas San Antonio<br>San Antonio, Texas<br>Dissertation Advisor: Robert E. Jones, Ph.D.<br>Dissertation Title: Salivary proteins and aggressive caries |

**SPECIALTY BOARDS:**

*(List board eligibility if not boarded)*

**LICENSURE:**

**PROFESSIONAL EXPERIENCE:**

*(Reverse chronological order)*

*(Include Institution/Organization, Department/Division, Location, Title(s)/ Position(s), and date(s) each was held)*

*(Optional: Separate into categories such as Academic Appointments, Administrative Appointments; Hospital Appointments; Private Practice Experiences; and Military Leadership and service if dental related)*

**HONORS:**

## **TEACHING, SCHOLARLY/CREATIVE WORK, LEADERSHIP AND SERVICE:**

### **1. TEACHING ACTIVITIES**

#### **Teaching Responsibilities:**

*(Reverse Chronological order)*

*(Include: 1) Courses directed (brief summary of major responsibilities 2) **number of hours actually taught**)*

#### **Course Participation:**

*(Include number of hours the individual actually taught)*

#### **Teaching Materials Developed:**

#### **Teaching Awards:**

#### **Mentoring Activities:**

**Summer Research Students (Dental only)**

**Graduate Students (Ph.D. or Masters)**

**Post-doctoral Fellows**

### **2. SCHOLARLY/CREATIVE WORK**

#### **Current Research:**

#### **Financial Resources/ Grants & Contracts:**

*(Reverse Chronological Order)*

*(Include Project Title, Funding Agency, Date(s) of Project, PI or CO-PI, and Total Direct and Indirect Costs broken out (\$))*

*(Separate by Active Research Support and Completed Research Support)*

*(Separate into categories such as School of Dental Medicine, University*

*Colorado Anschutz Medical Campus, Federal/State, Professional Associations)*

#### **Publications:**

*(Published and In Press)*

*(Reverse chronological order)*

*(Formatting examples attached)*

#### **Periodicals:**

*(Published and In Press)*

*(Reverse chronological order)*

*(Formatting examples attached)*

#### **Book Chapters:**

*(Published and In Press)*

*(Reverse chronological order)*

*(Formatting examples attached)*

#### **Abstracts:**

*(Indicate those that were presented)*

#### **Theses Directed:**

*(Include Date, Title, Type, and Student's Name)*

### 3. LEADERSHIP AND SERVICE ACTIVITIES

#### **Invited and Selected Presentations:**

*(Reverse chronological order)*

*(Include papers and table clinics; do not include presentations that also appear as published abstracts)*

*(Separate into categories such as Local, State, National/International)*

#### **Continuing Education Courses Presented:**

*(Reverse Chronological order except when same course is given in multiple times; then list under first time taught and include other dates given)*

*(Include Date(s), Course Title, Number of Hours, Location)*

#### **Administrative Positions at the School:**

##### **Governance Positions**

##### **Committee Appointments:**

*(Reverse chronological order)*

##### **School of Dental Medicine**

**Date(s)**                      **Committee Name**

**Date(s)**                      **Offices Held**

##### **University**

**Date(s)**                      **Committee Name**

**Date(s)**                      **Offices Held**

##### **State**

**Date(s)**                      **Committee Name**

**Date(s)**                      **Offices Held**

##### **National/International**

**Date(s)**                      **Committee Name**

**Date(s)**                      **Offices Held**

##### **Society/Professional Organizations:**

*(Reverse Chronological Order)*

*(Include Date(s), Society/Organization Name, Offices Held, and Date(s) held)*

##### **Grant Review Panels:**

**(Reverse chronological order)**

**(Include Date(s), Name of study section or panel and leadership position if any)**

##### **Editorial Boards of Journals:**

*(Reverse chronological order)*

*(Include position(s) held, and date(s))*

##### **Journal Peer Review**

*(List only Journal titles; no dates)*

##### **Textbook Peer Review:**

##### **Consultant Positions:**

*(Reverse chronological order)*

## EXAMPLES

### Reference Format

#### A. Journals (list all authors if six or less, otherwise list only first three and add et al.)

##### 1. Standard Reference

Gibson GB, Richardson AS, Patton RE, Waldman R. A clinical evaluation of occlusal composite and amalgam restorations: one- and two- year results. J Am Dent Assoc 1982; 104:335-37.

##### 2. Corporate Author

Federation Dentaire International. Technical Report No. 28. Guidelines for antibiotic prophylaxis of infective endocarditis for dental patients with cardiovascular disease. Int Dent J 1987;37;235.

#### B. Books and Monographs

##### 1. Personal Author(s)

Tullman JJ, Redding SW. Systemic disease in dental treatment. St. Louis: The CV Mosby Co; 1983:1-5.

##### 2. Chapters in a Book

Johns R. Restorative needs and methods. In: Cohen B, Thomson H, eds. Dental care for the elderly. London: William Heinemann Medical Books; 1986: 142-77.

##### 3. Agency Publication

Miller AJ, Brunelle JA, Carlos JP, Brown LJ, Loe H. Oral health of United States adults. Bethesda, Maryland: National Institute of Dental Research, 1987; NIH publication no. 87-2868.

##### 4. Dissertation or Thesis

Author. Title. [Thesis]. City, State: Institution, date, #p.

### GRANTS, CONTRACTS, AND PATENTS

Date    Agency & Amount,    Title

**Clinical Teaching Track Hired Prior to April 4, 2014**

**Appointment and Promotion Requirements  
for Clinical Teaching Track Faculty**

**with Start of Employment PRIOR to April 4, 2014**

Approved by the University of Colorado School of Dental Medicine Faculty Senate on  
May 23, 2022

Approved by the Executive Vice Chancellor for Academic and Student Affairs  
University of Colorado Anschutz Medical Campus  
February 4, 2022

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# **REQUIREMENTS FOR APPOINTMENT, REAPPOINTMENT, AND PROMOTION FOR FULL-TIME CLINICAL TEACHING TRACK (C/T) FACULTY IN THE SCHOOL OF DENTAL MEDICINE, UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS**

**(Approved by the Faculty Senate March 3, 2021)**

## **1. INTRODUCTION**

The Clinical Teaching Track is intended for faculty who participate in a broad range of teaching activities, and who provide leadership and service to the School, University and the community as described below, and who wish to participate in scholarly/creative work activities at a limited level. Clinical Teaching Track appointees will have comparable ranks to tenured faculty, except that in referring to them in official documents, the designation C/T will be placed after the academic rank (e.g. Assistant Professor C/T).

The purpose of this document is to provide a written reference for the procedures and requirements for appointment or promotion of full-time Clinical Teaching Track faculty within the University of Colorado Anschutz Medical Campus School of Dental Medicine (CUSDM). Additional references that are also applicable are the sections which apply to faculty appointments in the Laws of the Regents of the University of Colorado (Article 5).

A Clinical Teaching Track appointment is a limited term appointment or an “at will” appointment that may or may not be renewed and is not a tenure track appointment. Clinical Teaching Track Faculty are expected to devote the majority of their time to teaching.

A tenure track faculty member may request a Clinical Teaching Track appointment before the sixth year of a faculty appointment. Such appointments are subject to approval by the Promotion, Tenure and Post-Tenure Review Committee, Department Chair, and Dean. Tenured faculty may also request appointment to the Clinical Teaching Track. New faculty may be recommended for Clinical Teaching Track during the hiring process. Clinical Teaching Track faculty may request a Tenure Track appointment while at the rank of Assistant Professor or Associate Professor, provided there is a Tenure Track appointment available. The probationary period will begin at the time of appointment to the Tenure Track. Faculty will be held to the requirements, processes, and procedures of a Tenure Track faculty in the most current Promotion and Tenure document at the time of appointment.

The department chair normally originates the nomination for promotion, after consultation with the appropriate divisional chair. The department chair is responsible for ensuring a departmental review occurs prior to the candidate’s dossier submission. The department chair must assist the candidate in developing a complete dossier for review by the CUSDM Promotion, Tenure, and Post Tenure Review Subcommittee via Interfolio. If

a chair refuses to nominate a faculty member who feels qualified, the faculty member may self-nominate or may be nominated by another fulltime CUSDM faculty member. The Dean will make the final decision as to whether the individual will be appointed, reappointed, or promoted in the Clinical Teaching Track. The Dean will utilize the recommendations of the departmental chairs, the CUSDM Promotion, Tenure, and Post Tenure Review Subcommittee and the CUSDM Dean's Review Committee (in the case of an appeal), and consider the best interests of the School of Dental Medicine in appointments, reappointments or promotions.

## **2. CRITERIA FOR APPOINTMENT, REAPPOINTMENT, AND PROMOTION OF FULL-TIME CLINICAL TEACHING TRACK FACULTY MEMBERS, CUSDM**

### **A. The basic categories that are used to evaluate these faculty members are:**

1. Teaching
2. Leadership and Service
3. Scholarly/Creative Work (for promotion to Full Professor C/T)

Faculty members of all ranks are encouraged to participate in scholarly/creative work activities if available. In addition, faculty members are expected to demonstrate professional growth and professional behavior. Professional behavior includes interactions with patients, staff, students, and colleagues.

Candidates for promotion should refer to Appendix A for guidelines on compiling their dossiers for submission to the Promotion, Tenure, and Post-Tenure Review Subcommittee.

The following written criteria are intended to serve as a guide for the appointment, reappointment and/or promotion of faculty members. A Promotion Criteria Matrix is provided in Appendix B to evaluate teaching, scholarly/creative work activities (for full professor), and leadership and service activities.

### **B. Criteria**

#### **1. Teaching**

High Quality teaching is an important part of the mission of this School. As such, teaching will be evaluated rigorously. The following criteria will be considered, as appropriate to the faculty member in question, regarding a determination of teaching achievement.

- a. Active participation in the teaching program of the School and University.
- b. Teaching responsibilities (e.g., contact hours, course directorship, pre-clinic and clinic coverage).
- c. Dedication of the faculty member to teaching. This is demonstrated by knowledge of the subject and by such factors as course organization, innovations in teaching, objectivity and fairness in student evaluation, availability, enthusiasm and ability to stimulate students to enhance their capacity for critical thinking, and evidence of continued mastery of subject areas (e.g. attendance at courses to enhance teaching and clinical abilities, attendance at CE courses, conferences, teaching laboratories, etc.).

- d. Preparation of teaching materials, evidence of teaching skills development (e.g. teaching portfolio), and use of appropriate methods of student evaluation for outcomes-based improvements.
- e. Evaluation by the departmental chair and/or peers of the faculty member's command of the subject and general effectiveness as a teacher in the didactic setting, in the clinic, and in preclinical laboratories.
- f. Advising and mentoring of pre-doctoral and graduate students, and residents and post-doctoral fellows.
- g. Student evaluation of the overall effectiveness of the faculty member as a teacher.
- h. Clinical teaching as it relates to being a Practice and/or Team Leader; student advising and mentorship.
- i. Student performance in those sections of National Board Examinations and/or clinical board examinations applicable to the faculty member's teaching responsibility.
- j. Teaching awards, Board certification/recertification, and other significant accomplishments.

## **2. Leadership and Service**

Another component of typical faculty activities for Clinical Teaching Track faculty is leadership and service, which includes leadership and service to the University and leadership and service to the community.

### **Leadership and Service to the University**

This responsibility involves a general contribution to the University, over and above teaching and scholarly activity.

The following criteria will be considered:

- a. Participation in the administration and governance of the faculty, the School, the Campus, and the University, including active and productive participation in committees at various levels.
- b. Participation in School and University activities, such as recruiting, open houses, School displays at meetings, faculty meetings, Research Day, and fundraising, etc.
- c. Representation of the School or University to organized dentistry and other professional groups, including participation at these meetings on behalf of the School.
- d. Representation of the School or University to governmental agencies, when formally requested by the Dean or Department chairperson.

- e. Helping and encouraging the professional growth of junior faculty members and other colleagues.
- f. Professional behavior including interactions with patients, staff, students, and colleagues.

### **Leadership and Service to the Community**

Leadership and service to the community is very important to this school and will, in fact, be essential to the future prosperity and survival of this and other dental schools. It involves both leadership and service to the dental profession of Colorado, the surrounding region, the nation, and to the people of this State of Colorado.

The following criteria will be considered:

- a. Presenting continuing education programs sponsored by the School.
- b. Skill and devotion in the care of patients within the clinics of the University of Colorado, or as part of the faculty member's teaching responsibilities in outlying clinics.
- c. Leadership and service to the profession at the state, national, and international levels.
- d. Consultative services to other health professionals, hospitals, institutions of higher education, and governmental agencies.
- e. Presenting continuing education programs not sponsored by the University of Colorado.
- f. Lectures and/or clinical presentations at local, state, national, or international meetings. This criterion involves presentations that represent continuing education.
- g. Presentations on dentistry and related topics to the lay public.
- h. Participation in community dental health education projects.

*NOTE: While leadership and service to the community as described in this section is important and casts a favorable light upon the School, faculty members must carefully balance this activity with the University's legitimate expectations of them in teaching, scholarly/creative work activities, and leadership and service to the University.*

### **3. Scholarly/Creative Work Activities**

Clinical Teaching Track faculty are primarily tasked with teaching and leadership and service-related activities. If they are a full-time member of the faculty, some of their efforts may also be directed and documented toward scholarly/creative work activities appropriate to their scientific, clinical, and teaching interests and availability. However, scholarly/creative work activities

are not a requirement, except for promotion to Professor C/T. See Appendix B for criteria used to evaluate scholarly/creative work activities.

### **3. QUALIFICATION FOR CLINICAL TEACHING TRACK FACULTY RANK, PROMOTION, AND REAPPOINTMENT**

#### **A. Instructor C/T**

1. General Statement- The applicant is expected to have the doctoral dental degree or the Bachelor of Science dental hygiene degree and be well qualified to teach. Faculty appointed to teach in areas not requiring a doctoral dental degree or dental hygiene degree (e.g. basic or behavioral sciences) should have the appropriate degree in that field. Faculty appointed at this level without considerable dental practice experience and/or teaching experience and/or advanced training should anticipate at least two years in this rank before being considered for promotion.
2. Criteria for Instructor C/T
  - a. Factors meriting qualification would include GPA, dental or dental hygiene student class rank, student performance in the specific department, in which the appointment is being made, and collegiality and professionalism. No previous teaching experience is necessary.
  - b. Two letters of recommendation, solicited by the appropriate department chair after consultation with the applicant.

#### **B. Assistant Professor C/T**

1. General statement- An Assistant Professor C/T is expected to have some successful teaching experience in dental education or equivalent. It is expected that faculty at this level will usually possess advanced formal training beyond the doctoral dental degree or the bachelor of science dental hygiene degree, and be well qualified to teach. Faculty may be appointed and/or promoted to this rank who do not possess an advanced degree beyond the doctoral dental degree or Bachelor of Science dental hygiene degree, or appropriate certificate, if they have two years of fulltime dental practice experience in their field and possess outstanding credentials. The balance between teaching and leadership and service activities being evaluated is important. Minimal activity in either area must be balanced by increased quality and quantity of activities in the other area. The person under consideration must show evidence of considerable potential to the university.
2. Criteria for Assistant Professor C/T
  - a. Qualification for the rank of Instructor C/T.
  - b. The appropriate terminal degree. Terminal degree is defined as the highest degree available in their chosen field or a related field or two years of fulltime dental practice experience in their field and possess outstanding credentials.

- c. Successful completion of advanced education beyond the terminal degree, successful completion of an acceptable postgraduate training program not leading to a degree, or two or more years successful teaching experience in dental or dental hygiene education.
- d. Evidence of leadership and service such as School, University, professional organization committee membership and service to the community.
- e. For promotion to Assistant Professor (C/T), the candidate must demonstrate evidence of teaching, and leadership and service at least at the level of meritorious achievement.
- f. For promotion, three internal letters of recommendation, solicited by the appropriate department chair/nominator after consultation with the candidate.

### **C. Associate Professor C/T**

1. General Statement- Promotion to associate professor C/T marks a significant point in the development of a faculty member. Consequently, in addition to specific accomplishments, the balance of the individual's activities and contributions in teaching and leadership and service will be considered along with any scholarly/creative work activities.
2. Criteria for Associate Professor C/T
  - a. Qualification for Assistant Professor C/T.
  - b. Typically, five or more total years of fulltime experience in appropriate higher educational settings or its equivalent at the rank of Assistant Professor C/T.
  - c. Demonstrated evidence of successful teaching at the level of excellent achievement.
  - d. Demonstrated evidence of at least meritorious leadership and service. Quality and quantity of leadership and service contributions will, however, not compensate for deficiencies in teaching. Excellence must be demonstrated in teaching.
  - e. Six letters of evaluation. Three of the evaluators should be from faculty within the University of Colorado and three by nationally recognized professionals outside of the University who are experts in the applicant's field. The list of evaluators should be solicited by the appropriate department chair/nominator after consultation with the applicant.

### **D. Professor C/T**

1. General Statement- Faculty at this rank typically have a minimum of five years at the rank of Associate Professor C/T or its equivalent. They must demonstrate

outstanding accomplishments in teaching and leadership and service, and show evidence of successful scholarly/creative work activities. At this stage of development, the person should have a strong record of leadership in the school or other significant settings as demonstrated by outstanding contributions in both teaching and leadership and service at the level of excellent, and contributing to the development of junior faculty and the profession.

2. Criteria for Professor C/T

- a. Qualification for Associate Professor C/T.
  - b. Demonstrated excellence in teaching.
  - c. Demonstrated excellence in leadership and service to the University and the community.
  - d. Demonstrated evidence of scholarly/creative work activities as defined in Appendix B.
  - e. Six letters of evaluation. Three of the evaluators should be from faculty within the University of Colorado and three by nationally recognized professionals outside of the University who are experts in the applicant's field. The list of evaluators should be solicited by the appropriate department chair/nominator after consultation with the applicant.
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## **INTERIM EVALUATION PROCEDURES AND GUIDELINES FOR CLINICAL TEACHING TRACK FACULTY**

**(Approved by the Faculty Senate March 3, 2021)**

### **1. INTRODUCTION**

Interim evaluations are intended to facilitate faculty development consistent with the academic needs and goals of the School of Dental Medicine. These procedures apply to all Clinical Teaching Track faculty who wish to be considered for promotion.

Upon hire at or promotion to the Assistant Professor rank, the department chair and the faculty member will determine when the faculty member will go through an interim review (Appendix C). Interim reviews usually occur in the 3<sup>rd</sup> or 4<sup>th</sup> year of employment at this rank. Interim reviews should occur at least two years prior to submission for promotion to Associate Professor (C/T).

### **GENERAL GUIDELINES**

- a. Each faculty member below the rank of Associate Professor who wishes to be considered for promotion, shall be evaluated in a comprehensive manner at least once prior to their submission for promotion. The evaluation shall take place at least 2 years prior to promotion review. The evaluation shall include extramural evaluation of the candidate if determined necessary by the committee. Each faculty member shall be informed orally and in writing of the results of the evaluation.
- b. Department chairpersons (or the Dean, if the faculty member is a department chairperson) shall advise each faculty member regarding the criteria and standards that the School of Dental Medicine uses in reaching a decision about the candidate's performance, and will provide the criteria and standards in writing to each faculty member well in advance of the interim evaluation period. In addition, department chairpersons (or the Dean, if the faculty member is a department chairperson) will advise faculty members at least once each year during annual merit evaluations as to how that individual is progressing toward fulfilling the criteria for promotion.
- c. The criteria for evaluating the performance of faculty shall include those that are used in the School of Dental Medicine for promotion of full-time clinical teaching track faculty. The faculty member's accomplishments in teaching, and leadership and service shall be the main focus of the evaluation. The general guideline in determining acceptable performance is whether the faculty member's growth and accomplishments in these areas are progressing at a level consistent with other faculty members at the University of Colorado School of Dental Medicine and other similar institutions. The balance of accomplishments



in these areas should also be evaluated in light of the goals of the School and department and any official changes in job assignment, e.g., major increases or decreases in administrative, teaching, or research duties.

- d. External evidence of a faculty member's performance should be incorporated in the evaluation. This evidence should include, but is not limited to, national awards, honors, offices in national or international academic professional organizations, editorial functions for scholarly journals, publications in refereed journals and papers presented at regional, national, or international meetings.

## **2. PROCEDURES**

- a. The chairperson of each department (or the Dean, if the faculty member is a department chairperson) is responsible for annual evaluations of the faculty member. These evaluations should provide faculty with feedback on performance and progress in meeting standards for promotion.
- b. Faculty members and their department chairpersons (or the Dean, if the faculty member is a department chairperson) will be notified by the Office of Faculty Affairs in the Fall of the academic year in which the formal interim evaluation is to be conducted.
- c. The department chairperson (or the Dean, if the faculty member is a department chairperson) shall counsel the faculty member concerning updating their vitae (see Appendix D) and identifying supporting documentation to be submitted for the interim evaluation. This includes identification of peers to evaluate their performance.
- d. The faculty member, in consultation with the department chair (or the Dean, if the faculty member is a department chairperson), shall compile all documents to be submitted for the interim evaluation and forward them to the CUSDM Office of Faculty Affairs through Interfolio.

*An electronic version, should be submitted to the CUSDM Office of Faculty Affairs no later than October 15th. The documentation must include at least the following:*

- 1. Current curriculum vitae
- 2. Letter of evaluation from department chairperson to include date and outcome of the departmental review, and a letter of evaluation from the division chairperson
- 3. At least three internal evaluation letters

4. A list of three authorities in the faculty member's field outside the Anschutz Medical Campus to be used by the committee in the event it determines that external input is required
  5. Student teaching evaluations or summary of student teaching evaluations that is prepared by the department or division chairperson
  6. Copies of all publications since appointment to the current position
  7. Other materials deemed appropriate for the committee to evaluate progress toward satisfying all promotion and/or tenure criteria
- e. The Promotion, Tenure and Post-Tenure Review Subcommittee conducts a comprehensive evaluation of the faculty member's performance and accomplishments and progress toward promotion.
  - f. The written summary and the dossier are forwarded to the CUSDM Office of Faculty Affairs who then forwards the committee letter to the faculty member, the department chairperson, and CUSDM Human Resources, and the dean.
  - g. The department chairperson (or the Dean, if the faculty member is a department chairperson) and faculty member meet to discuss the results of the evaluation.
  - h. If requested, the faculty member and department chairperson (or the Dean, if the faculty member is a department chairperson) can meet with the chairpersons of the Promotion, Tenure, and Post-Tenure Review Subcommittee to discuss the overall evaluation and to seek clarification.
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## PROMOTION REVIEW PROCESS FOR CLINICAL TEACHING TRACK FACULTY

- a. Prior to the submission of a dossier to the Promotion, Tenure, and Post-Tenure Review Committee, an internal department review must occur. The Department Chair, an internal department representative, and an external department representative must review the candidate's dossier to determine if the candidate meets the criteria for promotion. The dossier should only be forwarded to the Promotion, Tenure, and Post-Tenure Review Committee after the Department Review has concluded. It is the Department Chair's responsibility to assist the candidate in assembling their dossier, as well as convening and conducting the Department Review.
- b. Typically, Clinical Teaching Track faculty should submit a dossier after they have completed at least five (5) years at the rank of Assistant or Associate Professor. Assistant Professors seeking promotion to Associate Professor must have gone through an Interim Review at least two years prior to submission for promotion. The candidate and department chair should be aware of the timeline for submission.
- c. Curriculum Vitae should be formatted as outlined in Appendix D of this document.
- d. Dossiers should be compiled as outlined in Appendix A of this document.
- e. An electronic version of the candidate's dossier should be submitted to the CUSDM Office of Faculty Affairs by October 15<sup>th</sup> through Interfolio.
- f. The Promotion, Tenure, and Post-Tenure Review Committee will evaluate the candidate's dossier and, based on a majority vote, will make a consensus recommendation to the dean. If the candidate disagrees with the Committee's recommendation, the candidate can appeal the decision to the Dean's Review Committee. The dean will have the final decision to promote or not to promote the candidate. The Dean's Review Committee reviews the dossier and documents from each stage of review and votes on a recommendation in the event of an appeal.
- g. For promotion, the committee will recommend or not recommend based on a vote of excellence in teaching and at least meritorious in leadership and service; separate voting totals will be recorded for each of the two or three categories depending on level of promotion (e.g., four (4) voted meritorious for teaching and three (3) nonmeritorious, etc.) and communicated to the Dean for each candidate.
- h. For promotion to Professor, the committee will recommend or not recommend based on a vote of excellence in both teaching and leadership and service with demonstrated scholarly/creative work activities as outlined in Appendix B.

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**REQUIREMENTS FOR APPOINTMENT, REAPPOINTMENT, AND PROMOTION FOR  
PART-TIME FACULTY, VOLUNTEER FACULTY AND PRECEPTORS IN THE SCHOOL  
OF DENTAL MEDICINE, UNIVERSITY OF COLORADO DENVER  
(Approved by the Faculty Senate March 3, 2021)**

**1. INTRODUCTION**

The purpose of this document is to provide a written reference for the procedures and requirements for appointment or promotion of part-time faculty within the University of Colorado School of Dental Medicine (CUSDM). For the purposes of promotion, part-time faculty in this section are defined as faculty with less than 50% FTE. Additional references that are also applicable are the sections which apply to faculty appointments and rank in the Laws of the Regents of the University of Colorado. The Division chair originates the nomination for a faculty member within a division for appointment, reappointment, and or promotion, and sends that nomination to the Department chair. The Department Chair assists the candidate in gathering information, letters of recommendation, curriculum vitae, and other required credentialing documents to support the individual's appointment or in the creation of a dossier for promotion to the faculty rank outlined below, and, with a recommendation, forwards the nomination to the CUSDM Promotion, Tenure, and Post Tenure Review Subcommittee through Interfolio. Promotion of part-time or volunteer faculty members and preceptors follow the same review process and cycle as full-time faculty. Faculty must meet the same criteria for promotion in the areas of teaching, scholarly/creative work activities, and leadership and service.

**2. CRITERIA FOR APPOINTMENT AND PROMOTION OF PART-TIME FACULTY,  
VOLUNTEER FACULTY AND PRECEPTORS, CUSDM**

**Clinical Instructor-**

In order to be appointed at the part-time Clinical Instructor level at the University of Colorado Anschutz Medical Campus School of Dental Medicine, an individual must have received a terminal professional degree or equivalent. Two letters of recommendation will be required. One of the letters must be from a full-time faculty member within the School; the other must be from the chair of the department from which the nomination is being made.

**Clinical Assistant Professor-**

In order to be appointed at the part-time or volunteer Clinical Assistant Professor level at the University of Colorado Anschutz Medical Campus School of Dental Medicine, an individual must have received a terminal professional degree or its equivalent. Two letters of recommendation are required; one from a full-time faculty member within the School of Dental Medicine, the other from the chair of the department from which the nomination is being made. For promotion, three letters are required and must be from within the School of Dental Medicine. In addition, the candidate must have completed appropriate specialty training or they typically have three years of experience in the discipline for which they are being considered for appointment. For promotion to Clinical Assistant Professor,

the candidate must be evaluated by the Promotion, Tenure, and Post-Tenure Review Subcommittee as at least meritorious in teaching, and leadership and service.

**Clinical Associate Professor-**

In order to be appointed at the part-time Clinical Associate Professor level at the University of Colorado Anschutz Medical Campus School of Dental Medicine, an individual must have a terminal professional degree or its equivalent along with three letters of recommendation. Two letters of recommendation must be from full-time faculty members within the School of Dental Medicine, including from the chair of the department from which the nomination is being made; one letter of recommendation may come from an individual outside the School of Dental Medicine.

In addition, candidates typically have seven additional years of clinical experience, research experience, additional training, or teaching experience. For promotion to Clinical Associate Professor, the candidate must be evaluated by the Promotion, Tenure, and Post-Tenure Review Subcommittee as excellent in teaching, and at least meritorious in leadership and service.

**Clinical Professor-**

In order to be appointed at the Clinical Professor level at the University of Colorado Anschutz Medical Campus School of Dental Medicine, an individual must have a terminal professional degree or its equivalent. For consideration of the nominee, five letters of recommendation must be submitted. Two letters must come from faculty members within the School of Dental Medicine, including from the chair of the department from which the nomination is being made, the other three may be from outside the School of Dental Medicine.

In addition, the individual typically has ten additional years of experience, appropriate clinical experience, research experience, additional training or teaching experience, and must have attained national recognition in their field. For promotion to Clinical Professor, the candidate must be evaluated by the Promotion, Tenure, and Post-Tenure Review Subcommittee as excellent in both teaching, and leadership and service and must provide evidence of scholarly/creative work activities.

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## **REQUIREMENTS FOR PROFESSOR EMERITUS IN THE SCHOOL OF DENTAL MEDICINE, UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS**

### **1. INTRODUCTION**

The title “emeritus” should be bestowed only on those retired faculty members whose contributions warrant it. The award should not be automatic, but should be bestowed only on the basis of merit to preserve the significance of the title.

Any faculty member may be allowed, upon retirement and in accordance with the campus-defined process and approval by the chancellor, to retain their title with the description "emeritus/emerita."

### **2. CRITERIA FOR APPOINTMENT OF PROFESSOR EMERITUS, CUSDM**

The faculty member must be retired from a full-time, faculty position at the University of Colorado School of Dental Medicine and had a distinguished career.

#### **PROCEDURE:**

4. A faculty member's department chair may nominate a retiring faculty member for the designation, “emeritus.” (See Campus Administrative Policy 1011).
5. Supporting documentation required includes a current curriculum vitae, a one-page summary of the faculty member's accomplishments during his time at the University (to include promotion times, teaching honors and awards, etc.), and three years of annual evaluation forms.
6. The nomination will be considered sequentially by the Promotion, Tenure, and Post-Tenure Review Subcommittee and by the Dean's Review Committee. If the Dean concurs with the awarding of the emeritus status, the Dean will submit the recommendation to the Executive Vice Chancellor of Academic and Student Affairs for consideration for a recommendation of approval before forwarding to the Chancellor for consideration.
7. The effective date may be no earlier than the day following the faculty member's retirement date.

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#### **RELATED POLICIES, PROCEDURES, GUIDELINES, AND OTHER RESOURCES**

7. Board of Regents Policy 5.C <https://www.cu.edu/regents/policy/5>
8. APS 5060: Faculty Appointments <https://www.cu.edu/ope/aps/5060>
9. APS 5008: Faculty Performance Evaluation <https://www.cu.edu/ope/aps/5008>
10. University of Colorado School of Dental Medicine Faculty Governance Document

## **APPENDIX A**

### **ORGANIZATION AND REQUIREMENTS OF EVALUATION DOSSIER**

Prior to the submission of a dossier to the Promotion, Tenure, and Post-Tenure Review Committee, an internal department review must occur. The Department Chair, an internal department representative, and an external department representative must review the candidate's dossier to determine if the candidate meets the criteria for promotion. The dossier should only be forwarded to the Promotion, Tenure, and Post-Tenure Review Committee after the Department Review has concluded.

It is the Department Chair's responsibility to assist the candidate in assembling their dossier, as well as convening and conducting the Department Review.

#### **Further instructions can be found in Interfolio.**

1. Curriculum Vitae- complete document in University of Colorado School of Dental Medicine format
2. Letters of Recommendation
  - b. Internal
  - c. External
3. Teaching (Sequence with most recent first)
  - a. Teaching portfolio
    - i. Professional autobiography- concise review of professional and teaching experience
    - ii. Statement of teaching philosophy
    - iii. Statement of teaching advancements and accomplishments (teaching awards, classroom innovations)
    - iv. Evidence of student performance in your area (acceptance into residency programs, obtaining a post-doctoral position, evidence of advancement in field of study/research, student awards)
    - v. Teaching materials developed
    - vi. Teaching responsibilities (a short description of each class with contact hours)
  - b. Peer and Office of Education teaching evaluations
  - c. Student teaching evaluations
  - d. Evidence of professional growth in education
    - i. Continuing education in education pedagogy- attended last 5 years
    - ii. Continuing education in your profession- attended last 5 years
    - iii. Research/presentations/publications in education
    - iv. Board certification status for advanced trained dentists

- v. Obtaining a degree in education (e.g. Masters in Education)
- 4. Scholarly Activity (Sequence with most recent first)
  - a. Summary of scholarly activity
  - b. Publication list followed by a copy of publications
  - c. Grants- list of funded and unfunded grants with copies of Notice of Awards.  
Committees may request copy of entire grant for additional information.  
Include dates submitted and proposed lifetime of award.
  - d. Scholarly presentations
- 5. Leadership and service (Sequence with most recent first)
  - a. Summary of leadership and service activity
  - b. Committee membership and leadership roles (e.g. chairs), including faculty governance and organized dentistry leadership and service
    - i. National/ International
    - ii. State
    - iii. University
    - iv. Campus
    - v. School of Dentistry
    - vi. Departmental
  - c. Patient care activities- university associated only (Dental Faculty Practice, UCHealth)
  - d. Consultantships or internal/external advisory boards



## APPENDIX B

### UNIVERSITY OF COLORADO SCHOOL OF DENTAL MEDICINE PROMOTION CRITERIA MATRIX (Clinical Teaching Track)

**Note:** The following is intended to present examples of various levels of accomplishment in the areas of teaching, scholarly activity/creative work, and leadership and service. It is not exclusionary, but is intended to assist faculty, department chairs, and promotion committees in matching candidates' accomplishments to the promotion criteria. Moreover, areas frequently overlap in practice, although they are presented as distinct entities here. It should also be noted that the matrix specifies just two categories, meritorious and excellent. Professors will need to achieve excellence in a **significant number** of criteria relevant to their academic profile. Associate professors will have met fewer of these criteria or in not as great depth. The promotion process is meant to describe and reward continued professional growth and achievement. Performance that does not meet the requirements/most of the criteria for meritorious will be deemed not meritorious.

TEACHING	
Meritorious	Excellent
Active participation in teaching activities of the department, school, campus or university, including two or more of the following: presenting a series of lectures covering one or more topics; coordinating a course; acting as a primary instructor in a course; advising or mentoring students, residents, post-doctoral fellows or faculty; attending on an inpatient or outpatient service; organizing or facilitating a seminar series, journal clubs or laboratory exercises; participating in CE courses.	Multiple course directorships or co-directorship and/or participation across the curriculum; development of innovative teaching methods, such as educational websites, simulations, packaged courses or workshops. Invitations to present courses outside of primary department.
Meritorious teaching evaluations from students and peers. Expectation of at least a 4.0 on average to be meritorious.	Consistently receives outstanding teaching evaluations.
Developing/revising assignments or lectures that incorporate diverse scholarly perspectives, concepts, readings, and/or scholarship and/or representing diverse authors, as relevant to the course material.	Designing/revising a course that incorporates diverse scholarly perspectives, concepts, readings, and/or scholarship and/or representing diverse authors, as relevant to the course material.
Participation in advanced faculty development programs and/or CE courses that enhance the faculty members teaching or pedagogy.	Completion of advanced faculty development programs that result in a certificate or degree in education, with evidence that the faculty member has applied these new skills or new knowledge to improve their teaching or pedagogy.
Participation in workshops or training on unconscious bias, diversity and inclusion, or other topics intended to improve classroom culture, teaching or mentorship.	Receipt of honors or awards by students/mentees, including students from underrepresented groups.  And/or  Developing teaching resources for faculty on diversity and inclusion, and health equity.
Self-improvement activities (for example, participation in workshops or courses that are designed to improve teaching or mentoring effectiveness).	Development of mentoring programs that focus on career development or academic promotion of students, residents, fellows or faculty.

<b>TEACHING</b> Continued	
<b>Meritorious</b>	<b>Excellent</b>
Participation in mentoring programs for students, fellows, residents, or other trainees.	Recognition as an outstanding and influential teacher and/or role model for students, fellows, residents, or other trainees (teaching awards, hooding, mentoring awards).
Self-improvement activities (for example, participation in workshops or courses that are designed to improve teaching and mentoring effectiveness).	Development of mentoring programs that focus on career development or academic promotion of students, residents, fellows, or faculty.
Doctoral Dissertation and Master's committee participation and/or thesis committee member.	Chairing a Doctoral Dissertation or Master's committee and/or thesis committee (not primary advisor).
Develops new or significantly revises educational materials on a consistent basis.	Creates new courses or curriculum that incorporates innovative technologies.
	Evidence of positive impact on teaching in the discipline, such as citations of publications or presentations related to teaching, or authorship of a critically reviewed textbook or other educational materials that have been widely adopted by others.
	Consistent participation in national educational activities (for example, residency review committees, programs sponsored by professional organizations, re-certification courses or workshops).
	Institutional, national, or international teaching awards that recognize contributions to the discipline (e.g., pedagogical innovation, curricular redesign)
	Evidence of continued growth and mastery of subject areas (e.g., attendance at courses to enhance teaching and clinical abilities, conference, teaching laboratories, etc.).
	Record of successful mentorship of students, residents, fellows or other faculty, as measured by: letters of support from mentees; publications, presentations, grants, awards or other evidence of mentees' academic success; evidence that mentees have pursued outstanding careers.
	Development of innovative courses, innovative delivery of course content, problem-based learning cases, laboratory exercises or other instructional materials.
	Published research and/or externally funded research designed to improve pedagogy.

SCHOLARLY/CREATIVE WORK	
Meritorious	Excellent
Abstracts, poster presentations, table clinics at national meetings (ADEA, AADOCR, IADR, etc.), invited research seminars at this or other institutions. Service as an ad hoc member on study section.	A national or international reputation, as evidenced by: external letters of reference; invitations to present at national or international meetings; invitations to write reviews or chapters, or to provide unique expertise as a collaborator on a research project; visiting professorships; service as a regular member on study sections; organization of national meetings; service as a national consultant or on editorial boards of journals.
Authorship of papers in peer-reviewed journals that demonstrate the ability to generate and test hypotheses.	An on-going, peer-reviewed publication record as outlined in Appendix D for Research Track faculty.
A principal and sustained role in the management of programs with external funding, to include NIH, industry funding, or foundation funding.  Management of internal grant funding.	Principal investigator status on competitive peer-reviewed research grants (for example: R03 or R21 awards or mentored K08 or K23 awards from NIH or private foundations for associate professors; R01, P0, HRSA awards, or other independent awards for professors).  Ongoing record of peer-reviewed grant or contract funding.  Secures funding to support educational initiatives related to diversity and inclusion, and health equity.
Published articles on health care professional education with emphasis on hypothesis-driven research.	A continuous record of publications in health professional education and/or educational initiatives related to diversity and inclusion and health equity, including citation record.
Participation in the design, conduct, and publication of clinical and epidemiological research, including clinical trials.	Leadership in the design, conduct, and publication of clinical and epidemiological research, including clinical trials.
	Awarded patents for discoveries.
	Principal Investigator (PI), Co-Investigator (Co-I) or Key Personnel status on grants or contracts.
	Member of review section or editorial board.
	Contributions to books, journals, or clinical information systems.
	Demonstrated evidence of significant independent intellectual contributions to successful research programs.
	Other evidence of clinical and epidemiological scholarship (for example, research, grants, publications or national presentations) that promote health care quality and patient safety or that advance the science and practice of health care quality improvement; or influence policy, direction or a field of research in diversity and inclusion, and health equity.
	Secures funding, or partners on one or more research projects with community organizations, for research that addresses diversity and inclusion, and health equity.

LEADERSHIP/SERVICE	
Meritorious	Excellent
Active leadership and service on committees or task forces within the program, division, department, school, campus or university.	Appointment to responsible positions within the institution such as chair of a committee; faculty officer; program director; academic clinical coordinator; membership on major decision-making Anschutz Medical Campus committees.
Leadership and service to local, state, national or international organizations through education, consultation or other roles.	Leadership and service as an officer or committee chair in professional or scientific organizations.
Presenting continuing education at the school and local level.	Presenting continuing education lectures and/or clinical presentations at state, national, or international meetings.
Participating in a task force for a professional or scientific association or on a state or regional committee that aims to support or promote diversity and inclusion, and health equity.	Chairing a task force for a professional or scientific association or serving on a national committee related to diversity and inclusion, and health equity.
Participation in community dental health education projects.	Election to responsible positions dealing with health care issues at the local, state, regional, national or international levels.
Mentoring and encouraging the professional growth of junior faculty members.	Chairing a junior faculty mentoring committee or development of a faculty-mentoring program.
Participation in community dental health education projects.	Leading community dental health education projects.
Presentations on dentistry and related topics to the lay public.	Election to responsible positions dealing with health care issues at the local, state, regional, national or international levels.
	Participation on NIH study section, grant reviewer, and external program evaluation.
	Leadership and service awards from an area of the University or from a local, national, or international organization (civic, scientific and/or professional).
	Leadership and service on editorial boards of professional or scientific journals.
	Consultative services to other health professionals, hospitals, institutions of higher education, and governmental agencies.
	Serving as the Director of or on the Executive Board of Dental Faculty Practice

**APPENDIX C**  
**SAMPLE OF AN INTERIM EVALUATION NOTIFICATION FORM**

**UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS**  
**SCHOOL OF DENTAL MEDICINE**  
**FACULTY INTERIM EVALUATION NOTIFICATION**

FACULTY NAME (PRINT): \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

DATE OF INITIAL FULL-TIME APPOINTMENT: \_\_\_\_\_

CREDIT TOWARD PROBATIONARY PERIOD (if applicable): \_\_\_\_\_

Interim evaluations are intended to facilitate faculty development, consistent with the academic needs and goals of the School of Dental Medicine. Interim evaluations generally occur in the third or fourth year of a faculty member's full-time appointment. There is a two-year period between the interim review and review for promotion. The faculty member and the department chairperson jointly determine which year the interim evaluation will be conducted, and state the agreed-upon year in writing.

**THE INTERIM EVALUATION FOR THE ABOVE-NAMED FACULTY MEMBER WILL BE SUBMITTED IN OCTOBER OF \_\_\_\_\_**

**CONCURRENCE:**

\_\_\_\_\_  
Faculty Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Chairperson Signature  
(or Dean, if applicable)

\_\_\_\_\_  
Date

The original notification form is maintained by the departmental office (or Dean's office, if the faculty member is a department chairperson), a copy is maintained by the faculty member, and a copy is forwarded to the Office of Faculty Affairs.

**APPENDIX D**  
**CU SDM CURRICULUM VITAE FORMAT**

**FULL NAME:**

**CURRENT DATE:**

**PERSONAL HISTORY**

**Office Address:**

**Phone:**

**E-mail:**

**Fax:**

**Home Address:** *(Optional)*

**Phone:** *(Optional)*

**EDUCATION:**

*(List highest earned degree first)*

*(Include Institution and Location; Degree; Date(s) Attended; Degree Major)*

*(Include Postdoctoral Training [Residency/Fellowship]; Graduate School; Dental School; College)*

Examples

1998 - 2001      Doctor of Dental Medicine  
Dental College of Georgia  
Augusta University  
Augusta, Georgia

1998 - 2004      Ph.D. in Oral Immunology  
University of Texas San Antonio  
San Antonio, Texas  
Dissertation Advisor: Robert E. Jones, Ph.D.  
Dissertation Title: Salivary proteins and aggressive caries

**SPECIALTY BOARDS:**

*(List board eligibility if not boarded)*

**LICENSURE:**

**PROFESSIONAL EXPERIENCE:**

*(Reverse chronological order)*

*(Include Institution/Organization, Department/Division, Location, Title(s)/ Position(s), and date(s) each was held)*

*(Optional: Separate into categories such as Academic Appointments, Administrative Appointments; Hospital Appointments; Private Practice Experiences; and Military Leadership and service if dental related)*

**HONORS:**

**TEACHING, SCHOLARLY/CREATIVE WORK, LEADERSHIP AND SERVICE:**

**1. TEACHING ACTIVITIES**

**Teaching Responsibilities:**

*(Reverse Chronological order)*

*(Include: 1) Courses directed (brief summary of major responsibilities 2) number of hours actually taught)*

**Course Participation:**

*(Include number of hours the individual actually taught)*

**Teaching Materials Developed:**

**Teaching Awards:**

**Mentoring Activities:**

**Summer Research Students (Dental only)**

**Graduate Students (Ph.D. or Masters)**

**Post-doctoral Fellows**

**2. SCHOLARLY/CREATIVE WORK ACTIVITIES**

**Current Research:**

**Financial Resources/ Grants & Contracts:**

*(Reverse Chronological Order)*

*(Include Project Title, Funding Agency, Date(s) of Project, PI or CO-PI, and Total Direct and Indirect Costs broken out (\$))*

*(Separate by Active Research Support and Completed Research Support)*

*(Separate into categories such as School of Dental Medicine, University*

*Colorado Anschutz Medical Campus, Federal/State, Professional Associations)*

**Publications:**

*(Published and In Press)*

*(Reverse chronological order)*

*(Formatting examples attached)*

**Periodicals:**

*(Published and In Press)*

*(Reverse chronological order)*

*(Formatting examples attached)*

**Book Chapters:**

*(Published and In Press)*

*(Reverse chronological order)*

*(Formatting examples attached)*

**Abstracts:**

*(Indicate those that were presented)*

**Theses Directed:**

*(Include Date, Title, Type, and Student's Name)*

**3. LEADERSHIP AND SERVICE ACTIVITIES**

**Invited and Selected Presentations:**

*(Reverse chronological order)*

*(Include papers and table clinics; do not include presentations that also appear as published abstracts)*

*(Separate into categories such as Local, State, National/International)*

**Continuing Education Courses Presented:**

*(Reverse Chronological order except when same course is given in multiple times; then list under first time taught and include other dates given)  
(Include Date(s), Course Title, Number of Hours, Location)*

**Administrative Positions at the School:****Governance Positions****Committee Appointments:**

*(Reverse chronological order)*

**School of Dental Medicine**

**Date(s)**                      **Committee Name**

**Date(s)**                      **Offices Held**

**University**

**Date(s)**                      **Committee Name**

**Date(s)**                      **Offices Held**

**State**

**Date(s)**                      **Committee Name**

**Date(s)**                      **Offices Held**

**National/International**

**Date(s)**                      **Committee Name**

**Date(s)**                      **Offices Held**

**Society/Professional Organizations:**

*(Reverse Chronological Order)*

*(Include Date(s), Society/Organization Name, Offices Held, and Date(s) held)*

**Grant Review Panels:**

**(Reverse chronological order)**

**(Include Date(s), Name of study section or panel and leadership position if any)**

**Editorial Boards of Journals:**

*(Reverse chronological order)*

*(Include position(s) held, and date(s))*

**Journal Peer Review**

*(List only Journal titles; no dates)*

**Textbook Peer Review:****Consultant Positions:**

*(Reverse chronological order)*



## **EXAMPLES**

### **Reference Format**

A. Journals (list all authors if six or less, otherwise list only first three and add et al.)

3. Standard Reference

Gibson GB, Richardson AS, Patton RE, Waldman R. A clinical evaluation of occlusal composite and amalgam restorations: one- and two- year results. J Am Dent Assoc 1982; 104:335-37.

4. Corporate Author

Federation Dentaire International. Technical Report No. 28. Guidelines for antibiotic prophylaxis of infective endocarditis for dental patients with cardiovascular disease. Int Dent J 1987;37;235.

B. Books and Monographs

5. Personal Author(s)

Tullman JJ, Redding SW. Systemic disease in dental treatment. St. Louis: The CV Mosby Co; 1983:1-5.

6. Chapters in a Book

Johns R. Restorative needs and methods. In: Cohen B, Thomson H, eds. Dental care for the elderly. London: William Heinemann Medical Books; 1986: 142-77.

7. Agency Publication

Miller AJ, Brunelle JA, Carlos JP, Brown LJ, Loe H. Oral health of United States adults. Bethesda, Maryland: National Institute of Dental Research, 1987; NIH publication no. 87-2868.

8. Dissertation or Thesis

Author. Title. [Thesis]. City, State: Institution, date, #p.

### **GRANTS, CONTRACTS, AND PATENTS**

Date    Agency & Amount,    Title

## **APPENDIX E**

### **PROCEDURAL GUIDELINES FOR FACULTY PROMOTION PROCESS**

The following are guidelines that provide additional clarity to the promotion process and should be followed whenever possible.

#### **1. Promotion, Tenure, and Post-Tenure Review Subcommittee**

- a. Only full-time, tenured associate/full professors or associate/full professors (C/T) should comprise committee membership.
- b. Selection of committee members will be by department chairs (1 person per department, although not necessary to be department member) with ratifying vote and continued oversight by officers of the Faculty Senate.
- c. Chair of the committee will be elected by the Promotion, Tenure, and Post-Tenure Review Subcommittee.
- d. The Promotion, Tenure and Post-Tenure Review Subcommittee will be the first level of review for all appointments, interim reviews, promotions, granting of tenure, and post-tenure reviews.
- e. Committee members who are scheduled for promotion, shall not be present during the review of their dossier or the vote.

#### **2. Dean's Review Committee**

- a. Chair of the committee and members will be appointed at the discretion of the Dean.
- b. Faculty from outside the School of Dental Medicine may be appointed to the committee at the discretion of the Dean.
- c. Only full-time, tenured associate/full professor or associate/full professor clinical track should comprise committee membership.
- d. For Clinical Teaching Track faculty, the Dean's Review Committee will serve as the second level of review for all appeals for interim reviews and promotions.

#### **3. Interim Reviews**

- a. Each full-time faculty member below the rank of associate professor clinical teaching track shall be evaluated in a comprehensive manner in accordance with the School of Dental Medicine's Interim Review Procedures and Guidelines found within this document.
- b. The department chair should meet with the candidate to discuss the summary of findings and help plan appropriate strategies for improvement if necessary. Chairs of the Promotion, Tenure and Post-Tenure Review Committee and DRC should be available for clarification and suggestion if necessary.

- c. An electronic copy of the candidate's dossier should be submitted through Interfolio to the Office of Faculty Affairs by October 15<sup>th</sup>
- d. The dossier should be compiled as outlined in the Faculty Interim Evaluation Procedures and Guidelines.
- e. Information on the Differentiated Annual Workload and Professional Plan and annual performance ratings will be available to the chairs of each committee if necessary.

#### 4. Promotion Guidelines

- a. Clinical Teaching Track faculty typically submit their dossier for promotion after at least two years at the Instructor Level, at least 5 years at Assistant Professor Level, and at least 5 years at Associate Professor Level. Candidates must meet the promotion criteria outlined in this document, which may take longer than the number of years noted above.
- b. Department reviews should occur prior to submission to the Office of Faculty Affairs.
- c. Candidates submitting their dossiers for promotion should submit their materials to the Office of Faculty Affairs no later than October 15<sup>th</sup>.
- d. Candidates seeking promotion to Associate Professor or Professor should refer to the Guidelines for the Evaluation of Publications, Appendix B.
- e. Curriculum Vitae should be formatted as outlined in Appendix D of this document.
- f. Dossiers should be compiled as outlined in Appendix A of this document.
- g. An electronic copy of the candidate's dossier should be submitted through Interfolio to the Office of Faculty Affairs by October 15<sup>th</sup>.
- h. To assist with and expedite the review process, the candidate should also submit an electronic copy of their dossier to the Office of Faculty Affairs by October 15<sup>th</sup>.

#### 5. Committee Protocols

- a. Pre-printed ballots, or electronic ballots when necessary, will be utilized when voting on promotion.
- b. All committee members should be present to register a vote and every effort should be made to have all committee members present when voting.
- c. Votes will be confidential and counted by the chair of the committee and one additional member, determined by vote of the committee.
- d. Letters of nomination/recommendation are permitted by members of committees for promotion and tenure candidates, but if received from the chair of either review committee an alternate chair should be appointed for evaluation of that candidate.

- e. If a committee member is being evaluated for promotion, they should be excused from committee deliberations and votes on their promotion.
- f. The Promotion, Tenure, and Post-Tenure Review committee will provide an overall evaluation of the faculty member's performance as either excellent, meritorious, or not meritorious and separate category voting totals will be recorded (e.g., four (4) voted meritorious for teaching and three (3) nonmeritorious, etc.) and communicated to the Dean for each candidate.
- g. The Promotion, Tenure and Post-Tenure Review Committee should complete their evaluation(s) by the end of December
- h. The Promotion, Tenure, and Post-Tenure Review Committee will make a recommendation whether to promote or not to promote to the dean. If the candidate disagrees with the recommendation, the candidate can appeal the decision to the Dean's Review Committee. The dean will have the final vote in the decision to promote or not to promote the candidate. The Dean's Review Committee only reviews the dossier and votes on a recommendation in the event of an appeal.
- i. Committee members may request a copy of the summary letter written by committee chairs to the candidate/Dean summarizing committee findings.

**Clinical Teaching Track, Research Track, and Clinical Track Faculty Hired After March 21, 2022**

**Appointment and Promotion Requirements  
for Clinical Teaching Track, Research Track and Clinical Track Faculty  
with start of employment or appointment track transition ON or AFTER March 21, 2022**

Approved by the University of Colorado School of Dental Medicine Faculty Senate on

May 23, 2022

(Replacing version approved on April 1, 2015)

Approved by the University of Colorado Denver | Anschutz Medical Campus, Office of the Executive Vice  
Chancellor for Academic and Student Affairs

March 21, 2022

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## **Preamble**

This governance document outlines the process of appointment, promotion and evaluation of all Clinical Teaching Track, Research Track, and Clinical Track faculty members. Appointment and promotion are based on summary evaluations of a faculty member's cumulative performance. These processes are separate and distinct from the annual merit performance evaluation. Every candidate for interim evaluation and promotion, shall consult with and be advised by the chair of their department regarding the areas of performance that will be examined, the standards of performance that must be met, and the criteria that the Promotion, Tenure, and Post-Tenure Review Committee and the Dean's Review Committee uses in reaching a recommendation about the candidate's performance. As such, the chairperson or a departmental level advisory committee is expected to provide a first level assessment of a faculty member's readiness for consideration of promotion.

In preparation for a faculty member's interim review and submission of their name for promotion, the chair of their department has the responsibility for providing leadership toward the achievement of the highest possible level of excellence in teaching (didactic, preclinical, and clinical), scholarly/creative work activities, and leadership and service activities, as appropriate. The chair is expected to articulate the goals of the department and to maintain a climate that is hospitable to creativity and innovation. The chair is also expected to be knowledgeable of and be able to articulate the processes and procedures outlined in this document. The chair or chair's designee shall assist the faculty member with the development of their review and promotion dossiers.

## **Definitions/Glossary of Terms**

**Five years full-time service:** will be based off 100% FTE and prorated for time less than 100% FTE.

### **Terminal Degrees:**

- 6) For Dental Hygienists, at least a Master's degree in a related field;
- 7) For foreign-trained dentists, BDS/DDS from non-U.S. accredited school and Master's degree or advanced training certificate from a U.S. accredited institution;
- 8) For general dentists, DDS/DMD from a US accredited school;
- 9) For specialists, advanced training certificate and/or Master's degree in addition to the DDS/DMD;
- 10) and PhD or equivalent for basic science researchers.

**Scholarly presentations:** presenting work (oral or poster presentations) that has resulted from research, clinical trials or educational innovation at state, national, and/or international conferences.

**Continuing Education:** presenting or attending courses designed to enhance your clinical skills and to stay current on changes in the field of dentistry.

### **Related Policies/Cross References**

APS 1009: Multiple Means of Teaching Evaluation

APS 5008: Faculty Performance Evaluations

APS 5060: Faculty Appointments

Regent Policy 5.C: Faculty Appointments

Regent Policy 5.G: Faculty Grievance



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## REQUIREMENTS FOR APPOINTMENT, REAPPOINTMENT, AND PROMOTION FOR FULL-TIME CLINICAL TEACHING TRACK (C/T) FACULTY IN THE SCHOOL OF DENTAL MEDICINE, UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS

### 1. INTRODUCTION

The Clinical Teaching Track is intended for faculty who primarily participate in a broad range of teaching, and provide leadership and service to the School, University and the community as described below, and who participate in scholarly activities at a limited level. Clinical Teaching Track appointees will have comparable ranks to tenured faculty, except that in referring to them in official documents, the designation C/T will be placed after the academic rank (e.g. Assistant Professor C/T).

The purpose of this document is to provide a written reference for the procedures and requirements for appointment or promotion of full-time Clinical Teaching Track faculty within the University of Colorado School of Dental Medicine (CUSDM). Additional references that are also applicable are the sections which apply to faculty appointments in the Laws of the Regents of the University of Colorado (Article 5) and University Administrative Policy Statement (APS) 5060.

A Clinical Teaching Track appointment is a limited term appointment or an “at will” appointment that may or may not be renewed and is not a tenure track appointment. Clinical Teaching Track Faculty are expected to devote the majority of their time to teaching. However, evidence of scholarly/creative work activities and leadership and service activities are essential for promotion.

A tenure track faculty member may request a Clinical Teaching Track appointment before the sixth year of a faculty appointment. Such appointments are subject to approval by the Promotion, Tenure, and Post-Tenure Review Committee, department chair, and Dean. Tenured faculty may also request appointment to the Clinical Teaching Track. New faculty may be recommended for Clinical Teaching Track during the hiring process. Clinical Teaching Track faculty may request a Tenure Track appointment while at the rank of Assistant Professor or Associate Professor, provided a Tenure Track appointment is available. The probationary period will begin at the time of appointment to the Tenure Track. Faculty will be held to the requirements, processes, and procedures of a Tenure Track faculty in the most current Promotion and Tenure document at the time of appointment.

The department chair normally originates the nomination for promotion, in consultation with the appropriate divisional chair. The department chair is responsible for ensuring a departmental review occurs prior to the candidate’s dossier submission. The department chair must assist the candidate in developing a complete dossier for review by the

CUSDM Promotion, Tenure, and Post-Tenure Review Subcommittee via Interfolio (see Appendix A). If a chair refuses to nominate a faculty member who feels qualified, the faculty may self-nominate or may be nominated by another full-time CUSDM faculty member. If a candidate is a department chair, they may be nominated by another full-time CUSDM faculty member of equal or higher academic rank.

The Dean will make the final decision as to whether the individual will be appointed, reappointed, or promoted in the Clinical Teaching Track. The Dean will utilize the recommendations of the departmental chairs, the CUSDM Promotion, Tenure, and Post-Tenure Review Subcommittee and the CUSDM Dean's Review Committee (in the case of an appeal for promotion), and the best interest of the School of Dental Medicine in appointments, reappointments, or promotion.

## **2. CRITERIA FOR APPOINTMENT, REAPPOINTMENT, AND PROMOTION OF FULL-TIME CLINICAL TEACHING TRACK FACULTY MEMBERS, CUSDM**

A. The three basic categories that are used to evaluate these faculty members are:

1. Teaching
2. Scholarly/Creative Work Activities
3. Leadership and Service

In addition, a faculty member is expected to demonstrate professional growth and professional behavior. Professional behavior includes interactions with patients, staff, students, and colleagues.

Candidates for promotion should refer to Appendix A for guidelines on compiling their dossiers for submission to the Promotion, Tenure, and Post-Tenure Review Subcommittee.

*The following written criteria are intended to serve as a guide for the appointment, reappointment and/or promotion of faculty members. A Promotion Criteria Matrix is provided in Appendix B to evaluate teaching, scholarly/creative work activities, and leadership and service activities.*

During promotion review, faculty will be evaluated in the three areas of teaching, scholarly/creative work activities, and leadership and service as 1) Excellent, 2) Meritorious, or 3) Not Meritorious. See chart below.

Clinical Teaching Track Promotion to Associate Professor	
Teaching	Excellent (required)
Scholarly/Creative Work Activities	Evidence of activity
Leadership and Service	At least Meritorious
Clinical Teaching Track Promotion to Professor	
Teaching	Excellent (required)
Scholarly/Creative Work Activities	At least Meritorious
Leadership and Service	Excellent (required)

## **B. Criteria**

### **1. Teaching**

High quality teaching is an important part of the mission of this School. As such, teaching will be evaluated rigorously. The following criteria will be considered, as appropriate, for the faculty member in question regarding a determination of teaching achievement.

- a. Active support of the teaching program of the School and University.
- b. Teaching responsibilities (e.g., contact hours, course directorship, pre-clinic and clinic coverage).
- c. Dedication of the faculty member to teaching. This is demonstrated by knowledge of the subject and by such factors as course organization, innovations in teaching, objectivity and fairness in student evaluation, availability, enthusiasm and ability to stimulate students to enhance their capacity for critical thinking, and evidence of continued mastery of subject areas (e.g. attendance at courses to enhance teaching and clinical abilities, conferences, teaching laboratories, etc.).
- d. Preparation of teaching materials, evidence of teaching skills development (e.g. teaching portfolio), and use of appropriate methods of student evaluation for outcomes-based improvements.
- e. Evaluation by the departmental chair and/or peers of the faculty member's command of the subject and general effectiveness as a teacher in the didactic, clinical, and pre-clinical laboratory setting.
- f. Advising and mentoring of pre-doctoral and graduate students, and residents and post-doctoral fellows.
- g. Student evaluation of the overall effectiveness of the faculty member as a teacher.
- h. Teaching awards, Board certification/recertification, and other significant accomplishments.
- i. Clinical teaching as it relates to being a Practice and/or Team Leader; student advising and mentorship

## **2. Scholarly/Creative Work Activities**

Although Clinical Teaching Track faculty are primarily tasked with teaching and leadership and service-related activities, members of the faculty may be provided with time to use towards scholarly/creative work activities appropriate to their scientific, clinical, and teaching interests, based upon FTE. These may include but are at not limited to:

- a. Publications, including peer-reviewed and non-peer-reviewed manuscripts, books, book chapters, monographs, and electronic publications with peer-reviewed materials receiving greater weight; position of authorship will also be considered. See Appendix C for guidelines on publications and other scholarly activities.
- b. American Dental Education Association (ADEA), International Association for Dental Research (IADR), American Dental Association for Dental, Oral, and Craniofacial Research (AADOOCR) abstracts or specialty organization meeting abstracts, poster presentations, table clinics.
- c. Other products of scholarship as broadly defined, including the scholarship of discovery, education, application or integration in which the candidate is a lead investigator.
- d. Development of intellectual property.
- e. Grants and contracts (sponsored research).
- f. Un-sponsored ongoing, active research, with progress to date.
- g. Lectures and/or presentations regarding scholarly activity at national or international meetings
- h. Clinical scholarship that promotes health care quality and patient safety or that advances the science and practice of health care.
- i. Leadership and/or collaboration in clinical trials.
- j. Presentations or publications on the Scholarship of Teaching and Learning

See Appendix C for minimal thresholds of scholarly/creative work activities for promotion.

### 3. Leadership and service

The other component of typical faculty activities for Clinical Teaching Track faculty is leadership and service, which includes leadership and service to the School, University, the profession, and to the community.

**Leadership and service to the School/University** - This responsibility involves a general contribution to the School/University, over and above teaching and scholarly activity.

The following criteria will be considered:

- a. Participation in the administration and governance of the faculty, the School, the Campus, and the University, including active and productive participation in committees at various levels.
- b. Representation of the School or University to organized dentistry and other professional groups, including participation at these meetings on behalf of the School.
- c. Representation of the School or University to governmental agencies, when formally requested by the Dean or department chairperson.
- d. Helping and encouraging the professional growth of junior faculty members and other colleagues.
- e. Doctoral dissertation and Master's committee participation and/or thesis supervision of students other than those in the program.

**Leadership and service to the Community and Profession** - Leadership and service to the scientific and dental community is very important to this School and will, in fact, be essential to the future prosperity and survival of this and other dental schools. It involves both leadership and service to the dental profession, scientific community, the surrounding region, the nation, and to the people of this State of Colorado.

The following criteria will be considered:

- a. Presenting continuing education programs sponsored by the School.
- b. Leadership and service to the profession at the state, national, and international levels.
- c. Consultative services to other health professionals, hospitals, institutions of higher education, and governmental agencies.

- d. Presenting in continuing education programs not sponsored by the University of Colorado.
- e. Lectures and/or clinical presentations at local and/or state meetings. This criterion involves presentations that represent continuing education.
- f. Presentations on dentistry and related topics to the lay public.
- g. Participation in community dental health education projects.

*NOTE: While service to the community as described in this section is important and casts a favorable light upon the School, faculty members must carefully balance this activity with the University's legitimate expectations of them in teaching, scholarly/creative work activities, and leadership and service to the University.*

### **3. QUALIFICATION FOR CLINICAL TEACHING TRACK FACULTY RANK, PROMOTION, AND REAPPOINTMENT**

#### **A. Criteria for Instructor C/T**

- a. The applicant is expected to have the doctoral dental degree or the Bachelor of Science dental hygiene degree and be well qualified to teach.
- b. Faculty appointed to teach in areas not requiring a doctoral dental degree or dental hygiene degree (e.g. basic or behavioral sciences) should have the appropriate terminal degree in that field.
- c. Factors meriting qualification would include GPA, dental or dental hygiene student class rank, student performance in the specific department, in which the appointment is being made, and collegiality and professionalism. No previous teaching experience is necessary.
- d. Evidence of scholarly/creative work activity is not required for appointment at this level.
- e. Two letters of recommendation, solicited by the appropriate department chair after consultation with the applicant.
- f. Faculty appointed at this level without considerable dental practice experience and/or teaching experience and/or advanced training should anticipate at least two years in this rank before being considered for promotion.

**B. Criteria for Assistant Professor C/T**

- a. Qualification for the rank of Instructor C/T.
- b. An Assistant Professor C/T is expected to have some successful teaching experience in dental education or equivalent.
- c. The appropriate terminal degree as defined in the Glossary of Terms. It is expected that faculty at this level will possess a U.S. doctoral dental degree (or BDS with US advanced training certificate) or at least a master's degree for dental hygienists, and be well qualified to teach.
- d. For specialists, successful completion of advanced education beyond the terminal degree, receiving a certificate or equivalent, or successful completion of an acceptable postgraduate training program not leading to a degree.
- e. For general dentists and dental hygienists, two or more years successful teaching experience in dental or dental hygiene education, or at least two years of full-time private practice experience.
- f. Evidence of leadership and service such as School, University, professional organization committee membership and service to the community.
- g. Three internal letters of recommendation, solicited by the appropriate department chair/nominator after consultation with the applicant.
- h. For promotion to Assistant Professor, the candidate must demonstrate evidence of teaching and leadership and service at least at the level of meritorious achievement (Appendix B). No scholarly/creative work activities are required at this level of promotion.

**C. Criteria for Associate Professor C/T**

- a. Qualification for Assistant Professor C/T, including the appropriate terminal degree as defined in the Glossary of Terms.
- b. Gone through an Interim Review typically two years prior to submission for promotion to Associate Professor.
- c. Demonstrated evidence of scholarly/creative work activities as defined in Appendix B and Appendix C.
- d. Demonstrated evidence of successful teaching at the level of excellent achievement.

- e. Demonstrated meritorious leadership and service. Quality and quantity of leadership and service contributions will, however, not compensate for deficiencies in teaching. Excellence must be demonstrated in teaching.
- f. Typically, five or more total years of full-time experience at the level of assistant professor in appropriate higher educational settings or its equivalent.
- g. Six letters of evaluation. Three of the evaluators should be from faculty within the University of Colorado and three by nationally recognized professionals outside of the University who are experts in the applicant's field. The list of evaluators should be solicited by the appropriate department chair/nominator after consultation with the applicant.

**D. Criteria for Professor C/T**

- s. When a faculty member is evaluated for full professor, the most current primary unit criteria (document) shall apply.
- t. Qualification for associate professor C/T, including the appropriate terminal degree as defined in the Glossary of Terms.
- u. Demonstrated evidence of scholarly/creative work activities of at least meritorious as defined in Appendix B and C.
- v. Demonstrated excellence in teaching. To receive an excellent rating in teaching, a candidate must have demonstrated achievement at the campus, local, and/or national level.
- w. Demonstrated excellence in leadership and service to the School, University, and the community and contributing to the development of junior faculty and the profession.
- x. Faculty at this rank typically have a minimum of five years at the rank of Associate Professor C/T or its equivalent.
- y. Six letters of evaluation. Three of the evaluators should be from faculty within the University of Colorado and three by nationally recognized professionals outside of the University who are experts in the applicant's field. The list of evaluators should be solicited by the appropriate department chair/nominator after consultation with the applicant.



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## **REQUIREMENTS FOR APPOINTMENT, REAPPOINTMENT, AND PROMOTION FOR FULL-TIME RESEARCH TRACK FACULTY IN THE SCHOOL OF DENTAL MEDICINE, UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS**

Faculty members at the School of Dental Medicine whose primary duties are to conduct research may be eligible for appointment and promotion in the Research Track series. Faculty members in the Research Track are expected to devote approximately 80% of their time to research and scholarly activities, 10% to teaching, and 10% to leadership and service. Ranks in the series include: Assistant Research Professor, Associate Research Professor, and Research Professor.

A candidate being considered for promotion within this series is expected to achieve and maintain an “excellent” level of performance in research and meet the criteria outlined in Appendix B and Appendix D as it relates to research and scholarly activity.

Research Track Promotion to Associate Professor	
Teaching	At least Meritorious
Scholarly/Creative Work Activities	Excellent (required)
Leadership and Service	At least Meritorious
Research Track Promotion to Professor	
Teaching	Excellent or Meritorious
Scholarly/Creative Work Activities	Excellent (required)
Leadership and Service	Excellent or Meritorious

\*For promotion to Professor, the candidate must be Excellent in two of the three categories.

Research Track faculty may request a Tenure Track appointment while at the rank of Assistant Professor or Associate Professor, provided there is a Tenure Track position available. The probationary period will begin at the time of appointment to the Tenure Track. Faculty will be held to the requirements, processes, and procedures of a Tenure Track faculty in the most current Promotion and Tenure document at the time of appointment.

### **A. Criteria for Assistant Professor – Research**

- a. An appropriate terminal degree. See Glossary of Terms for terminal degrees.
- b. Successful completion of advanced education/training beyond the terminal degree, such as post-doctoral research, residency, or fellowship.
- c. Documented evidence of interest and abilities in scholarly/creative work activities as demonstrated by research activities and/or publications in peer-reviewed journals, abstracts, etc, as well as some research funding. The quality of the scholarly activities will be considered as well as the quantity.
- d. Evidence of teaching and leadership and service.

- e. Potential for independent and collaborative scholarly/creative work activities. Show evidence of considerable potential for success in research relevant to dental medicine.
- f. Ability to participate in the training of dental students, post-doctoral fellows, residents, and/or graduate students.
- g. Three letters of recommendation from experts in the faculty member's field, solicited by the appropriate department chair/nominator after consultation with the applicant.

## **B. Criteria for Associate Professor – Research**

- a. Qualification for Assistant Professor – Research, including the appropriate terminal degree as defined in the Glossary of Terms.
- b. Typically, five or more total years of full-time experience at the level of Assistant Professor – Research in appropriate higher educational settings or its equivalent, and education/training beyond the terminal degree.
- c. For promotion, each faculty member below the rank of Associate Professor – Research must have completed a comprehensive (Interim) review at least once prior to consideration for promotion and typically two years prior to submission for promotion to Associate Professor. Such evaluation shall include extramural evaluation of the candidate.
- d. Documented evidence of at least meritorious teaching and leadership and service activities.
- e. Accomplishment (at the level of excellent achievement) in scholarly/creative work activities as demonstrated by completed research, research funding, and publications as outlined in Appendix B. The quality and quantity of the scholarly activities, as well as the extent of involvement and the initiative of the individual, are considered. Guidelines for publications are in Appendix D.
- f. Demonstrable evidence that the candidate, by independent effort, has secured an extramurally-funded program of original research or scholarly activity. May be serving as a principal investigator with independent funding or, in recognition of interdisciplinary and collaborative scholarship, as a co-investigator with contributions that are original, essential, and significant will be considered.
- g. The candidate must have participated in the training of post-doctoral fellows, residents, and/or graduate students.
- h. Six letters of evaluation. Three of the evaluators should be from faculty within the University of Colorado and three by nationally recognized professionals outside

of the University who are experts in the applicant's field. The list of evaluators should be solicited by the appropriate department chair/nominator after consultation with the applicant.

### **C. Criteria Professor – Research**

- a. When a faculty member is evaluated for full professor, the most current primary unit criteria shall apply.
- b. Qualification for Associate Professor – Research, including the appropriate terminal degree as defined in the Glossary of Terms.
- c. Typically have a minimum of five years at the rank of Associate Professor – Research.
- d. National/international recognition as demonstrated by major publications, invitations to present at national/international meetings, leadership in select national/international professional organizations, and significant consultantships.
- e. Maintenance of an ongoing extramurally-funded program of research or scholarly activity.
- f. Ongoing teaching accomplishments through continuous work with postdoctoral fellows and graduate students, in addition to pre-doctoral students at the CU School of Dental Medicine.
- g. Demonstrated excellence in scholarly/creative work activities. Promotion criteria are included in Appendix B.
- h. Demonstrated leadership and service to the University and the community, and contributions to the development of junior faculty. Promotion criteria are outlined in Appendix B.
- i. Must be Excellent in two of the three categories (excellence in scholarly/creative work required), and at least meritorious in the third category
- j. Six letters of evaluation. Three of the evaluators should be from faculty within the University of Colorado and three by nationally recognized professionals outside of the University who are experts in the applicant's field. The list of evaluators should be solicited by the appropriate department chair/nominator after consultation with the applicant.

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## **INTERIM EVALUATION PROCEDURES AND GUIDELINES FOR CLINICAL TEACHING TRACK AND RESEARCH TRACK FACULTY**

### **1. INTRODUCTION**

Interim evaluations are intended to facilitate faculty development consistent with the academic needs and goals of the School of Dental Medicine. These procedures apply to all Clinical Teaching Track and Research Track faculty who wish to be considered for promotion.

Upon hire, the department chair and faculty member will determine when the faculty member will go through an interim review (Appendix E). Interim reviews usually occur in the 3<sup>rd</sup> or 4<sup>th</sup> year of employment. Interim reviews should occur typically two years prior to submission for promotion.

### **2. GENERAL GUIDELINES**

- a. Each faculty member below the rank of Associate Professor who wishes to be considered for promotion, shall be evaluated in a comprehensive manner at least once prior to their submission for promotion. The evaluation shall typically take place at least 2 years prior to promotion review. The evaluation shall include extramural evaluation of the candidate if determined necessary by the committee. Each faculty member shall be informed orally and in writing of the results of the evaluation.
- b. Department chairpersons (or the Dean, if the faculty member is a department chairperson) shall advise each faculty member regarding the criteria and standards that the School of Dental Medicine uses in reaching a decision about the candidate's performance, and will provide the criteria and standards in writing to each faculty member well in advance of the interim evaluation period. In addition, department chairpersons (or the Dean, if the faculty member is a department chairperson) will advise faculty members at least once each year, during annual merit evaluations, as to how that individual is progressing toward fulfilling the criteria for promotion.
- c. The criteria for evaluating the performance of faculty shall include those that are used in the School of Dental Medicine for promotion of full-time faculty. The faculty member's accomplishments in teaching, scholarly/creative work activities, and leadership and service shall be the main focus of the evaluation. The general guideline in determining acceptable performances is whether the faculty member's growth and accomplishments

in these three areas are progressing at a level consistent with School of Dental Medicine expectations, showing that the faculty member is on a trajectory for promotion. The balance of accomplishments in the three areas should also be evaluated in light of the goals of the School and department and any official changes in job assignment, e.g., major increases or decreases in administrative, teaching, or research duties.

- d. External evidence of a faculty member's performance should be incorporated in the evaluation. This evidence should include, but is not limited to, national awards, honors, offices in national or international academic professional organizations, editorial functions for scholarly journals, publications in refereed journals and papers presented at regional, national, or international meetings.

### **3. PROCEDURES**

- a. The chairperson of each department (or the Dean, if the faculty member is a department chairperson) is responsible for annual evaluations of the faculty member. These evaluations should provide faculty with feedback in performance and progress in meeting standards for promotion.
- b. Faculty members and their department chairpersons (or the Dean, if the faculty member is a department chairperson) will be notified by the Dean in the Fall of the academic year in which the formal interim evaluation is to be conducted.
- c. The department chairperson (or the Dean, if the faculty member is a department chairperson) shall counsel the faculty member concerning updating their vita (see Appendix F) and identifying supporting documentation to be submitted for the interim evaluation. This includes identification of peers to evaluate the faculty member's performance if the committee deems it necessary.
- d. The faculty member, in consultation with the department chair (or the Dean, if the faculty member is a department chairperson), shall compile all documents to be submitted for the interim evaluation and forward them to the Office of Faculty Affairs through Interfolio.

*An electronic version should be submitted to the CUSDM Office of Faculty Affairs through Interfolio no later than October 15th. The documentation must include at least the following:*

- (1) Current curriculum vitae as outlined in Appendix F.
- (2) Letter of evaluation from department to include date and outcome of departmental review, and division chairperson, when applicable
- (3) At least three internal evaluation letters

- (4) A list of three authorities in the faculty member's field outside the Anschutz Medical Campus to be used by the committee in the event it determines that external input is required
  - (5) Student teaching evaluations or summary of student teaching evaluations prepared by the department chair or division chairperson.
  - (6) Completed Peer Evaluation of teaching. See CUSDM Peer Evaluation Policy.
  - (7) At least one additional means of evaluation of teaching. Examples include, but are not limited to instructional materials, curriculum development efforts, professional development and innovations related to teaching, teaching awards, grants for teaching and education improvements, documented efforts to create inclusive and equitable educational experiences for students, scholarly research and presentation or publication on teaching and learning. See APS 1009 for additional examples.
  - (8) Copies of all publications since appointment to current position.
  - (9) Summary of grant submissions and grant awards since appointment to current position.
  - (10) Other materials deemed appropriate for the committee to evaluate progress toward satisfying all promotion and/or tenure criteria
- e. The Promotion, Tenure and Post-Tenure Review Subcommittee conducts a comprehensive evaluation of the faculty member's performance and accomplishments and progress toward promotion and/or tenure.
  - f. The written summary and the dossier are forwarded to the CUSDM Office of Faculty Affairs who then forwards the committee letter to the faculty member, the department chairperson, CUSDM Human Resources, and the dean.
  - g. The department chairperson (or the Dean, if the faculty member is a department chairperson) and faculty member meet to discuss the results of the evaluation.
  - h. If requested, the faculty member and department chairperson (or the Dean, if the faculty member is a department chairperson) can meet with the chairpersons of the Promotion, Tenure, and Post-Tenure Review Subcommittee to discuss the evaluation letter and to seek clarification.

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## PROMOTION REVIEW PROCESS FOR CLINICAL TEACHING TRACK AND RESEARCH TRACK FACULTY

- a. Prior to the submission of a dossier to the Promotion, Tenure, and Post-Tenure Review Committee, an internal department review must occur. The Department Chair, an internal department representative, and an external department representative must review the candidate's dossier to determine if the candidate meets the criteria for promotion. The dossier should only be forwarded to the Promotion, Tenure, and Post-Tenure Review Committee after the Department Review has concluded.

It is the Department Chair's responsibility to assist the candidate in assembling their dossier, as well as convening and conducting the Department Review.

- b. Typically, faculty should submit a dossier after they have completed at least five (5) full-time years at the rank of Assistant or Associate Professor. Assistant Professors seeking promotion to Associate Professor must have gone through an Interim Review, typically two years prior to submission for promotion. The candidate and department chair should be aware of the timeline for submission.
- c. Candidates seeking promotion to Associate Professor and Professor should refer to the Guidelines for the Evaluation of Publications, Appendix C for Clinical Teaching Track and Appendix D for Research Track
- d. Curriculum Vitae should be formatted as outlined in Appendix F of this document.
- e. Dossiers should be compiled as outlined in Appendix A of this document.
- f. An electronic copy of the candidate's dossier should be submitted to the Office of Faculty Affairs by October 15<sup>th</sup> through Interfolio.
- g. The Promotion, Tenure, and Post-Tenure Review Committee will evaluate the candidate's dossier and, based on a majority vote, will make a consensus recommendation to the dean. If the candidate disagrees with the Committee's recommendation, the candidate can appeal the decision to the Dean's Review Committee. The Dean will have the final decision to promote or not to promote the candidate. The Dean's Review Committee reviews the dossier and the documents from each stage of review and votes on a recommendation in the event of an appeal.

- h. For promotion to Clinical Teaching Track Associate Professor, the Promotion, Tenure, and Post-Tenure Review Committee will recommend or not recommend to the dean based on a vote of excellence in teaching as outlined in Appendix B and at least meritorious in scholarly/creative work activities (and Appendix C) and leadership and service. Separate voting totals will be recorded for each of the three categories (e.g., four (4) voted meritorious for teaching and three (3) non-meritorious, etc.), as well as an overall vote to promote or not promote. Recommendations for each candidate must be communicated to the Dean in a summary letter.
- i. For promotion to Clinical Teaching Track Professor, the Promotion, Tenure, and Post-Tenure Review Committee will recommend or not recommend to the Dean based on a vote of excellence in both teaching and leadership and service with demonstrated scholarly/creative work activities at least at the level of meritorious as outlined in Appendix B and Appendix E
- j. For promotion to Research Track Associate Professor, the Promotion, Tenure, and Post-Tenure Review Committee will recommend or not recommend based on a vote of excellence in scholarly/creative work activities as outlined in Appendix B and Appendix D, and at least meritorious in teaching and leadership and service. Separate voting totals will be recorded for each of the three categories (e.g., four (4) voted meritorious for teaching and three (3) voted non-meritorious, etc.), as well as an overall vote to promote or not promote. Recommendations for each candidate must be communicated to the Dean in a summary letter.
- k. For promotion to Research Track Professor, the committee will recommend or not recommend based on a vote of excellent in scholarly/creative work, and excellent in either teaching or leadership and service, with at least meritorious in the other category as outlined in Appendix B and Appendix D.



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## **REQUIREMENTS FOR APPOINTMENT AND PROMOTION FOR CLINICAL TRACK FACULTY (PART-TIME FACULTY, VOLUNTEER FACULTY AND PRECEPTORS) IN THE SCHOOL OF DENTAL MEDICINE, UNIVERSITY OF COLORADO**

### **1. INTRODUCTION**

The purpose of this document is to provide a written reference for the procedures and requirements for appointment or promotion of Clinical Track (part-time, volunteer and preceptor) faculty within the University of Colorado School of Dental Medicine (CUSDM). Clinical Track faculty perform teaching or clinical services on a part-time (less than 0.5 FTE) or volunteer basis. Those who maintain an independent health care practice must carry their own malpractice insurance, which covers both their university work as well as their private practice. Additional references that are also applicable are the sections which apply to faculty appointments and rank in the Laws of the Regents of the University of Colorado and University Administrative Policy Statement (APS) 5060.

The Division Chair originates the nomination for a faculty member within a division for appointment, reappointment, and or promotion, and sends that nomination to the Department Chair. The Department Chair gathers information, letters of recommendation, curriculum vitae, and other required credentialing documents to support the individual's appointment or promotion to the faculty rank outlined below, and forwards the nomination to the CUSDM Office of Faculty Affairs.

**Promotion of Clinical Track (part-time, volunteer, and preceptor) faculty follow the same review process and cycle as outlined for full-time faculty.**

### **3 CRITERIA FOR APPOINTMENT OF PART-TIME FACULTY, VOLUNTEER FACULTY AND PRECEPTOR MEMBERS, CUSDM**

#### **A. Clinical Instructor**

In order to be appointed at the Clinical Instructor – Clinical Track level at the University of Colorado School of Dental Medicine, an individual must have received a terminal professional degree for dentists (see Glossary of Terms) or a Bachelor's of Dental Hygiene for hygienists. Two letters of recommendation will be required. One of the letters must be from a full-time faculty member within the School and the other from the Department Chair of the nominating department. The candidate will be evaluated by the Promotion, Tenure, and Post-tenure Subcommittee and the Dean's Review Committee.

#### **B. Clinical Assistant Professor**

In order to be appointed at or promoted to the Clinical Assistant Professor level at the University of Colorado School of Dental Medicine, an individual must have received a

terminal professional degree for dentists and at least a master's degree for dental hygienists (see Glossary of Terms).

In addition, specialists must have completed appropriate specialty training in the discipline for which they are being considered. General dentists and dental hygienists must have three years of full-time equivalent experience for appointment/promotion. For appointment, two letters of recommendation are required: one from a full-time faculty member within the School of Dental Medicine and one from the Department Chair of the nominating department.

For promotion, three letters are required and must be from within the School of Dental Medicine.

The candidate must be evaluated by the Promotion, Tenure, and Post-Tenure Review Subcommittee and the Dean's Review Committee as at least meritorious in teaching and leadership and service.

#### **C. Clinical Associate Professor**

In order to be appointed at or promoted to the Clinical Associate Professor level at the University of Colorado School of Dental Medicine, an individual must have a terminal professional degree for dentists and at least a master's degree for dental hygienists (see Glossary of Terms), along with three letters of recommendation.

Two letters of recommendation must be from full-time faculty members within the School of Dental Medicine, including the Department Chair; one letter of recommendation may come from an individual outside the School of Dental Medicine. In addition, candidates must have seven additional years of clinical experience, research experience, additional training, or teaching experience.

For appointment and promotion to this level, teaching must be at the level of excellence and leadership and service must be at the level of at least meritorious. Must have evidence of scholarly/creative work activities.

The candidate must be evaluated by the Promotion, Tenure, and Post-Tenure Review Subcommittee and Dean's Review Committee.

#### **D. Clinical Professor**

In order to be appointed at or promoted to the Clinical Professor level at the University of Colorado School of Dental Medicine, an individual must have a terminal professional degree or its equivalent for a dentist and at least a master's degree for dental hygienists (see Glossary of Terms).

For consideration of the nominee, five letters of recommendation must be submitted. Two letters must come from faculty members within the School of Dental Medicine, including the Department Chair, the other three may be from outside the School of Dental Medicine.

In addition, the individual must have had ten additional years of experience, appropriate clinical experience, research experience, additional training or teaching experience, and must have attained national recognition in their field.

Teaching, and leadership and service must be at the level of excellent, and scholarly/creative work activities must be at the level of at least meritorious.

The candidate must be evaluated by the Promotion, Tenure, and Post-Tenure Review Subcommittee and Dean's Review Committee.

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## **REQUIREMENTS FOR PROFESSOR EMERITUS IN THE SCHOOL OF DENTAL MEDICINE, UNIVERSITY OF COLORADO**

### **1. INTRODUCTION**

The title “emeritus” should be bestowed only on those retired faculty members whose contributions warrant it. The award should not be automatic but rather bestowed only on the basis of merit to preserve the significance of the title.

Any faculty member may be allowed, upon retirement and in accordance with the campus-defined process and approval by the chancellor, to retain his or her title with the description “emeritus/emerita.”

### **2. CRITERIA FOR APPOINTMENT OF EMERITUS, CUSDM**

The faculty member must be retired from a full-time, faculty position at the University of Colorado School of Dental Medicine and had a distinguished career.

#### **PROCEDURE:**

1. A faculty member’s department chair may nominate a retired or retiring faculty member for the designation, “emeritus.” (See Campus Administrative Policy 1011).
2. Supporting documentation required is a current curriculum vitae, a one-page summary of the faculty member’s accomplishments during his time at the University (to include promotion times, teaching honors and awards, etc.) and the last three years of annual merit evaluations.
3. The nomination will be considered sequentially by the Promotion, Tenure, and Post-Tenure Review Subcommittee, and, by the Dean’s Review Committee, who will make their recommendation to the Dean. If the Dean concurs with the awarding of the emeritus status, the Dean will submit the recommendation to the Executive Vice Chancellor of Academic and Student Affairs for consideration for a recommendation of approval before forwarding to the Chancellor for consideration.
4. The effective date may be no earlier than the day following the faculty member’s retirement date.

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## JOINT APPOINTMENTS AT THE SCHOOL OF DENTAL MEDICINE, UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS

When joint or split appointments are made, the affected faculty member must be informed in writing, prior to the appointment, of:

1. The duties and expectations as agreed upon by all Schools/Departments involved.
4. Which School/Department will be responsible for such personnel recommendations as tenure, reappointment, promotion and salary.

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## FACULTY TITLES PER THE UNIVERSITY OF COLORADO SYSTEM

For a list of current faculty titles, please refer to [APS 5060 Appendix A](#)

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## RELATED POLICIES, PROCEDURES, GUIDELINES, AND OTHER RESOURCES

11. Board of Regents Policy 5.C (<https://www.cu.edu/regents/policy/5>)
12. APS 5060: Faculty Appointments (<https://www.cu.edu/ope/aps/5060>)
13. [APS 5008: Faculty Performance Evaluation \(https://www.cu.edu/ope/aps/5008\)](https://www.cu.edu/ope/aps/5008)
14. University of Colorado School of Dental Medicine Faculty Governance Document

## **APPENDIX A**

### **ORGANIZATION AND REQUIREMENT OF EVALUATION DOSSIER FOR PROMOTION FOR CLINICAL TRACK AND RESEARCH TRACK FACULTY**

Prior to the submission of a dossier to the Promotion, Tenure, and Post-Tenure Review Committee, an internal department review must occur. The Department Chair, an internal department representative, and an external department representative must review the candidate's dossier to determine if the candidate meets the criteria for promotion. The dossier should only be forwarded to the Promotion, Tenure, and Post-Tenure Review Committee after the Department Review has concluded.

It is the Department Chair's responsibility to assist the candidate in assembling their dossier, as well as convening and conducting the Department Review.

**Further instructions can be found in Interfolio.**

1. Curriculum Vitae- complete document in University of Colorado School of Dental Medicine format (Appendix F)
2. Letters of Recommendation
  - a. Internal: three letters from individuals located on the Anschutz Medical Campus
  - b. External: three letters from individuals outside of the Anschutz Medical Campus
3. Teaching (Sequence with most recent first)
  - a. Teaching portfolio
    - i. Professional autobiography- concise review of professional and teaching experience (This also includes non-didactic teaching to include post-doctoral fellow mentoring.)
    - ii. Statement of teaching philosophy
    - iii. Statement of teaching advancements and accomplishments (teaching awards, classroom innovation)
    - iv. Evidence of student performance in your area (acceptance into residency programs, obtaining a post-doctoral position, evidence of advancement in field of study/research, student awards)
    - v. Teaching materials developed
    - vi. Teaching responsibilities (a short description of each class with contact hours)
  - b. Peer and Office of Education teaching evaluations
  - c. Student teaching evaluations
  - d. Evidence of professional growth in education
    - i. Continuing education in education pedagogy- attended last 5 years
    - ii. Continuing education in your profession- attended last 5 years
    - iii. Research presentations/publications in education
    - iv. Board certification status for advanced trained dentists
    - v. Obtaining an education degree (i.e. Masters in Education)

4. Scholarly Activity (Sequence with most recent first)
  - a. Summary of scholarly activity
  - b. Publication list followed by a copy of publications.
  - c. Grants- list of funded and unfunded grants with copies of Notice of Awards.  
Committees may request copy of entire grant for additional information. Include dates submitted and proposed lifetime of award.
  - d. Scholarly presentations
5. Leadership and service (Sequence with most recent first)
  - a. Summary of leadership and service activity
  - b. Committee membership and chairs- includes faculty governance and organized dentistry leadership and service
    - i. National/ International
    - ii. State
    - iii. University
    - iv. Campus
    - v. School of Dental Medicine
    - vi. Departmental
  - c. Patient care activities- university associated only (Dental Faculty Practice, UC Health)
    - i. Consultantships or internal/external advisory boardsScholarly Activity (Sequence with most recent first)
  - d. Summary of scholarly activity
  - e. Publication list followed by a copy of publications.
  - f. Grants- list of funded and unfunded grants with copies of Notice of Awards.  
Committees may request copy of entire grant for additional information. Include dates submitted and proposed lifetime of award.
  - g. Scholarly presentations
6. Leadership and service (Sequence with most recent first)
  - a. Summary of leadership and service activity
  - b. Committee membership and chairs- includes faculty governance and organized dentistry leadership and service
    - i. National/ International
    - ii. State
    - iii. University
    - iv. Campus
    - v. School of Dental Medicine
    - vi. Departmental

- c. Patient care activities- university associated only (Dental Faculty Practice, UC Health)
- d. Consultantships or internal/external advisory boards



## APPENDIX B

### PROMOTION CRITERIA MATRIX UNIVERSITY OF COLORADO SCHOOL OF DENTAL MEDICINE (Clinical Teaching/Research Tracks)

**Note:** The following is intended to present examples of various levels of accomplishment in the areas of teaching, scholarly activity/creative work, and leadership and service. It is not exclusionary, but is intended to assist faculty, department chairs, and promotion committees in matching candidates' accomplishments to the promotion criteria. Moreover, areas frequently overlap in practice, although they are presented as distinct entities here. It should also be noted that the matrix specifies just two categories, meritorious and excellent. Professors will need to achieve excellence in a **significant number** of criteria relevant to their academic profile. Associate professors will have met fewer of these criteria or in not as great depth. The promotion process is meant to describe and reward continued professional growth and achievement. Performance that does not meet the requirements/most of the criteria for meritorious will be deemed not meritorious.

TEACHING	
Meritorious	Excellent
Active participation in teaching activities of the department, school, campus or university, including two or more of the following: presenting a series of lectures covering one or more topics; coordinating a course; acting as a primary instructor in a course; advising or mentoring students, residents, post-doctoral fellows or faculty; attending on an inpatient or outpatient service; organizing or facilitating a seminar series, journal clubs or laboratory exercises; participating in CE courses.	Multiple course directorships or co-directorship and/or participation across the curriculum; development of innovative teaching methods, such as educational websites, simulations, packaged courses or workshops. Invitations to present courses outside of primary department.
Meritorious teaching evaluations from students and peers. Expectation of at least a 4.0 on average to be meritorious.	Consistently receives outstanding teaching evaluations.
Developing/revising assignments or lectures that incorporate diverse scholarly perspectives, concepts, readings, and/or scholarship and/or representing diverse authors, as relevant to the course material.	Designing/revising a course that incorporates diverse scholarly perspectives, concepts, readings, and/or scholarship and/or representing diverse authors, as relevant to the course material.
Participation in advanced faculty development programs and/or CE courses that enhance the faculty members teaching or pedagogy.	Completion of advanced faculty development programs that result in a certificate or degree in education, with evidence that the faculty member has applied these new skills or new knowledge to improve their teaching or pedagogy.
Participation in workshops or training on unconscious bias, diversity and inclusion, or other topics intended to improve classroom culture, teaching or mentorship.	Receipt of honors or awards by students/mentees, including students from underrepresented groups.  Developing teaching resources for faculty on diversity and inclusion, and health equity.
Self-improvement activities (for example, participation in workshops or courses that are designed to improve teaching or mentoring effectiveness).	Development of mentoring programs that focus on career development or academic promotion of students, residents, fellows or faculty.

<b>TEACHING</b> Continued	
<b>Meritorious</b>	<b>Excellent</b>
Participation in mentoring programs for students, fellows, residents, or other trainees.	Recognition as an outstanding and influential teacher and/or role model for students, fellows, residents, or other trainees (teaching awards, hooding, mentoring awards).
Self-improvement activities (for example, participation in workshops or courses that are designed to improve teaching and mentoring effectiveness).	Development of mentoring programs that focus on career development or academic promotion of students, residents, fellows, or faculty.
Doctoral Dissertation and Master's committee participation and/or thesis committee member.	Chairing a Doctoral Dissertation or Master's committee and/or thesis committee (not primary advisor).
Develops new or significantly revises educational materials on a consistent basis.	Creates new courses or curriculum that incorporates innovative technologies.
	Evidence of positive impact on teaching in the discipline, such as citations of publications or presentations related to teaching, or authorship of a critically reviewed textbook or other educational materials that have been widely adopted by others.
	Consistent participation in national educational activities (for example, residency review committees, programs sponsored by professional organizations, re-certification courses or workshops).
	Institutional, national, or international teaching awards that recognize contributions to the discipline (e.g., pedagogical innovation, curricular redesign)
	Evidence of continued growth and mastery of subject areas (e.g., attendance at courses to enhance teaching and clinical abilities, conference, teaching laboratories, etc.).
	Record of successful mentorship of students, residents, fellows or other faculty, as measured by: letters of support from mentees; publications, presentations, grants, awards or other evidence of mentees' academic success; evidence that mentees have pursued outstanding careers.
	Development of innovative courses, innovative delivery of course content, problem-based learning cases, laboratory exercises or other instructional materials.
	Published research and/or externally funded research designed to improve pedagogy.

<b>SCHOLARLY/CREATIVE WORK</b>	
<b>Meritorious</b>	<b>Excellent</b>
Abstracts, poster presentations, table clinics at national meetings (ADEA, AADOCR, IADR, etc.), invited research seminars at this or other institutions. Service as an ad hoc member on study section.	A national or international reputation, as evidenced by: external letters of reference; invitations to present at national or international meetings; invitations to write reviews or chapters, or to provide unique expertise as a collaborator on a research project; visiting professorships; service as a regular member on study sections; organization of national meetings; service as a national consultant or on editorial boards of journals.
Authorship of papers in peer-reviewed journals that demonstrate the ability to generate and test hypotheses.	An on-going, peer-reviewed publication record as outlined in Appendix D for Research Track faculty.
A principal and sustained role in the management of programs with external funding, to include NIH, industry funding, or foundation funding.  Management of internal grant funding.	Principal investigator status on competitive peer-reviewed research grants (for example: R03 or R21 awards or mentored K08 or K23 awards from NIH or private foundations for associate professors; R01, P0, HRSA awards, or other independent awards for professors).  Ongoing record of peer-reviewed grant or contract funding.  Secures funding to support educational initiatives related to diversity and inclusion, and health equity.
Published articles on health care professional education with emphasis on hypothesis-driven research.	A continuous record of publications in health professional education and/or educational initiatives related to diversity and inclusion and health equity, including citation record.
Participation in the design, conduct, and publication of clinical and epidemiological research, including clinical trials.	Leadership in the design, conduct, and publication of clinical and epidemiological research, including clinical trials.
Development of patent applications for discoveries.	Awarded patents for discoveries.
	Principal Investigator (PI), Co-Investigator (Co-I) or Key Personnel status on grants or contracts.
	Member of review section or editorial board.
	Contributions to books, journals, or clinical information systems.
	Demonstrated evidence of significant independent intellectual contributions to successful research programs.
	Other evidence of clinical and epidemiological scholarship (for example, research, grants, publications or national presentations) that promote health care quality and patient safety or that advance the science and practice of health care quality improvement; or influence policy, direction or a field of research in diversity and inclusion, and health equity.
	Secures funding, or partners on one or more research projects with community organizations, for research that addresses diversity and inclusion, and health equity.

<b>LEADERSHIP/SERVICE</b>	
<b>Meritorious</b>	<b>Excellent</b>
Active leadership and service on committees or task forces within the program, division, department, school, campus or university.	Appointment to responsible positions within the institution such as chair of a committee; faculty officer; program director; academic clinical coordinator; membership on major decision-making Anschutz Medical Campus committees.
Leadership and service to local, state, national or international organizations through education, consultation or other roles.	Leadership and service as an officer or committee chair in professional or scientific organizations.
Presenting continuing education at the school and local level.	Presenting continuing education lectures and/or clinical presentations at state, national, or international meetings.
Participating in a task force for a professional or scientific association or on a state or regional committee that aims to support or promote diversity and inclusion, and health equity.	Chairing a task force for a professional or scientific association or serving on a national committee related to diversity and inclusion, and health equity.
Participation in community dental health education projects.	Election to responsible positions dealing with health care issues at the local, state, regional, national or international levels.
Mentoring and encouraging the professional growth of junior faculty members.	Chairing a junior faculty mentoring committee or development of a faculty-mentoring program.
Participation in community dental health education projects.	Leading community dental health education projects.
Presentations on dentistry and related topics to the lay public.	Election to responsible positions dealing with health care issues at the local, state, regional, national or international levels.
	Participation on NIH study section, grant reviewer, and external program evaluation.
	Leadership and service awards from an area of the University or from a local, national, or international organization (civic, scientific and/or professional).
	Leadership and service on editorial boards of professional or scientific journals.
	Consultative services to other health professionals, hospitals, institutions of higher education, and governmental agencies.
	Serving as the Director of or on the Executive Board of Dental Faculty Practice

**APPENDIX C**  
**GUIDELINES FOR THE EVALUATION OF SCHOLARLY ACTIVITIES FOR**  
**CLINICAL TEACHING TRACK FACULTY**

1. For Promotion to Associate Professor: Listed below are examples that constitute evidence of scholarly activity for faculty members who wish to be promoted to this rank.
  - E. Publications: Examples of appropriate publications include:
    1. Original research articles
    2. Review articles
    3. Extensive case history/technique articles
    4. Chapters in professional books
    5. Professional book author or editorship
    6. MedEd Portal
    7. Patent applications
    8. Critically Appraised Topics (CATs) – peer-reviewed and published
    9. Letters to the editor are not appropriate publications for this criterion.
  - F. Published abstracts
  - G. Oral or poster presentations at scientific meetings, other universities or companies
  - H. NIH Study Section or similar grant review roles
  - I. Letter to the Editor
  - J. Submission of University assigned patent applications
  - K. Internally or externally funded grants or contracts as principal investigator or other key personnel roles
  - L. Other activities demonstrating scholarship
2. For Promotion to Professor: Listed below are criteria that constitute the minimum threshold (meritorious) of scholarly activity to be met by faculty members who wish to be promoted to this rank.
  - A. Publications: Evidence of appropriate additional publications since being promoted to Associate Professor include
    - a. Original research articles
    - b. Review articles
    - c. Extensive case history/technique articles
    - d. Chapters in professional books
    - e. Professional book author or editorship
    - f. Patent applications

- B. Published abstracts
- C. Oral or poster presentations at scientific meetings, other universities or companies
- D. NIH Study Section or similar grant review roles
- E. Recognition as refereed journal reviewer, editorial board member or editor
- F. Submission, awarding or licensing of University assigned patents
- G. Letter to the Editor
- H. Internally or externally funded grants or contracts as principal investigator or other key personnel roles
- I. Other activities demonstrating scholarship

**APPENDIX D**  
**GUIDELINES FOR THE EVALUATION OF SCHOLARLY ACTIVITIES**  
**RESEARCH TRACK FACULTY**

1. For Associate Professor: Listed below are criteria that constitute the typical threshold of scholarly activity to be met by faculty members who wish to be promoted to this rank.

- A. Publications: Examples of appropriate publications include:

- i. Original research articles
    - ii. Review articles
    - iii. Extensive case history/technique articles
    - iv. Chapters in professional books
    - v. Professional book author or editorship
    - vi. Submission of University assigned patents

Evidence of peer-reviewed publication averaging at least one paper for each year since appointment date.

- B. Published abstracts
  - C. Presentations at scientific meetings, other universities or companies
  - D. NIH Study Section or similar grant reviewer roles
  - E. Recognition as refereed journal reviewer
  - F. Submission of University assigned patent applications
  - G. Externally funded grants or contracts as principal investigator or other key personnel roles
  - H. Other activities demonstrating scholarship

7. For Professor: Listed below are criteria that constitute the typical threshold of scholarly activity to be met by faculty members who wish to be promoted to this rank. Faculty must show a continuous publication record from the time they are promoted to Associate Professor to the time they submit for promotion to Professor.

- A. Publications: Examples of appropriate publications include:

- i. Original research articles
    - ii. Review articles
    - iii. Extensive case history/technique articles
    - iv. Chapters in professional books
    - v. Professional book author or editorship
    - vi. Patent applications

- B. Published abstracts
  - C. Presentations at scientific meetings, other universities or companies

- D. NIH Study Section or similar grant reviewer roles
- E. Recognition as refereed journal reviewer, editorial board member or editor
- F. Submission, awarding or licensing of University assigned patents
- G. Externally funded grants or contracts as principal investigator or other key personnel roles
- H. Other activities demonstrating scholarship

Faculty member must have demonstrated continued productivity of excellence for preceding 5 years as Associate Professor.

In light of the increasing importance of interdisciplinary team-based research, the value of a faculty's meaningful and well-documented contributions to productive "Team Science" activities will be fully considered. However, it should be recognized that this evaluation will occur in conjunction with that of the more traditional individual faculty member achievements (i.e. first/senior authorships, funding as a principal investigator, invitations for national/international presentations, etc.).



## APPENDIX E

### SAMPLE OF AN INTERIM EVALUATION NOTIFICATION FORM

#### UNIVERSITY OF COLORADO SCHOOL OF DENTAL MEDICINE FACULTY INTERIM EVALUATION NOTIFICATION

FACULTY NAME (PRINT): \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

DATE OF INITIAL FULL-TIME APPOINTMENT: \_\_\_\_\_

CREDIT TOWARD PROBATIONARY PERIOD (if applicable): \_\_\_\_\_ Years

Interim evaluations are intended to facilitate faculty development, consistent with the academic needs and goals of the School of Dental Medicine. Interim evaluations generally occur in the third or fourth year of a faculty member's full-time appointment. There is a two-year period between the Interim Review and review for promotion. The faculty member and the department chairperson jointly determine which year the interim evaluation will be conducted, and state the agreed-upon year in writing.

**THE INTERIM EVALUATION FOR THE ABOVE-NAMED FACULTY MEMBER WILL BE SUBMITTED IN OCTOBER OF \_\_\_\_\_**

#### CONCURRENCE:

\_\_\_\_\_  
Faculty Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Chairperson Signature  
(or Dean, if applicable)

\_\_\_\_\_  
Date

The original notification form is maintained by the departmental office (or Dean's office, if the faculty member is a department chairperson), a copy is maintained by the faculty member, and a copy is forwarded to the Office of Faculty Affairs.

**APPENDIX F**  
**CU SDM CURRICULUM VITAE FORMAT**

**FULL NAME:**

**CURRENT DATE:**

**PERSONAL HISTORY**

**Office Address:**

**Phone:**

**E-mail:**

**Fax:**

**Home Address:** *(Optional)*

**Phone:** *(Optional)*

**EDUCATION:**

*(List highest earned degree first)*

*(Include Institution and Location; Degree; Date(s) Attended; Degree Major)*

*(Include Postdoctoral Training [Residency/Fellowship]; Graduate School; Dental School; College)*

Examples

1998 - 2001      Doctor of Dental Medicine  
Dental College of Georgia  
Augusta University  
Augusta, Georgia

1998 - 2004      Ph.D. in Oral Immunology  
University of Texas San Antonio  
San Antonio, Texas  
Dissertation Advisor: Robert E. Jones, Ph.D.  
Dissertation Title: Salivary proteins and aggressive caries

**SPECIALTY BOARDS:**

*(List board eligibility if not boarded)*

**LICENSURE:**

**PROFESSIONAL EXPERIENCE:**

*(Reverse chronological order)*

*(Include Institution/Organization, Department/Division, Location, Title(s)/ Position(s), and date(s) each was held)*

*(Optional: Separate into categories such as Academic Appointments, Administrative Appointments; Hospital Appointments; Private Practice Experiences; and Military Leadership and service if dental related)*

**HONORS:**

## **1. TEACHING ACTIVITIES**

### **Teaching Responsibilities:**

*(Reverse Chronological order)*

*(Include: 1) Courses directed (brief summary of major responsibilities 2) number of hours actually taught)*

### **Course Participation:**

*(Include number of hours the individual actually taught)*

### **Teaching Materials Developed:**

### **Teaching Awards:**

### **Mentoring Activities:**

**Summer Research Students (Dental only)**

**Graduate Students (Ph.D. or Masters)**

**Post-doctoral Fellows**

## **2. SCHOLARLY/CREATIVE WORK ACTIVITIES**

### **Current Research:**

### **Financial Resources/ Grants & Contracts:**

*(Reverse Chronological Order)*

*(Include Project Title, Funding Agency, Date(s) of Project, PI or CO-PI, and Total Direct and Indirect Costs broken out (\$))*

*(Separate by Active Research Support and Completed Research Support)*

*(Separate into categories such as School of Dental Medicine, University*

*Colorado Anschutz Medical Campus, Federal/State, Professional Associations)*

### **Publications:**

*(Published and In Press)*

*(Reverse chronological order)*

*(Formatting examples attached)*

### **Periodicals:**

*(Published and In Press)*

*(Reverse chronological order)*

*(Formatting examples attached)*

### **Book Chapters:**

*(Published and In Press)*

*(Reverse chronological order)*

*(Formatting examples attached)*

### **Abstracts:**

*(Indicate those that were presented)*

### **Theses Directed:**

*(Include Date, Title, Type, and Student's Name)*

### 3. LEADERSHIP AND SERVICE ACTIVITIES

#### **Invited and Selected Presentations:**

*(Reverse chronological order)*

*(Include papers and table clinics; do not include presentations that also appear as published abstracts)*

*(Separate into categories such as Local, State, National/International)*

#### **Continuing Education Courses Presented:**

*(Reverse Chronological order except when same course is given in multiple times; then list under first time taught and include other dates given)*

*(Include Date(s), Course Title, Number of Hours, Location)*

#### **Administrative Positions at the School:**

##### **Governance Positions**

##### **Committee Appointments:**

*(Reverse chronological order)*

##### **School of Dental Medicine**

**Date(s)**                      **Committee Name**

**Date(s)**                      **Offices Held**

##### **University**

**Date(s)**                      **Committee Name**

**Date(s)**                      **Offices Held**

##### **State**

**Date(s)**                      **Committee Name**

**Date(s)**                      **Offices Held**

##### **National/International**

**Date(s)**                      **Committee Name**

**Date(s)**                      **Offices Held**

##### **Society/Professional Organizations:**

*(Reverse Chronological Order)*

*(Include Date(s), Society/Organization Name, Offices Held, and Date(s) held)*

##### **Grant Review Panels:**

**(Reverse chronological order)**

**(Include Date(s), Name of study section or panel and leadership position if any)**

##### **Editorial Boards of Journals:**

*(Reverse chronological order)*

*(Include position(s) held, and date(s))*

**Journal Peer Review**

*(List only Journal titles; no dates)*

**Textbook Peer Review:**

**Consultant Positions:**

*(Reverse chronological order)*

## EXAMPLES

### Reference Format

A. Journals (list all authors if six or less, otherwise list only first three and add et al.)

5. Standard Reference

Gibson GB, Richardson AS, Patton RE, Waldman R. A clinical evaluation of occlusal composite and amalgam restorations: one- and two- year results. J Am Dent Assoc 1982; 104:335-37.

6. Corporate Author

Federation Dentaire International. Technical Report No. 28. Guidelines for antibiotic prophylaxis of infective endocarditis for dental patients with cardiovascular disease. Int Dent J 1987;37:235.

B. Books and Monographs

9. Personal Author(s)

Tullman JJ, Redding SW. Systemic disease in dental treatment. St. Louis: The CV Mosby Co; 1983:1-5.

10. Chapters in a Book

Johns R. Restorative needs and methods. In: Cohen B, Thomson H, eds. Dental care for the elderly. London: William Heinemann Medical Books; 1986: 142-77.

11. Agency Publication

Miller AJ, Brunelle JA, Carlos JP, Brown LJ, Loe H. Oral health of United States adults. Bethesda, Maryland: National Institute of Dental Research, 1987; NIH publication no. 87-2868.

12. Dissertation or Thesis

Author. Title. [Thesis]. City, State: Institution, date, #p.

### GRANTS, CONTRACTS, AND PATENTS

Date    Agency & Amount,    Title

## **Miscellaneous**

## Department/Program/Campus Contact Information

<b>Contact Information List</b>		
<b><u>Departments/ Programs/Areas</u></b>		
	<b>Contact Person</b>	<b>Extension</b>
Community Dentistry (ACTS Program)	Karen Tawara-Jones	4-7030
Continuing Education	Heidi Utt	4-7838
Craniofacial Biology	Laurine Szymanski	4-4561
Diagnostics & Biological Sciences	Connie Blanchard	4-6980
Faculty Practice	Cristina Tovar	4-5509
General Practice Residency (GPR)	Mac McAllister	4-6496
Graduate Periodontics	Alyssa Russo	4-6243
International Student Program (ISP)	Marci Colb	4-7060
Orthodontics	Tsigereda Feseha	4-6990
Pediatric Dentistry	Birdie Moua	7-4044
Radiology	Abigail Jaquez	4-6955
Restorative	Weslie Williams	4-7073
Surgical Dentistry	Jean Tilley	4-6970
<b><u>SODM Administrative Offices</u></b>		
Admissions & Student Affairs	Crystal Ridgley	4-7122
AxiUm	Pirin Becker	4-7119
Clinical Operations (Director)	Emily Reddick	4-7047
Clinical Operations Coordinator	Kristen Young	4-7110
Dean's Office	Amanda Gonzales	4-7100
Equipment Repair	Raymond Ware	4-7152
Faculty Affairs	Sheila Kennedy	4-7112
Facilities/Keys	Todd Hinshaw	4-7141
Human Resources	Veronica Graves	4-8198
Information Technology	SOD, SDMIT	4-7119
Patient Advocate	Colette Kuhfuss	4-7040
Payroll	Tacy Harris	4-7130
<b><u>Campus Administrative Offices</u></b>		
Badging Office		4-0399
Educational Support Services		4-8114
Help Desk		4-4357
Parking		4-2555
Payroll & Benefits Services (PBS)		303-735-6500



## Website Addresses for University Sites

School of Dental Medicine:

<http://www.ucdenver.edu/academics/colleges/dentalmedicine/Pages/DentalMedicine.aspx>

University of Colorado Denver:

<http://www.ucdenver.edu/Pages/UCDWelcomePage.aspx>

University of Colorado Boulder:

<http://www.colorado.edu/>

University of Colorado System:

<https://www.cu.edu/>

Board of Regents:

<https://www.cu.edu/regents/>

Training:

<https://my.cu.edu>

Pay stubs:

<https://my.cu.edu>

Leave Time:

<https://my.cu.edu>

Payroll and Benefits:

<https://www.cu.edu/pbs/index.html>

Health Sciences Library:

<http://hslibrary.ucdenver.edu/>

Canvas:

<https://ucdenver.instructure.com/login>

RAVE Alert Registration:

<https://www.cuanschutz.edu/police/alerts/emergency-alert>

## **Financial Affairs**

## Faculty Development Guidelines

### University of Colorado School of Dental Medicine

#### Faculty Development Funds Guidelines (10/21/18)

Definition: Faculty Development funds are funds accumulated by Faculty for specific actions (see A. below) that are intended for the continued professional and academic development of the faculty. Their use is restricted (see B. below) and the funds are the property of the school and university. However the faculty member may direct how the funds are to be used based upon the allowed expenses listed below.

NOTE: Any tangible items purchased with Faculty development funds (computers, iPads, books, etc.) are the absolute property of the University of Colorado and must be returned to the school upon termination of employment.

#### F. Ways to earn development funds

6. Participate in the Faculty Practice. Quarterly identify either a specific dollar amount or a % of your incentive to the FP incentive reserve account. A form is completed at the beginning of each quarter if wanting to participate. Account is maintained in Financial Affairs.
7. Teach a Continuing Dental Education course and request honorarium to be placed in your department development account.
8. Admissions Committee Work on non-work days (as approved and confirmed by Associate Dean for Student Affairs)
9. Dean's Faculty Development Funds- see separate guidelines for this funding.

#### G. University/State approved uses of development funds

5. Payment of professional dues associated with your position at the Dental School.
6. Travel to attend association meetings (to include air, hotel, meals and other travel costs). The University requires that all University travel policies and procedures are followed when traveling on University business, **including attaining approval for travel from your department Chair. International travel must also be approved by the Dean.**
7. Registration costs to attend professional meetings.

8. Computers, laptops and iPads and certain other electronic devices that you would use to assist you in your position. All purchases for computers, laptops, peripherals and iPads etc. must be coordinated through the SDM IT department.
9. Surgical loops, digital cameras and lens. All are property of the School.
10. Renewal of your Colorado Dental License
11. Payment for your DEA license
12. Any type of teaching materials that would assist you in your position

H. Non-approved uses of development funds

7. Dues for non-dental related organizations (some organizations that are fraternities are not allowed).
8. Donations of any kind.
9. Costs for spouses, significant other and children to attend events (travel, registration, meals).
10. No alcohol either in travel status or if attending a University Sponsored Event and you wish to purchase alcohol.
11. Costs to attend SDM related functions (e.g. student graduation dinner) when there is a cost associated to attend.
12. Prohibited IT purchases (currently cell phones, data plans, etc.)- Please refer to SDM IT policy

## Faculty Compensation Plan

### SCHOOL OF DENTAL MEDICINE COMPENSATION PLAN

#### I. Introduction

The School of Dental Medicine developed a Faculty Compensation Plan in 2004 to respond to numerous factors. A primary factor is the uncertainty of the higher education fiscal environment and the need for the School to have flexibility to respond to the existing fiscal volatility. The implementation of the compensation plan provides the opportunity to enhance faculty productivity by more directly rewarding faculty performance with increased compensation. In addition, the provisions of the Faculty Compensation Plan provides a more open, objective and equitable process for compensating faculty.

The objectives for the development and implementation of the School's new Faculty Compensation Plan includes the following:

- o Protect the future fiscal integrity of the School
- o Enhance the School's ability to support all aspects of the School's missions
- o Provide an open and equitable compensation process for the School
- o Provide an incentive compensation process for all faculty based on productivity
- o Increase the available monies to the School for faculty compensation
- o Provide compensation levels at least equivalent to peer institutions

The need for the compensation plan was in response to the fiscal environment and has also been recognized by the Schools of Medicine and Pharmacy. Both Schools have developed and implemented plans. The School of Dental Medicine's plan is consistent with the plans approved and implemented for these schools. The development of the plan was a collaborative process between the School's administration and faculty. The plan was made available to each faculty member and they were provided the opportunity to participate in the process to determine whether the plan should go forward for approval and implementation. It had been recognized by all pertinent constituents that absent a change in the previous approach for compensating the School's faculty, the School would not be able to remain competitive with its peers in recruiting and retaining quality faculty as well as, maintain quality academic programs.

#### II. Description of Plan

##### A. General Provisions

1. All faculty, excluding volunteer and part-time faculty (less than 50% time), will be subject to the provisions of the faculty compensation plan.

2. The compensation plan will provide faculty compensation comprised of three components: a base, a supplement and an incentive. Faculty in the ranks of assistant professor, associate professor and professor will be eligible for all three components. Faculty in the rank of instructor and below are included in the Faculty Compensation Plan, but will not be eligible for the base component.
3. The standard salary for faculty at the rank of Assistant Professor or above will include a base and supplement component while faculty at the rank of instructor or below will include a supplement component only. Incentives may be provided to all ranks based on the guidelines of the School's practice plan and compensation plan.
4. The base and supplement components will be determined prospectively each 2- 3 years. The base will be adjusted on a school wide basis while the supplement will be reestablished each year on an individual faculty basis.
5. There will be no limit to an annual salary increase for the combined base and supplement components, however, as a general guideline, salary increases should not exceed 20 percent. The maximum decrease a faculty member can receive in one year for the combined base and supplement components is limited to 20 percent.
6. Two factors will be the primary basis for determining annual salary adjustments. The first is merit of the individual faculty member. A formal merit identification system will be established in the future through a representative school committee. The second factor is the availability of funds. The availability of funds determination will include monies available from school unrestricted fund sources and monies generated by individual faculty from auxiliary or restricted sources.
7. Compensation levels and annual adjustments for faculty members who are entirely or partially funded by affiliate institutions will be negotiated on an individual basis. The salary will be structural and annually adjusted in a manner that conforms to the School's compensation plan.
8. The funding of benefits will conform to current University and Campus policies. Annual salaries for the purpose of benefit calculation (for all sources of funds to include federal grants/contracts) will be the combined base, supplement, and incentive components.
9. Participation in the School's compensation plan precludes eligibility for the one-sixth rule unless otherwise grandfathered during implementation of the plan by the Dean of the School of Dental Medicine.

10. The School of Dental Medicine compensation plan will be reviewed on an annual basis. The review will be conducted by a representative faculty committee. Modifications of the plan proposed as a result of the review will be forwarded to the Dean and Faculty Senate for approval.

**B. Base Component**

1. The base component established upon implementation of the compensation plan will equal 75 percent of the average (mean) guaranteed annual salary of full time faculty as reported by the American Dental Education Association (ADEA) for all Dental Schools. The base components will be segregated by clinical science, research and allied health appointments and by rank within each component. The base will be established and annually reviewed using the most current published ADEA compensation report.
2. Base salaries, as established in Description item B I" above, will apply to all current faculty without tenure and all new faculty appointed after approval and implementation of the Compensation Plan. Base salaries of tenured faculty hired before implementation of the plan will be defined as their current level of compensation until such time their current salary equals the established base salary per the Compensation Plan.
3. Faculty who are now compensated below base level for their appointment category and rank will have as their individual base component their current salary.
4. Consistent with current University policy, the commitment of a base salary component extends only for the length of a faculty member's contract (time limited for non-tenured faculty; indefinite for tenured faculty) subject to any Regent action that changes University salary commitments.
5. The base component, approved for each tenured faculty member, will be the annual salary recognized by the School and University with respect to compensation associated with tenure status.
6. The source of funds for the base component can be all sources of funds available to the School that are eligible for use as faculty compensation consistent with Campus, University, State and Federal fiscal rules. The use of one time fund sources will generally not be authorized for the funding of the base salary component.
7. The current base components per the plan are as follows:

<u>Rank</u>	<u>Clinical Science</u>	<u>Research</u>
Professor	\$104,002	\$115,984
Associate Professor	\$89,758	\$90,404
Assistant Professor	\$78,929	\$71,250

8. The base component for part-time (percent of a full time faculty appointment) faculty will equal the base level established by the Compensation Plan multiplied by the faculty's percent time.
9. Regents will approve base salaries each year; the School will determine the supplement and the incentives and report them to the regents.

C. Supplement

1. Subject to the availability of funds and based on merit, all faculty will be eligible to receive an annual salary supplement. The amount of the salary supplement will be determined prospectively during the annual salary setting process for the subsequent fiscal year. Adjustments to the supplement as a general rule, will only occur during the annual University salary setting process.
2. The amount of salary supplement provided to a faculty member will reflect his/her accomplishments in student education, scholarly activity, service and other school related activity. The annual faculty review report will serve as the basis for identifying and reevaluating faculty accomplishments.
3. The supplement component of a new faculty member will be established as part of the recruitment process. Recognition of the need for "start up" salary supplement may be accommodated for a period to be negotiated by the chairperson and Dean.
4. The sources of funds for the supplement component can include all funds available to the school (i.e. State general funds, tuition, student clinic revenues, grants and contracts, auxiliary revenues, donations, etc.) that are eligible for use as faculty compensation consistent with Campus, University, State and federal fiscal rules.
5. The department chair person will in consultation with the Dean, develop the recommendation for each faculty member's annual salary supplement component. The Dean will forward the recommended salary supplements to the Anschutz Medical Campus Chancellor during the annual salary setting process for review and approval. Pursuant to Section 23-5-117 of the Colorado Revised Statutes, the Regents now delegate to the Anschutz Medical Campus Chancellor the authority to approve the Supplement component of faculty salaries.
6. The amount of an annual increase to the supplement component will not be restricted, however, total salary (base and supplement) generally should not exceed 20 percent in one year. The amount of the annual decrease to the supplement should not exceed 20 percent unless otherwise reviewed and approved by the Dean and Chancellor.



7. Administrative stipends provided for unique assigned administrative responsibilities will be included in the supplement. Such stipends will terminate when the faculty member is no longer assigned the responsibilities. The assignment or termination of such stipends will not apply to the 20 percent limitations for annual adjustments to the supplement component. Stipend levels will be based on time commitment and the nature of assigned responsibilities. To the extent possible, stipend levels will be standardized for like responsibilities.

D. Incentives

1. Incentives will be provided on an as earned basis and will fluctuate consistent with performance. The basis for incentives is the conduct of patient related service.
  - *Procedural Note: Incentives are paid through the Dental Faculty Practice ( DFP) as payroll cash disbursements. All operating revenues of the DFP (to include but not limited to practice collections as well as "Dean practice guarantee" revenue) are subject to employer payroll deductions, direct expenses of the DFP and indirect expenses of the DFP prior to distribution of incentive pay to members. This procedure is consistellt with university payroll and operating accoullfing policies for self-funded enterprises.*

E. Implementation Guidelines

1. The School of Dental Medicine Compensation Plan was implemented in 2004 upon appropriate University approval. As part of the process, a letter is sent to each faculty member specifying their salary components consistent with the plan at the beginning of each fiscal year. All new faculty, appointed after implementation of the plan, have their salary components specified and documented as part of the recruitment process.
2. New tenure faculty appointed after the implementation of the plan or current faculty receiving tenure after plan implementation are assigned the base component of their salary consistent with the School Compensation Plan.
3. Each faculty member is advised of their faculty salary components annually: base and supplement. The total of their faculty salary components will equal the amount of their annual salary as reported to the University.

Approved by:

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Dean, University of Colorado School of Dental Medicine  
July 1, 2019

## **Finance Policies – University**

[http://www.ucdenver.edu/faculty\\_staff/employees/policies/Pages/Finance.aspx](http://www.ucdenver.edu/faculty_staff/employees/policies/Pages/Finance.aspx)

## **Research Resources**

## Colorado Multiple Institutional Review Board (COMIRB)

The Colorado Multiple Institutional Review Board is an administrative body established to protect the rights and welfare of human research subjects recruited to participate in research activities conducted under the auspices of the University of Colorado Denver and its affiliates: Children's Hospital Colorado, Denver Health and Hospital Authority, University of Colorado Hospital, and the VA Eastern Colorado Health Care System.

In the review and conduct of research, actions by COMIRB will be guided by the principles of respect for persons, beneficence, and justice set forth in the Ethical Principles and Guidelines for the Protection of Human Subjects of Research (often referred to as the Belmont Report). Reviews of research will be performed in accordance with the Department of Health and Human Services (HHS) regulations at 45 CFR 46 (also known as the "Common Rule") and the Food and Drug Administration (FDA) regulations at 21 CFR 50 and 21 CFR 56.

Home page:

<http://www.ucdenver.edu/research/comirb/Pages/COMIRB.aspx>

Policies and Procedures:

<http://www.ucdenver.edu/research/comirb/policies/Pages/default.aspx>

Am I doing human Subject Research?

<http://www.ucdenver.edu/research/comirb/submissions/Pages/review-step1.aspx>

Training:

<http://www.ucdenver.edu/research/comirb/training/Pages/Training.aspx>

Forms:

<http://www.ucdenver.edu/research/comirb/Pages/forms.aspx>

## Collaborative Institutional Training Initiative (CITI)

The Collaborative Institutional Training Initiative (CITI Program) is dedicated to promoting the public's trust in the research enterprise by providing high quality, peer-reviewed, web-based educational courses in research, ethics, regulatory oversight, responsible conduct of research, research administration, and other topics pertinent to the interests of member organizations and individual learners.

These materials are designed and regularly updated to:

- Enhance the knowledge and professionalism of investigators, staff, and students conducting research in the United States and internationally
- Educate members, administrators, and leadership of ethics committees that review and oversee research
- Promote ethical research at organizations through the education of research administrators and organizational leadership

Home page

<https://about.citiprogram.org/en/homepage/>

For additional information on CITI programs and required training, please contact Laurine Szymanski at 303-724-9560 or at [laurine.szymanski@cuanschutz.edu](mailto:laurine.szymanski@cuanschutz.edu)

## Office of Grants and Contracts

### Mission

The mission of Grants and Contracts is to provide service to principal investigators and administrators for the purpose of obtaining and administering extramural funds in compliance with University and sponsor guidelines.

### Services

Grants and Contracts assists University of Colorado Denver faculty in their efforts to secure external support for their instructional, research, public service, and scholarly activities. This includes:

1. Budget review;
2. Grant application and contract proposal review;
3. Contract review, negotiation, and acceptance;
4. Subrecipient agreement development, negotiation, and acceptance; and
5. Providing advice on sponsor and University requirements.

Grants and Contracts is also responsible after award for compliance with non-technical sponsor requirements which include:

1. Financial reporting and standard invoicing (e.g. does not include non-governmental clinical trial invoicing which is done by academic units);
2. Providing advice on sponsor and University requirements;
3. Acting as a liaison with sponsor contract/financial representatives;
4. Cash management; and
5. Acting as a liaison for audits of sponsored activity.

OGC also has responsibility for various systems required by the federal government, for providing management reports, and for keeping abreast of major grant/contract regulations changes.

Home page:

<http://www.ucdenver.edu/research/OGC/Pages/default.aspx>

Contact List by Topic:

<http://www.ucdenver.edu/research/OGC/Pages/Contact.aspx>

## **Research Policies - University**

[http://www.ucdenver.edu/faculty\\_staff/employees/policies/Pages/Research-Policies.aspx](http://www.ucdenver.edu/faculty_staff/employees/policies/Pages/Research-Policies.aspx)