ACADEMIC COUNCIL
AGENDA
Monday, October 1, 2012
CNS 200
3:30 – 5:00 PM

1. Presidential courtesy

2. Report from the Secretary of the General Faculty

3. Report from the Executive Secretary
   a. Approval of minutes of 9/10/12 (attached)
   b. Correspondence
   c. Oral reports

4. Council Subcommittee Reports
   a. Subcommittee to consider proposing IDEA form for administrators
   b. Subcommittee on Community-Engaged Scholarship (attached)
   c. Subcommittee on broader academic freedom language for governance documents
   d. Subcommittee to consider the implications of moving to Division III athletics
   e. Subcommittee on the status of part-time faculty

5. Petitions for immediate hearing

6. Old Business

7. New business
   a. Election of faculty to the Honorary Degree Committee
   b. Committee on Conference with the Board of Trustees: Preparation for 10/4/12 BOT meeting
   c. IDEA evaluations for adjuncts (attachment)
   d. IRB changes to Journal of Record (attachment)
   e. Calendar issues (attachment)
   f. Grievance procedure timeline (attachment)
   g. Standard merit for untenured faculty (attachment)

• Lists of Attachments, Pending, and Ongoing Items are on page 2
List of Attachments:
For item 3.a. Minutes from AC meeting of 9/10/2012 (pages 3-11)
For item 4.b. Report from Subcommittee on Community Engaged Scholarship (pages 12-16)
For item 7.c. Memo from FDEC regarding IDEA Evaluations (page 17)
For item 7.d. Memo from IRB, proposed JOR language and Standard Operating Procedures (18-36)
For item 7.e. Memo from 2011-2012 ACEC regarding calendar issues (page 37)
For item 7.f. Memo from Laura Nash re: Academic Grievance Process time limit language (pages 38-40)
For item 7.g. Memo from Robbin Crabtree re: Standard merit for untenured faculty (page 41)

Pending Items:
A. Issues raised at the 10/4/99 AC meeting concerning faculty participation on the finance/budget committee. (See minutes of AC meeting of 11/4/99; 10/29/99 letter from Phil Lane attached to 5/1/00 AC agenda; excerpt of GF minutes of 11/13/92 attached to AC 5/1/00 agenda; AC motion of 11/6/00.)
B. Faculty Data Committee (AC 12/3/07).
C. MFA in Creative Writing, Five-Year-Review due in 12/2012 (AC 12/3/07).
D. Re-evaluation of offering both paper and online options for IDEA forms, spring 2013 (AC 5/14/12)
E. Re-evaluation of continued use of “yellow sheet” qualitative evaluations, spring 2014 (AC 5/14/12)
F. AC revisits the accessibility of teaching evaluation data, Due spring 2012. (AC 4/19/10)
G. AC three year review of Merit Appeals Policy, fall 2013. (AC 11/1/10)
H. AC three year review of Intellectual Properties Policy, spring 2014. (AC 3/7/11)
I. MPA, five year review in 2017-2018 (AC 9/10/12)
J. Handbook items to be revisited (AC 4/16/12)

Ongoing Items:
1. Report by SVPAA to AC each semester to inform the council of any approved exceptions to the Athletic Department’s policy of not scheduling athletic events that conflict with final exams.
2. Report from the Committee on Conference with the Board of Trustees after each meeting with board members. At the end of each academic year, discuss items for the Conference Committee to put on the agenda for their meetings with members of the board the following year
DRAFT MINUTES
Academic Council Meeting
Monday, September 10, 2012
CNS 200
3:30-5:30

Present: Professors Bayne, Dennin, Downie, Epstein (Executive Secretary), Huntley, Keenan (Chair), Kelly, Kohli, Lane, Petrino, Rafalski, Rakowitz (General Faculty Secretary), Sapp, Shea, Tromley, Walker-Canton; Deans Babington, Beal, Crabtree, Gibson, and Franzosa; SVPAA Fitzgerald, S.J.

Invited Guests: Professors Betsy Bowen (item 7.e), Liz Hohl, Kathy Nantz (item 7.g), Mark LeClair, (item 7.d)

0. Select a recording secretary. Election of Chair, Election of Executive Secretary
   • Prof. Cheryl Tromley was selected to begin the alphabetic rotation of recording secretary.
   • Prof. Dennis Keenan was unanimously elected Chair.
   • Prof. Bob Epstein was unanimously elected Executive Secretary.

1. Presidential Courtesy

   SVPAA Fitzgerald reported that:
   • The university had a good beginning of the academic year with an incoming undergraduate class of 995 as of today, though the official census is taken on October 1.
   • Rank and Tenure materials may now be securely submitted on Xythos or by the traditional method of hard copies.
   • Beth Garvey has become the full-time Director of Disability Support Services.
   • Shea Spitz is now the full-time Coordinator of International Recruitment.

   Prof. Bayne asked if the SVPAA will have access to Rank and Tenure dossiers before deadline. SVPAA Fitzgerald responded that he will be very careful to respect all protocols.

2. Report from the Secretary of the General Faculty

   Prof. Rakowitz reported that:
   • The General Faculty has met twice, 9/5 and 9/7.
   • The standing committees are up and running.
   • The Committee on Committees with be meeting to fill any open slots.

   She then gave a brief overview of the structure and functioning of the Academic Council for the new members.

3. Report from the Executive Secretary

   a. Approval of minutes
      i. Meeting of 4/30/12
         Corrections: None

         MOTION (Lane/Shea): To approve the minutes of April 30, 2012.
MOTION PASSED: 8 in favor, 0 opposed, 8 abstentions.

ii. Meeting of 4/30/12 (reconvened on 5/14/12)

Corrections:
• Prof. Dennin: p. 23, reminded us that we do not have a track team, we have a cross-country team.
• Dean Crabtree: p. 25, 7i, ¶2, line 3, insert “as such” after “of this policy.”

MOTION (Downie/Sapp): To approve the minutes of April 30, 2012, reconvened May 14, 2012 as corrected.
MOTION PASSED: 7 in favor, 0 opposed, 7 abstentions.

iii. Meeting of 6/4/12

Corrections:
• Profs. Ginny Kelly and Wendy Kohli should be added to the list of Incoming AC members.
• Prof. Ginny Kelly should be removed from and Prof. Wendy Kohli added to the list of Members of the Committee on Conference with the Board of Trustees.

MOTION (Dennin/Shea): To approve the minutes of June 4, 2012 as corrected.
MOTION PASSED: 9 in favor, 0 opposed, 6 abstentions.

b. Correspondence

i. Memo from GFS with roster and meeting dates. The meetings are the first Monday of the month with the exception of 4/8/13 and 4/29/13 which need approval. They were so approved.

ii. Guide to taking AC minutes

iii. Memo from Mary Ann Palazzi to SVPAA Fitzgerald re: Spring 2012 conflicts between athletic schedules and final exams.

Prof. Dennin suggested that it might make more sense to get this ahead of time rather than just be informed after-the-fact. SVPAA Fitzgerald responded that we don’t necessarily know before-hand which teams will be invited to post-season play.

Prof. Lane Phil noted that while he thought that regularly scheduled games are not supposed to be scheduled during final exams, we are consistently in violation of this policy. SVPAA Fitzgerald responded that he can make suggestions.

iv. Oral Reports: None

4. Council Subcommittee Reports

a. Subcommittee to consider proposing IDEA form for administrators:
   Chair: Prof. Bill Abbott, no report

b. Subcommittee on Community-Engaged Scholarship
   Chair: Prof. Jocelyn Boryczka, expect a report this semester
c. Subcommittee on broader academic freedom language for governance documents
   Chair: Prof. Rona Preli, no report

d. Subcommittee to consider the implications of moving to Division III athletics
   In the process of forming the committee

5. **Petitions for immediate hearing:** None

6. **Old Business:** None

7. **New Business**

   a. Election of faculty to the Honorary Degree Committee

      Prof. Rakowitz suggested that we encourage our junior colleagues to volunteer, Dean Crabtree added our senior colleagues should be encouraged as well. Prof. Lane clarified that there are also administrators, especially advancement, involved, and it is no longer just faculty who make the recommendation to the President. SVPAA Fitzgerald stated that it is important to have a diversity of points of view and that in the end the President brings a list to the Board who makes the final decision.

   b. Closure of School of Nursing Health Care Management Track

      Dean Babington described the rationale behind this recommendation. Most importantly there is very low enrollment (three), and no one has been admitted in years. She stated that to bring the curriculum up-to-date, the tracks in the Nursing program are in the process of being reorganized. She added that the students remaining in the track will be accommodated.

      Prof. Dennin asked how long the program had been in existence. Prof. Shea said 10-12 years. Dean Babington added that the content has not been sufficiently updated.

      Dean Crabtree asked whether there is still a possibility of collaborating with the proposed Masters of Public Administration. Dean Babington responded that there is, and they are looking at a variety of up-to-date options.

      **MOTION (Lane/Kohli): To close the Healthcare Management track in the School of Nursing.**

      **MOTION PASSED: 16 in favor, 0 opposed, 0 abstentions.**

   c. Addition to Non-Discrimination and Harassment Policy

      In 2010, on the recommendation of an Academic Council subcommittee, the AC approved a Non-Discrimination and Harassment Policy for inclusion in the Journal of Record. The same policy is included in the Student Handbook. This summer, Tom Pellegrino, VP for Student Affairs and a member of the subcommittee that drafted the original policy, added a section on Bias Response at the end of the policy in the Student Handbook. This section was added “in response to a request this past year from the President’s Institutional Diversity Council (PIDC) to look into establishing a protocol for
responding to incidences of bias that are not already/otherwise covered by the Non Discrimination and Harassment policy” (email from T. Pellegrino to S. Rakowitz, 6/26/12).

Prof. Rakowitz proposed that this added language also be included in the Journal of Record (JOR).

Prof. Bayne asked what makes this paragraph academic policy? Prof. Rakowitz responded that while it may not look like it is academic policy, it is part of the policy that is there. Dean Crabtree added that given that these behaviors may happen in the classroom or involve a class, it makes sense to have it as an academic policy. Prof. Keenan provided context from the AC’S discussion last year about cleaning up the JOR.

Prof. Bayne said that he was wondering about the make-up of the bias response team. How are the academic members chosen? Prof. Rakowitz said that she did not know but would find out. Prof. Kohli asked whether there is a conceptual framework for what is and is not academic policy.

MOTION (Rakowitz/Second): To add the following text to the Journal of Record at the end of the Non-Discrimination and Harassment Policy:

**Bias Response:**
There may be instances where acts of bias, which are defined as language or behaviors that demonstrate bias against persons or groups because of race, color, ethnicity, religion, faith, national origin, political orientation, or sexual orientation occur, but the perpetrator(s) cannot be identified and/or the acts of bias do not rise to the level of discrimination or harassment for purposes of Title IX or this policy. In those instances, any member of the University community impacted by the acts of bias are nonetheless encouraged to report the behavior to the Bias Response Team. The Bias Response team serves to advocate for victims of bias, whether individual or group. The Bias Response Team is uniquely situated to assist the University community in situations including, but not necessarily limited to, those in which the perpetrator of the bias cannot be identified and/or when the behavior in question does not constitute discrimination or rise to the level of harassment for Title IX purposes. The Bias Response team is made up of campus partners from academics, student affairs and the student body. The Bias Response team is headed by the vice president for student affairs or her/his designee as well as the Director of Human Resources or her/his designee. Any member of the University community wishing to contact the Bias Response Team may do so by contacting either of those offices.

Prof. Lane stated that he had a problem with where we were putting it. It belongs in the catalogue, not the JOR. Prof. Epstein asked if it would be in the catalogue as well. Prof. Rakowitz replied that she did not know, but we do have a reconciliation policy to maintain consistency between JOR policies and statements of policy in other documents. Prof. Walker-Canton asked what kind of harassment policies are currently included in the JOR. She wondered if it didn’t make the policy stronger to repeat it. Prof. Epstein commented that it might be a problem if it were exclusively in the JOR; however, it does impact us as instructors, and it is probably good to have it in the academic records as well. Prof. Rakowitz explained that it adds to the current policy by providing a wider range of issues that can be dealt with such as issues that are not Title IX or
when the perpetrators cannot be identified. SVPAA Fitzgerald added that students could also appeal a grade based on a charge of bias.

**Call the Question (Tromley/Second):** 14 in favor, 2 opposed, 0 abstentions.

**MOTION PASSED:** 14 in favor, 2 opposed, 0 abstentions.

d. **Proposal for a Masters of Public Administration**

Prof. Mark LeClair summarized the proposal for a new graduate program in Public Administration. The details are included in the 9/10/12 documents of the AC. Prof. LeClair emphasized that the program will be part-time, start with approximately 20 students, and require few additional resources beyond the hire of a full-time faculty member in year two.

Prof Epstein noted that he was not making a critique, but wondered why, since so much of course work is in DSB, it is not there? Dean Gibson responded that the DSB accrediting agency, AACSB, would not approve it, and the DSB does not have the resources to offer the program. Prof. Epstein asked if it would be substantively different if it were in the DSB. Dean Gibson replied that, because of accreditation requirements, the program would be substantively different from the program proposed. Dean Crabtree added that about half of the courses are in the Social Sciences and that the idea was to try to maximize synergy. Prof. Kohli suggested that GSEAP resources could contribute to this as well. Prof. LeClair responded that they would like to increase the number of areas represented.

Prof. Dennin opined that he found it strange to talk about the proposed program without knowing about the other institutions that have this program, what their applications have been, how well they are doing, etc. Prof. LeClair responded that while we don’t have enrollment data there is a market research report from about a year ago. Prof. Dennin said that in the future it would be good to have enrollment data from people actually doing it.

Prof. Dennin noted that he found the budget strange. For example, on p. 55 the contributions are confusing. It says 1/6 of a faculty line and yet faculty costs are listed at $4500 per person. Benefits should be higher, the cost of a search is not included, etc. He summarized by saying that he sometimes finds these budgets tend to optimistically underestimate costs. Dean Crabtree explained how the budget was arrived at, but added that Prof. Dennin was correct, search costs, travel, etc. will need to be added in later.

Prof. Rakowitz worried that departments are already pushed to the wall in terms of resources, and wondered if there were any kind of guarantees that this would not just strain things further. Prof. LeClair responded that they have a commitment to the hire in the second year from the administration and after that we will see how enrollments go. SVPAA Fitzgerald compared this to the five-year rollouts of other programs. He said that we have a five-year model and test as we go along, looking at the market research and the reasonableness of the project.

Prof. Shea asked if we had determined need by getting a sense of current undergraduate interest in coming back for the program. Prof. LeClair said that this had been discussed, and they were trying to get them involved.
Dean Crabtree commented that several of the classes are already offered in existing upper level undergraduate programs and the proposed program will use seats in those courses. This will add graduate students to the mix with tougher expectation for them. While this will require coordinated course planning across schools and programs, we have a lot of resources already in place. Dean Babington added that they also have some of these courses in the School of Nursing, and it is a good opportunity to review the content of these courses. Prof. Dennin asked if the undergraduate costs would be recalibrated under those circumstances. Prof. Sapp said that is would depend on enrollments but the proposal can handle either option.

Dean Crabtree indicated that we are mixing graduate and undergraduate students in the Communication classes with different syllabi. These courses have been vetted by the ASCC, and they take it very seriously. Dean Franzosa added that GSEAP has a long history of doing this successfully. She concluded that the costs of the proposed program seem low and the risks minimal. Prof. Petrino concurred, citing the example of American Studies where the graduate students have different requirements and expectations and added that it presents a good learning opportunity for the undergraduates.

**MOTION (Lane/Sapp): Approve the proposal for a new graduate program, Masters of Public Administration.**

Prof. Rakowitz moved to amend the motion to include a review in the fifth year. SVPAA Fitzgerald pointed out that it was included.

Prof. Lane spoke in favor of the motion. It is low risk with a reasonable return and an opportunity to obtain market share with few resources.

Prof. Epstein spoke in favor, adding that whenever we discuss new programs or degrees we talk mostly about the risks of insufficient enrollment. We should not focus so much on this because if there is insufficient enrollment the program will just go away. The real risk is success and the costs to our other programs and the rest of our mission. The Administration needs to commit to support our current resources and create new lines in existing programs.

Prof. Sapp spoke in favor as the proposed program does meet community needs and fits our Jesuit mission.

Prof. Downie spoke in favor but said that he believes it will cost more than we think. He added that we should not be scared of mixing graduate and undergraduate students if we do it well. It will serve Bridgeport and will help fill some of the holes that currently exist. Further, in areas that we do cover, we will be able to approach a different pool of students.

Dean Franzosa spoke in favor, saying it enriches our undergraduate programs.

Dean Gibson spoke in favor and added that this type of program is typically not in business schools and properly resides in Arts and Sciences. The DSB also sees it as a way of creating synergy and has capacity in some of their classes as well.

Prof. Rakowitz spoke in favor, echoing Prof. Epstein and emphasizing the Arts and Sciences Curriculum Committee will review the specific courses.
SVPAA Fitzgerald emphasized the administration’s commitment to supporting existing programs saying that his plan is to grow the faculty in a number of different ways, including new programs, three for two retirement replacements, and endowed chairs. He wants the proposed program to be seen as an opportunity, not a burden. We now have about 1,100 graduate students, and he would like to grow that to about 1,500.

Dean Crabtree agreed, saying that she is committed to growing the faculty and sees the proposed program as adding faculty in the departments whose interface is not strictly with Public Administration—it expands areas that we can cover.

Prof. Epstein clarified that for this to happen, it is important the any profit returns to the Academic Division.

**Call the Question (Lane/Shea): 14 in favor, 0 opposed, 1 abstention.**

**MOTION PASSED: 14 in favor, 0 opposed, 1 abstention.**

e. Committee on Conference with the Board of Trustees: report of 6/7/12 meeting

Prof. Betsy Bowen presented an overview of the committee’s last meeting with the Board. The first hour comprised a joint meeting with the Academic Affairs and Finance committees of the Board. SVPAA Fitzgerald discussed the status of the portfolio review of academic programs. Prof. Bowen noted that the portfolio review project has significant implications for the academic division, and said that the Committee on Conference recommends that the Academic Council consider the issue, in whatever way is appropriate.

In the second hour the committee met with just the Academic Affairs committee. The Committee on Conference as directed by the AC:

- Presented the seven Handbook amendments. Clarification questions predominated and the Academic Affairs committee will present these amendments to the full Board at its October 4, 2012 meeting.
- Discussed the status of the MOU, the meaning and importance of the 95th percentile, and the votes of and relations with the faculty. There was a great deal of expressed interest and an extensive question period.

In addition, Profs. Bowen and Bernhardt, as representatives of the Committee on Conference, were invited by the Secretary of the General Faculty to join a group of faculty leaders for a meeting with the full Board.

Prof. Bowen reported that to date she has only received one report (Prof. Downie) from the liaisons to the other Board committees. Prof. Bowen recommended that the Secretary of the General Faculty remind new committee chairs & liaisons of the importance (and obligation) of reporting their work to the Committee on Conference so that the Academic Council can stay informed about concerns and news from the Board committees.

**At this point the agenda was reordered and members of the AC agreed to stay a bit past 5 pm to take up item 7.g.**

g. Request for Task Force on Part-time Faculty
Profs. Nantz and Hohl described the need for a taskforce to explore the “status, roles, and conditions of part-time faculty at Fairfield.” They stressed that “to better serve our students and enrich the life of the university” we would be well served by bringing adjunct faculty into conversation with full-time faculty and improve their professionalism. (Quotes from attachment, memo from Liz Hohl and Kathy Nantz, 8/31/2012, Request for Task Force on the Status, Roles, and Employment Conditions of Part-time Faculty at Fairfield)

Prof. Epstein asked if status, roles, and conditions also includes compensation. Prof. Hohl responded that the intent was to make the mandate large enough so that conditions could be broadly interpreted.

Prof. Sapp asked if the proposed taskforce as described in the packet really wanted to be on every agenda for the spring and suggested that it might just be a submitted report.

**MOTION (Rakowitz/Fitzgerald):** That the Academic Council Executive Committee appoint a task force to explore the status, roles, and conditions of part-time faculty at Fairfield. This task force shall report back to the Academic Council in the spring 2013 semester, and provide a final report along with recommendations for action to the Council at its September 2013 meeting. This task force shall be composed of full-time tenured faculty, part-time faculty, and appropriate administrators.

Prof. Kohli spoke against the motion saying that she would like more people than just the AC Executive Council included

**AMENDMENT (Kohli/Lane):** Insert “and two members from the AC” after “Executive Committee”

Prof. Lane stressed that we need to open it up and have more voices. Dean Crabtree pointed out the Executive Committee consults with the members of the AC and that should ensure representation of different points of view. A brief discussion ensued about what the AC has done in the past under similar circumstance stressing that the EC does consult broadly to bring in as many voices as possible.

**AMENDMENT FAILED:** 3 in favor, 9 opposed, 3 abstentions.

**CALL THE QUESTION (Lane/Tromley) PASSED:** 14 in favor, 0 opposed, 1 abstention.

**MAIN MOTION PASSED:** 15 in favor, 0 opposed, 0 abstentions.

A discussion about the make-up of the taskforce ensued.

Prof. Downie stated that he wanted to make sure that we don’t prejudge the outcome and become an advocacy group.

Profs. Nantz and Hohl both expressed their eagerness to serve on the taskforce.

Prof. Hohl discussed the importance of this issue as we now have data from many professional organizations that 75% of those who teach are not tenure-track.
Prof. Petrino said that the Humanities are very invested in this. She opined that those departments who are very invested because of their large adjunct populations should be represented.

Dean Crabtree suggested that each of the schools should be represented.

Prof. Shea asked if there is a way to get a sense of proportionality—where do the adjuncts mostly come from?—and use that to guide the selection. Dean Franzosa reflected that where the adjuncts from, what they do, etc. differs greatly in the professional schools.

Dean Crabtree agreed with Prof. Petrino about the Humanities and added that it differs among departments.

Prof. Walker-Canton suggested there be representatives of part-time faculty from different disciplines.

Prof. Downie stressed that we also need full-time faculty representation as some departments have very few adjuncts.

Prof. Rakowitz tried to clarify the size and structure envisioned by the AC. The consensus seemed to be that the subcommittee should include about 7 people, one or two of whom were administrators. She asked whether the faculty should be half full time and half part time.

Prof. Bayne noted that part-time people will not be compensated for their work on the taskforce. Prof. Walker-Canton responded that they should have voice anyway.

Prof. Kohli concluded by saying that the taskforce should make sure it hears from all constituents. Everyone does not have to be a member.

Meeting was adjourned at 5:30 p.m.

Respectfully submitted,

Cheryl Tromley
Recording Secretary
To: Executive Secretary of the Academic Council  
From: Subcommittee on Community-Engaged Scholarship: Jocelyn Boryczka (chair), Pat Calderwood, Dennis Keenan, Eileen O’Shea, Melissa Quan, Amalia Rusu, and Joan VanHise  
Regarding: Recommended changes to the *Guidelines and Timetable for Applications for Tenure and Promotion*  
Date: September 18, 2012

In Fall 2010, Deans Robbin Crabtree and Beth Boquet attended an institute hosted by the Eastern Region Campus Compacts on the topic of the Institutionalization of Community Engagement. In Spring 2011, the Center for Academic Excellence, Office of Service Learning, and Office of Academic Engagement hosted a series of events and workshops on community-engagement as scholarship that raised a campus-wide conversation on the topic. These events highlighted the need to address the issue through policy changes as well as professional development. In Fall 2011, Melissa Quan and Dennis Keenan participated in the “Eastern Region Campus Compact Faculty Institute, Making it Count: Strategies for Rewarding Engaged Scholarship in Promotion and Tenure.”

The Academic Council voted in favor of a motion to form a subcommittee to consider the inclusion of language in the *Faculty Handbook* and/or *Guidelines and Timetable for Applications for Tenure and Promotion* that recognizes the importance of community-engaged scholarship.

Though the charge of the subcommittee was to consider the inclusion of language in the *Handbook* and/or *Guidelines* that recognizes the importance of community-engaged scholarship, we are recommending changes to the teaching and service sections of the *Guidelines* as well. The rationale for this is that community-engaged scholarship often (though not always) extends across traditional boundaries recognized by rank and tenure committees.

The subcommittee surveyed the vast literature on community-engaged scholarship and best practices at comparable institutions (e.g., Syracuse, Villanova, Marquette, Santa Clara, St Joseph, Loyola Maryland, Holy Cross, University of Denver, and the University of San Francisco). In light of the findings, we are recommending changes to the *Guidelines and Timetable for Applications for Tenure and Promotion*. We are not recommending changes to the *Faculty Handbook*. The *Handbook* is currently written to allow for a broad interpretation of what counts as scholarship, teaching, and service. It is the opinion of the subcommittee that to add language regarding community-engaged scholarship in the *Handbook* would unduly emphasize this particular type of scholarship, teaching, and service. Changes to the *Guidelines* are intended to emphasize one viable interpretation of the *Handbook*.

We recommend the following changes to the *Guidelines and Timetable for Applications for Tenure and Promotion* (additions in **bold**, deletions in *strikethrough*):

**Section Four: Outline and Guidelines for Applicant’s Dossier**

**V. Teaching Accomplishments Since Initial Promotion or Appointment to Present Rank**
A. Courses taught at Fairfield University

Identify and describe new or substantially redesigned courses developed or substantially redesigned, including new or existing courses designed for community engagement, and other substantial teaching activities that are counted as part of your assigned course load.

B. Teaching evaluation

i. Peer review - The applicant is encouraged to request colleagues with firsthand experience of his/her teaching ability to submit written reports based on these observations. Colleagues may wish to address differences between their perceptions of candidate’s teaching and student perceptions if the student perceptions are known to the colleague.

ii. Student Evaluation Summary - If student evaluations are submitted as supporting materials, a summary of the student rating must appear in this section of the application. Sufficient information about the evaluation instrument (especially a department or personal form) and results must be provided to enable the committee to make an informed decision.

iii. Other - As appropriate, include community partner evaluations and community-based peer or student evaluations.

C. Description of involvement in curriculum development and enhancement

The candidate may include information about innovations in teaching and integrative approaches that bring together teaching, scholarship, and community engagement.

D. Student advising

E. Student supervision

Include activities such as independent studies, theses, academic student organizations, student teacher/clinical supervision, field trips, community-engaged projects/research, and the like.

F. Participation in courses/seminars of other faculty

G. Other community outreach teaching not counted as part of your teaching load.

VI. Professional Accomplishments Since Initial Promotion or Appointment to Present Rank

A. A list of publications

If a publication has multiple authors, explain your contribution to the publication.
The Faculty Handbook emphasizes the importance of peer review. For each category in this section, explain the review process. Include both what was reviewed (a complete paper? an abstract for a paper? a draft of a book?) as well as who reviewed the work (double-blind referees? an editor? the conference organizers? community partners?). If possible, describe how competitive was the selection process.

The Faculty Handbook requires evidence that the faculty member contributes to the advancement of the scholarly and professional community by engaging in scholarly research or creative activities. Therefore, in addition to the refereed publications, monographs, and other creative works that typically comprise tenure and promotion dossiers, dossiers may include such items as policy reports, patents and licensing documentation, etc. There is an expectation that this scholarship—much like “traditional” scholarship—be a part of a rigorous, coherent body of work aimed at extending knowledge, engaging and informing others, and transforming the community.

In addition to publications that have appeared in print, include in this section accepted publications not in print with a letter of verification from the editor stating that the publication is accepted unconditionally, or accepted pending relatively straightforward revisions. If, in a previous application, a publication has been listed as accepted but not in print, that fact should be noted in this section.

If a publication has multiple authors, explain your contribution to the publication. For community engaged scholarship, demonstrate how work was conducted in partnership with the community and characterized by mutuality, reciprocity, sustainability, and shared goals.

1. Books and chapters of books
   Include published reviews or publisher reviews and/or letters of evaluation.

2. Professional refereed journal papers

3. Products of community-engaged scholarship

3. Professional refereed conference proceeding papers

4. Professional non-refereed journal papers

5. Other publications (magazines, etc.) and public documents

6. Book reviews and short notes

B. Accomplishments other than publications
In fields where publications are not the primary expression of professional achievement use this section to explain those activities. These may include art
exhibits, performances, movies or plays written or directed, **community-engaged scholarship**, and so on.

The *Faculty Handbook* emphasizes the importance of peer review. In each case, explain the review process, including what was reviewed (an artwork? a proposal for an exhibit? a draft of a novel or a complete novel?), and who did the review. If possible, describe how competitive was the selection process as well as how the review process worked.

C. Sponsored research (grants)
   Please also list applications for grants. The *Faculty Handbook* emphasizes the importance of peer review. In each case, explain the review process, including what was reviewed, and who did the review. If possible, describe how competitive was the selection process as well as how the review process worked.

D. Professional presentations
   Include information such as the date of the presentation, location, to whom, and the topic.

   Note whether presentations were to international, national, regional, or local groups, as well as indicating the prestige of the groups addressed.

   Indicate whether each address was invited, submitted and refereed, or submitted and non-refereed. Explain what was reviewed (a complete paper? an abstract?) as well as how the review process worked.

E. Professional honors and/or awards

F. Professional contributions/service
   Describe contributions to scholarly associations such as official positions, editorship of journals and review/referee work and committee work.

F. Sponsored research (grants)
   Please also list applications for grants

G. Consultantships

H. Presentations on media or to a community and non-professional groups
   Present all relevant data.

VII. University and/or Community Service Since Initial Promotion or Appointment to Present Rank

A. Service to Student Organizations

B. A. University Committees
   For Standing and Ad Hoc committees, list dates of service, name of committee(s)
and position(s) held

C. B. School or Departmental Committees
   List dates of service, name committee(s) and position(s) held

C. Community Engagement
   Describe the candidate’s application of knowledge, skills, and expertise to pressing
   social, moral, and civic issues and problems, by forming and maintaining sustainable
   working relationships (characterized by mutual benefits and shared goals) with
   community partners.

D. Other Service to University
   For example, organizing art exhibits, lecture series, faculty seminars, and the like.

E. Service to Non-University Community
   Service to Student Organizations

F. Service Extending beyond the University
   Efforts that relate to one’s academic/professional expertise and are undertaken as a
   representative of the university; for example: providing consultation services (without
   remuneration); participation in major committees of a professional society or discipline,
   etc.

Rationale:

There is growing national attention within higher education on the issue of community-engaged
scholarship and its relationship to academic reward systems. Studies of faculty involvement in
community engagement show that academic reward systems that do not change to assess and
recognize engaged scholarship stand as a barrier to the careers of engaged scholars and to campuses
truly institutionalizing the work at their core. The Carnegie Classification of Community
Engagement, an elective classification that began in 2006, has been a key driving force for change.
In 2008, Fairfield University was one of just under 200 institutions of higher education in the U.S.
to receive the Carnegie Classification of Community Engagement. Fairfield will need to reapply in
2015 and we will not be able to maintain this honor without showing progress in better aligning
faculty rewards with community engaged teaching and scholarship.

In Fairfield University’s recent NEASC Report, it was noted that “[t]he rules for promotion and
tenure as well as those for annual merit evaluations should be revised to better reflect our
institution’s strategic priorities. Without a faculty evaluation and reward system that recognizes
mission-driven work with students both in and beyond the traditional classroom, it will be difficult
to succeed in our efforts to integrate the educational experiences of our students.”
Dear Dennis Keenan, Chair
Academic Council

At the September 12th, 2012 FDEC meeting, the committee discussed the minutes of the 5-14-12 AC meeting wherein FDEC’s recommendations for the IDEA evaluations were discussed. In addition to discussing the passed motion: “both paper and online IDEA student evaluations be offered to faculty until 2014; the default should be paper IDEA evaluations,” we noted the list of items for FDEC to consider this year with respect to IDEA.

Through recent conversations with Tracy Immerso and AVP Fitzgerald [see email excerpt below], the FDEC learned that this motion will not apply to adjunct faculty members. For adjunct faculty (not full-time faculty who teach an overload), the default for IDEA evaluations will be online.

As this decision differs from the FDEC’s interpretation of the motion (we assumed it applied to tenure track and adjunct faculty), we thought it appropriate to inform AC of this decision by the AVP’s office. We have been in touch with AVP Fitzgerald, who explained the financial reasons behind this decision.

Sincerely,

Emily Smith, Chair
FDEC

*****

Excerpt from Email String:

Below is the AVP’s response to my [Emily’s] question about the online default for adjunct faculty:

AC accepted FDEC’s recommendations about paper as the default option. My understanding was that the concern was principally about getting a high enough response rate so that tenure track faculty would have sound evidence of teaching effectiveness for the R&T process, and that continuing full-time faculty would have evidence for annual merit reviews.

Adjunct faculty teach about a third of our total sections. They are, as a whole, asked to provide some evidence of teaching effectiveness at the time of hire (or of rehire). They are often unmotivated to evaluate their courses toward the end of the term, and we have to chase many of them down concerning course evaluations (or even to get them to turn in their grades on time).

I have set them up to default to on-line for this semester. I had requested that they be asked about this in their contract letter, but that didn't happen this fall. At this time, it would be a herculean task to change this over for the current term. Of course, they all have the option of choosing paper, but they rarely do so. Many don't even set up their objectives in IDEA.

So, I am trying to uphold the spirit of what FDEC and AC decided even as I am trying not to waste time and resources on tasks that have little or no actual value.

Paul
From: <Naser>, Curt <CNaser@fairfield.edu>
Date: Wednesday, June 27, 2012 4:37 PM
To: Irene Mulvey <mulvey@fairfield.edu>, "Fitzgerald, Paul" <pfitzgerald@fairfield.edu>
Cc: "Henkel, Linda" <LHenkel@fairfield.edu>, "LaFrance, Susan" <SLaFrance@fairfield.edu>
Subject: IRB & Journal of Record

Irene & Paul, you may recall some discussion with Linda Henkel last fall about revising the entries for the Institutional Review Board (IRB). These contained a copy of the Code of Federal Regulations as well as various other documents. The Code itself should not be part of the JofR as it is subject to change by the Federal Government and our compliance with that code is not open to debate—that is, we are bound to abide by the federal regs based on our assurance to the Federal Government.

The IRB felt that the most useful course for us would be to develop a set of Standard Operating Procedures (SOPs). This is a common expectation of IRBs around the country. We started with the SOPs developed at Bridgeport Hospital and then amended them to our particular needs. Please find attached the final draft of this document as approved by the IRB committee members (and our thanks to those members, all of whom worked diligently this year to create this document).

Also attached is a document that we believe should replace all the entries in the JofR concerning the IRB. This is a much more simplified statement of overarching policy, and the SOPs represent how these policies are implemented. It is our desire and recommendation that the SOPs not be entered into the JofR as they represent rules for the operation of the IRB and may need to be amended, for instance, in response to regulatory changes, or problems that we identify through the normal course of IRB business. We believe that the IRB should be able to amend the SOPs without going through formal procedures to have such changes reviewed and approved by multiple offices and committees. We would recommend that the shorter document be adopted as policy by the University and entered into the JofR. The SOPs then provide information to the University community about how the IRB operates. The SOPs would be available on the IRB website.

We would, of course, be happy to meet with you to go over these documents and our recommendations, answer any questions and make those changes that you may feel are necessary.

Thanks,
Curt
Fairfield University Institutional Review Board
The Academic Council has accepted the following policies as a general framework for the protection of the rights and welfare of human subjects involved in research conducted at Fairfield University or by its employees and/or students.

1) The University shall establish and maintain an Institutional Review Board (IRB) to ensure the protection of the rights and welfare of human research subjects pursuant to the federal regulations (45CFR Part 46 and 21CFR Part 56).

2) The President shall appoint members to the IRB and its Chair. Members shall be appointed in conformity with the IRB’s Standard Operating Procedures.

3) The IRB will report to the Chief Academic Officer. The Chief Academic Officer will provide sufficient resources for the efficient conduct of IRB business, including an administrative staff person to serve as IRB coordinator.

4) The IRB will not apply any review standard that exceeds the standards set by the Code of Federal Regulations.

5) Decisions to not approve a research protocol by the IRB may not be appealed. The IRB will provide written explanations for its decisions and investigators may choose to revise and resubmit their protocols.

6) Approval of research by the IRB does not preclude the review of such research by other agencies within the University.

7) Research that is exempt or does not fall within the scope of the federal Code of Regulations shall be exempt from IRB review. The IRB, however, shall be the sole interpreter of when research falls outside its purview and what research is exempt per the federal regulations.

8) The IRB will maintain and publish a set of “Standard Operating Procedures” detailing how investigators may submit research protocols for review, how the IRB operates, and who researchers may contact for clarification and advice.

9) Research that originates from outside the University must be submitted for review to the IRB. The IRB may choose to accept an external IRB’s review as sufficient or, at its discretion, it may require that the research be reviewed and approved by the Fairfield University IRB.

10) All employees of the University who engage in research activities involving human subjects must seek prospective approval of their research. This includes all research activities conducted at Fairfield University and all research activities conducted outside the University but in one’s capacity as an employee of the University.
11) All research activities involving human subjects conducted by students at Fairfield University or outside the University are subject to prospective IRB review and approval if the research is conducted as part of their curriculum or under the auspices of a University program. Procedures for students to submit their research for review to the IRB are detailed in the Standard Operating Procedures document.

12) All student research protocols submitted to the IRB must have a full-time University employee as a co-investigator. The University employee co-investigator should have experience in the area of research being conducted by the student and the University employee co-investigator is responsible for protecting the rights and welfare of the human subjects involved in the research.
INSTITUTIONAL REVIEW BOARD

STANDARD OPERATING PROCEDURES

FAIRFIELD UNIVERSITY

I. Institutional Review Board’s Mandate to Protect Human Subjects
II. IRB Administration
III. IRB Membership
IV. IRB Meetings
V. Substance of IRB Review
VI. IRB Record Keeping and Required Documentation
VII. Additional Considerations

Appendix A: Protocol Submission Requirements
Appendix B: Continuing Review Submission Requirements
Appendix C: Criteria for Exemption Status
Appendix D: Criteria for Expedited Review
Institutional Review Board's Mandate to Protect Human Subjects. The University shall establish and maintain an Institutional Review Board (IRB) to ensure the protection of the rights and welfare of human research subjects pursuant to the federal regulations (45CFR Part 46 and 21CFR Part 56). The IRB performs prospective and continuing review of protocols, the informed consent process and the procedures utilized to enroll subjects in order to ensure that the human subject research is conducted ethically and in compliance with the Belmont Report, and with applicable federal, state, local and institutional requirements by.

The Fairfield University IRB will apply only those standards contained within the federal regulations which reflect the principles articulated in the Belmont Report. The IRB will not apply any more stringent standards to the review of research involving human subjects unless specifically directed to do so by University policy approved by the appropriate faculty governance bodies.

Consistent with the federal regulations, decisions by the IRB to not approve research may not be appealed to any authority outside the IRB. In all instances, to the best of its abilities, the IRB will work with investigators to revise protocols that are not approved so as to meet the standards set forth in the regulations. On the other hand, approval of research by the IRB does not guarantee permission to conduct any particular research project. IRB approval does not override other University policies or authorities.

All research involving human subjects conducted by University employees or students at Fairfield University or outside of the University in their capacity as an employee/student is subject to prospective review and approval by the IRB and may not proceed without it, unless specifically exempted by the IRB from review.

IRB Administration. The IRB will report to the Chief Academic Officer. The Chief Academic Officer will provide sufficient resources for the efficient conduct of IRB business, including an administrative staff person to serve as Administrative Liaison. The Administrative Liaison’s duties include: 1) assisting in the development and implementation of procedures to ensure the efficient flow of all IRB records; 2) maintaining documentation and records in accordance with federal regulatory requirements; 3) tracking records and the progress of all studies; and 4) ensuring meetings are conducted according to federal regulations, i.e., recording attendance and preparing and distributing materials for meetings. The Administrative Liaison will attend all IRB meetings, and reports to the IRB Chairperson.

IRB Membership. The IRB will have sufficient expertise to review the broad variety of research in which the University becomes involved, will be knowledgeable about all relevant regulatory requirements and will make every effort to be impartial and objective in its review (45 CFR 46.107(a) and 21 CFR 56.107(a)).

Appointment of IRB Chairperson, Length of Service and Duties. The IRB Chairperson shall be appointed by the President. In addition to the responsibilities of IRB membership, the Chairperson has primary responsibility for conducting IRB meetings and directing the IRB staff to ensure operation of the IRB within all applicable regulatory
requirements. The IRB Chairperson works with IRB members and investigators to ensure that the rights and welfare of research subjects are adequately protected. The Chairperson shall sign all official IRB correspondence, unless otherwise indicated, and shall report directly to the Chief Academic Officer.

Appointment of IRB Members, Length of Service and Duties. The President will appoint members to the IRB, typically in consultation with current and past members. Members are responsible for ensuring that the rights and welfare of research subjects are protected. Members vote to approve, require modifications in, disapprove, or table protocols. Members are expected to attend IRB meetings on a regular basis, serve as primary reviewers for research within their expertise, and serve as general reviewers on all research discussed at convened meetings. The IRB Chair may designate members of the IRB to review non-research, exempt, and expedited review protocols.

IRB Membership Requirements. In accordance with the compositional requirements of section 46.107 of 45 CFR 46, the membership is composed of at least five members, with varying backgrounds to promote complete and adequate review of research activities commonly conducted at Fairfield. The Board shall include at least one member whose primary concerns are in nonscientific areas, and one person who is not currently affiliated with Fairfield University and is not part of the immediate family of a person who is currently affiliated with Fairfield University. Members will be drawn from diverse backgrounds including consideration of their racial and cultural backgrounds and sensitivity to such issues as community attitudes, to promote respect for its advice and counsel in safeguarding the rights and welfare of human subjects. When research is reviewed involving a category of vulnerable subjects (e.g., prisoners, children, individuals institutionalized as mentally disabled), the IRB shall include in its reviewing body one or more individuals who have as a primary concern the welfare of these subjects.

Specific Duties. The IRB is responsible for developing procedures for submitting research protocols for review, determining if research protocols are in conformity with the federal regulations with regard to use of human subjects in research, reviewing approved research projects on a continuing basis (at a minimum of once a year), reporting to the Chief Academic Officer of the University any serious or continuing noncompliance by University investigators with the conditions outlined in the project as approved, and reporting to the Secretary of Health and Human Services any serious or continuing noncompliance by University investigators who are funded by the Department of Health and Human Services.

Conflict of Interest. No IRB member may participate in the IRB’s initial or continuing review of any project in which the member has a conflicting interest, except to provide information requested by the IRB. For example, when an IRB member is a Principal Investigator for a study being reviewed by the IRB, the member cannot vote on or otherwise participate in the IRB’s review of his or her study.
Initial Training, Continuing Education, and Professional Development of IRB Members.
IRB members shall receive a copy of these IRB standard operating procedures to review research from an ethical and regulatory perspective. In addition, all IRB members must complete the initial educational module on human subject’s research that is available through the National Institutes of Health. Specific information on these resources will be made available by the Administrative Liaison. Members are expected to become familiar with the Federal regulations and Belmont Report.

Compensation of IRB Members. IRB members are not provided monetary compensation for their service on the IRB.

IRB Meetings

Schedule. Meetings will be convened at the call of the chairperson when the chairperson judges the meeting to be necessary or advantageous, or upon the receipt of a joint written request of three or more members. The IRB committee should meet no less than four times per year. It is within the discretion of the IRB Chairperson to cancel or add a meeting in the event there is no business or additional business to conduct.

Quorum. A majority of the membership, including at least one member whose primary concerns are in nonscientific areas, and one person who is not currently affiliated with the institution, shall constitute a quorum and is required in order to convene a meeting for the review of research protocols. Members may be present in person or audio (telephone) or interactive teleconference. Members present via teleconference shall be noted as such in the meeting minutes, which shall also indicate that the members received all pertinent information prior to the meeting and were able to actively and equally participate in all discussions.

Procedure. All convened IRB meetings shall be conducted under and pursuant of Robert's Rules of Order. For a research protocol to be approved it must receive the approval of a majority of those members present at the convened meeting. At a convened IRB meeting, any member may request that an activity that has been approved under the expedited procedure be reviewed by the IRB in accordance with non-expedited procedures. A vote of the members shall be taken concerning the request and the majority shall decide the issue. In cases where research activities were initially approved under expedited procedures and subsequently reviewed by non-expedited procedures, the decisions reached at the convened meeting shall supersede any decisions made through the expedited review.

Substance of IRB Review

Principal Investigators’ Submission to IRB. All research studies involving human subjects should be submitted for IRB review by the Principal Investigator. Submissions should be made through the online system using the IRB submission template form. This form includes all submission requirements (see Appendix A for submission requirements). The Principal Investigator must request either exemption from IRB review, expedited review, or full board review.
IRB Review and Approval of Research.

Initial Review and Categorization of Study: The Chair or the Chair’s designee will review the submitted protocol and determine its status for IRB review (non-research, exempt, expedited review or full board review). Unless the protocol is categorized as exempt from IRB review under 45 CFR 46.101(b) (and described in Appendix C), or does not meet the criteria for human subjects research (45 CFR 46.102(d) and (f)), all human subjects research must be prospectively reviewed and approved by the IRB. For those studies that qualify as exempt or do not meet the criteria for human subject’s research, the Chair will designate the study as such and notify the PI. The IRB Chair may deem a protocol exempt after obtaining enough information from the investigator to determine whether the claimed exemption applies. The members of the IRB are given a list of all recently verified exempt protocols before the next scheduled meeting. No action is required on their part, though they can read exempt proposals and raise concerns. (No continuing reviews or renewals are required for exempt or non-research protocols.)

Expedited Review Procedure: For studies determined to be eligible for expedited review, the Chair or the Chair’s designee from the IRB membership will review the proposed research and determine if the criteria for expedited review as described in the federal regulations ([56 FR 28012, 28022 June 18, 1991, as amended at 70 FR 36328, June 23, 2005]) have been met. If so, the Administrative Liaison will ensure that the Principal Investigator has submitted all the required materials and the Chair will then review the proposed research and assess whether the study should be approved by expedited review according to the criteria for IRB approval of research (section V-C). The decision is communicated to the PI and to the IRB committee members. IRB members are then expected to review the protocol and approval decision and alert the Chair if there is a question or potential issue of concern before or at the next scheduled meeting. Approved protocols are approved for a period of up to one year as determined by the IRB at the time of approval. Approved protocols will also require submission of a continuing review report at the completion of the study or within one year of approval date, whichever comes first (described in Appendix B, and reviewed in section V-B4).

Full Review Procedure: For non-exempt studies that do not meet the criteria for Expedited Review, full board review is required. The Administrative Liaison will ensure that the Principal Investigator has submitted all the required materials, and will add this protocol to the agenda of the next meeting. The IRB committee members will review the proposed research in preparation for discussion at the next meeting. The proposal is discussed at the meeting, and a majority vote from all present members is required for approval. The PI is notified by the Chair of approval, conditional approval pending minor changes, need for major changes before review, tabling, or disapproval (with explanation). Approved protocols are
approved for a period of up to one year as determined by the IRB. Approved protocols will also require submission of continuing review at the completion of the study or within one year of approval date, whichever comes first (described in Appendix B, and reviewed in section V-B4).

**Continuing Review:** The IRB is required to conduct substantive and meaningful continuing review of research. Such reviews shall be conducted at intervals appropriate to the degree of risk of the project, but not less than once per year. (See Appendix B.) The IRB requires that the PI submit a continuing review report within the time period approved. The IRB Chair shall review the protocol file at the time of the continuing review. The PI indicates on the continuing review report if he or she is requesting continuation of the proposal for up to one more year or is terminating the protocol. This must be done before approval has expired. The Chair can approve continuation of research originally approved by expedited review. Approval is discussed at the next meeting and can be affirmed or rescinded. All other continuing reviews must be reviewed by the full board.

**Criteria for IRB Approval of Research.** In order to approve any proposed research to be conducted at the University, the IRB shall determine that all of the following requirements (46.111(a) (1-7)) are satisfied, as quoted below.

Risks to subjects are minimized: (i) by using procedures which are consistent with sound research design and which do not unnecessarily expose subjects to risk, and (ii) whenever appropriate, by using procedures already performed on the subjects for diagnostic or treatment purposes.

Risks to subjects are reasonable in relation to anticipated benefits, if any, to subjects, and the importance of the knowledge that may reasonably be expected to result. In evaluating risks and benefits, the IRB should consider only those risks and benefits that may result from the research (as distinguished from the risks and benefits of therapies subjects would receive even if not participating in research). The IRB should not consider possible long-range effects of applying knowledge gained in the research (e.g., the possible effects of the research on public policy) as among those research risks that fall within the purview of its responsibility.

Selection of subjects is equitable. In making this assessment the IRB should take into account the purposes of the research, and the setting in which the research will be conducted. The IRB should be particularly cognizant of the special problems of research involving vulnerable populations such as children, prisoners, pregnant women, mentally disabled persons, or economically or educationally disadvantaged persons.

Informed consent shall be sought from each prospective subject or the subject's legally authorized representative, in accordance with, and to the extent required by 45 CFR 46.116. The following information will be provided to each subject:
A statement that the study involves research, an explanation of the purposes of the research the expected duration of the subject's participation, a description of the procedures to be followed and identification of any procedures which are experimental;

A description of any reasonably foreseeable risks or discomforts to the subject;

A description of any benefits to the subject or to others which may reasonably be expected from the research;

A disclosure of appropriate alternative procedures or courses of treatment, if any, that might be advantageous to the subject;

A statement describing the extent, if any, to which confidentiality of records identifying the subject will be maintained;

For research involving more than minimal risk, an explanation as to whether any compensation and/or medical treatments are available if injury occurs and, if so, what they consist of, or where further information may be obtained;

An explanation of whom to contact for answers to pertinent questions about the research and research subjects' rights and whom to contact in the event of a research-related injury to the subject; and

A statement that participation is voluntary, refusal to participate will involve no penalty or loss of benefits to which the subject is otherwise entitled and the subject may discontinue participation at any time without penalty or loss of benefits, to which the subject is otherwise entitled.

When appropriate, one or more of the following elements of information shall also be provided to each subject:

A statement that the particular treatment or procedure may involve risks to the subject (or to the embryo or fetus, if the subject is or may become pregnant) which are currently unforeseeable;

Anticipated circumstances under which the subject's participation may be terminated by the investigator without regard to the subject's consent;

Any additional costs to the subject that may result from participation in the research;

The consequences of a subject's decision to withdraw from the research and procedures for orderly termination of participation by the subject;

A statement that significant new findings developed during the course of the research which may relate to the subject's willingness to continue participation will be provided to the subject; and
- The approximate number of subjects involved in the study.

The IRB may approve a consent procedure that does not include or alters some or all of the elements of informed consent set forth in this section. The IRB may waive the requirements to obtain informed consent, provided the IRB finds and documents that:

- The research involves no more than minimal risk to the subjects;
- The waiver or alteration will not adversely affect the rights and welfare of the subjects;
- The research could not practicably be carried out without the waiver or alteration; and
- Whenever appropriate, the subjects will be provided with additional pertinent information after participation.

Informed consent will be appropriately documented in accordance with and to the extent required by 45 CFR 46.117. The consent form may be either of the following:

A written consent document that embodies the elements of informed consent stated above. This form may be read to the subject or the subject's legally authorized representative, but in any event, the investigator should give either the subject or the representative adequate opportunity to read the document before it is signed.

A short form written consent document stating that the elements of informed consent as noted above have been presented orally to the subject or the subject's legally authorized representative. When this method is used, there shall be a witness to the oral presentation. Also, the IRB shall approve a written summary of what is to be said to the subject or the representative. Only the short form itself is to be signed by the subject or the representative. However, the witness shall sign both the short form and a copy of the summary, and the person actually obtaining consent shall sign a copy of the summary. A copy of the summary shall be given to the subject or the representative, in addition to a copy of the short form.

6. An IRB may waive the requirement for the investigator to obtain a signed consent form for some or all subjects, if it finds either:

   (1) That the only record linking the subject and the research would be the consent document and the principal risk would be potential harm resulting from a breach of confidentiality. Each subject will be asked whether the subject wants documentation linking the subject with the research, and the subject's wishes will govern; or

That the research presents no more than minimal risk of harm to subjects, and involves no procedures, for which written consent is normally required outside of the research context.

In cases in which the documentation requirement is waived, the IRB may require the investigator to provide subjects with a written statement regarding the
vii) When appropriate, the research plan makes adequate provision for monitoring the
data collected to ensure the safety of subjects. A general description of the data
and safety-monitoring plan shall be submitted to the IRB as part of the research
proposal. The plan must include procedures for reporting adverse events.

When appropriate, the research study provides adequate provisions to protect the
privacy of subjects and to maintain the confidentiality of data.

When some or all of the subjects are likely to be vulnerable to coercion or undue
influence (i.e. children, prisoners, pregnant women, mentally disabled persons, or
economically or educationally disadvantaged persons), additional safeguards
should be included in the study to protect the rights and welfare of these subjects.

**Actions Taken at Convened Meeting.** IRB actions for initial or continuing review of
research will include the following:

*Approved* with no changes or no additional changes. The research may proceed.

*Approved with minor changes* that are clearly delineated by the IRB so the
investigator may simply concur with the IRB's revisions. The research may
proceed *after* the required changes are made and verified by the IRB Chair.

*Tabled.* Tabled research applications are approvable but require substantive changes
or additional substantive information that must be reviewed at a subsequent
convened subsequent meeting of the IRB. The research may proceed only *after*
the convened IRB meeting has reviewed and approved the required changes to
the research or the information provided.

*Disapproved.* The IRB has determined that the research, as submitted, may not be
conducted by the investigator(s). If the IRB disapproves a research protocol, it
shall include in its written notification a statement of the reasons for its decision
and afford the investigator an opportunity to respond in person or in writing.

**IRB Record Keeping and Required Documentation.**

**IRB Records.** Federal regulations require that the IRB retain records for at least three years
after the termination of the research protocol. All IRB records shall be kept in a
secure place. Access to IRB records shall be limited to the Chairperson of the IRB,
the administrative staff of the IRB, the IRB members, and officials of federal and
state agencies. IRB records will include the following:

- IRB Standard Operating Procedures (SOP)
- IRB membership roster
- Curriculum Vitae for IRB members
- Record of certification of human subjects training for IRB members and Principal Investigators when required by Federal Grant or IRB.
- IRB research application files for all submitted protocols, including all required documentation, continuing review reports, and correspondence.
- Minutes of the convened IRB meetings

The Administrative Liaison shall ensure that a current IRB membership roster is maintained pursuant to 45 CFR 46.103(b) (3).

**Contents of Minutes.** The minutes of IRB meetings shall be compiled by the Administrative Liaison and approved by the IRB. The following specific information shall be included in the minutes:

Attendees by name, absent members, alternate members and the name of the person for whom they are the alternate, consultants, invited investigators and guests, and whether quorum requirements have been met. Members present via teleconference shall be noted as such in the meeting minutes.

Actions taken by the IRB on new and continuation applications; review of protocol and informed consent modifications or amendments; protocol deviations; adverse event reports; reports from sponsors; waiver or alteration of elements of informed consent; suspensions or terminations of research; and other actions. Votes on these actions are categorized as "for”, “against” and “abstain”. The basis for requiring changes in or disapproving research.

A list of research approved since the last meeting utilizing expedited review procedures and specific citation for the category of expedited review of the individual protocol, as well as a list of exempt and non-research protocols.

Report of other business.

Members, who absented themselves by name, name of protocol and reason for the conflict.

**Additional Considerations.**

**Certificates of Confidentiality.** The IRB may determine that special protections are needed to protect subjects from the risks of investigative or judicial processes in research projects that include the collection of highly sensitive information about individually identifiable subjects necessary to achieve the research objectives. Research will be considered sensitive if it involves the collection of information in any of the following categories:

- Information relating to sexual attitudes, preferences or practices;
• Information relating to the use of alcohol, drugs or other addictive products;
• Information relating to illegal conduct;
• Information that if released could reasonably be damaging to an individual's financial standing, employability or reputation within the community;
• Information that would normally be recorded in a patient's medical record and the disclosure of which could reasonably lead to social stigmatization or discrimination;
• Information pertaining to an individual's psychological well-being or mental health.

For such sensitive information the IRB may require that the investigator obtain a Certificate of Confidentiality from the Department of Health and Human Services. Federal funding is not a prerequisite to such a determination that a Certificate of Confidentiality is necessary. The purpose of the Certificate of Confidentiality is to protect against any involuntary release of sensitive information about individual subjects for use in federal, state or local civil, criminal, administrative or other legal proceedings. The Certificate does not prohibit the disclosure of information by an investigator including, but not limited to, child abuse or a communicable disease. The investigator must detail in the informed consent document what information will and will not be protected by the Certificate of Confidentiality.

**Reporting Unanticipated Problems and Adverse Events.** Any adverse events or unanticipated problems involving subjects of any IRB-approved study must be reported to the IRB as soon as possible, but no later than thirty days from the event’s occurrence. Deaths or other serious adverse events should be reported to the IRB as soon as possible, but no later than five days after the event’s occurrence. If an adverse event occurs at a study site other than the University, the Principal Investigator must promptly notify all IRBs governing the protocol.

**Review of Standard Operating Procedures (SOP).** The IRB shall review the IRB SOP at a minimum of every five years. Recommended revisions to the SOP will be discussed and decided on by the full IRB.

**Protocol Amendments:** If a Principal Investigator would like to make a change to an already approved protocol or exempt protocol, he or she can submit an amendment to the protocol through the online system. Minor changes can be reviewed and approved by the Chair, and discussed at the next meeting. Major changes are typically referred to the full IRB committee for discussion and action at the next meeting.
APPENDIX A – Protocol Submission Requirements

The online system provides a template for protocol submission, HIPAA regulations and forms, Conflict of Interest Form, the IRB Membership List, Federal Regulations and Mandatory Education information. Requested information includes the following:

- Name of P.I. and co-P.I.s
- Project title
- Purpose of study
- Background
- Location of study
- Duration of project
- Research plan
- Statistical considerations
- Incentives for subjects
- Subject population
- Potential risks & benefits to subjects
- Description of informed consent
- confidentiality and data security
- funding source
- requested review type
- If applicable, copies of all data collection tools, questionnaires, interview/survey forms, assessment materials, and descriptions of materials that subjects will encounter.
- If applicable, advertisement(s) for subject recruitment. If the forms of advertisement for recruitment contains more than the title, purpose of the study, protocol summary, basic eligibility criteria, study site location(s), and how to contact the study site for further information, they must be submitted to and approved by the IRB prior to distribution or publication of the material.
- If applicable, documentation of training in the protection of human research subjects, and curriculum vitae for each investigator listed on the application.
- If applicable, a Conflict of Interest form for each investigator listed on the application.
- If applicable, a Request for Access to Protected Health Information for a Research Purpose and/or Research Authorization Form
APPENDIX B – Continuing Review Submission Requirements
(Request for Termination or Continuation)

All protocols approved by Expedited or Full IRB review are required to have a continuing review submitted by the PI four weeks prior to the end of the one-year approval period. The PI will be prompted for this information through the online system, and the continuing review information can be submitted through this system. Requested information includes:

- Total # Subjects Enrolled Since Last Continuing Review
- Total # Subjects Enrolled in Study to Date
- Total # Subjects Who Have Died
- Total # Subjects Who Have Completed Study
- Total # Subjects Still Active
- Request for permission to continue and reason, or termination
- Unforeseen/Adverse Events (and describe)
APPENDIX C– Criteria for Exemption Status

Exemption Criteria: All research that is potentially exempt from IRB review shall be submitted to the IRB Chairperson with a request for exemption status. Research activities in which the only involvement of human subjects will be in one or more of the categories listed below are exempt from IRB review pursuant as quoted from 45 CFR 46.101:

(1) Research conducted in established or commonly accepted educational settings, involving normal educational practices, such as (i) research on regular and special education instructional strategies, or (ii) research on the effectiveness of or the comparison among instructional techniques, curricula, or classroom management methods.

(2) Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures or observation of public behavior, unless: (i) information obtained is recorded in such a manner that human subjects can be identified, directly or through identifiers linked to the subjects; and (ii) any disclosure of the human subjects' responses outside the research could reasonably place the subjects at risk of criminal or civil liability, or be damaging to the subjects' financial standing, employability, or reputation.

(3) Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behavior that is not exempt under paragraph (b)(2) of this section, if: (i) the human subjects are elected or appointed public officials or candidates for public office; or (ii) federal statute(s) require(s) without exception that the confidentiality of the personally identifiable information will be maintained throughout the research and thereafter.

(4) Research involving the collection or study of existing data, documents, records, pathological specimens, or diagnostic specimens, if these sources are publicly available, or if the information is recorded by the investigator in such a manner that subjects cannot be identified, directly or through identifiers linked to the subjects.

(5) Research and demonstration projects conducted by or subject to the approval of department or agency heads designed to study, evaluate, or otherwise examine: (i) public benefit or service programs; (ii) procedures for obtaining benefits or services under those programs; (iii) possible changes in or alternatives to those programs or procedures; or (iv) possible changes in methods or levels of payment for benefits or services under those programs.

(6) Taste and food quality evaluation and consumer acceptance studies, (i) if wholesome foods without additives are consumed, or (ii) if a food is consumed that contains a food ingredient at or below the level found to be safe, or agricultural chemical or environmental contaminant at or below the level found to be safe by the Food and Drug Administration, or approved by the Environmental Protection Agency, or the Food Safety and Inspection Service of the U.S. Department of Agriculture.
APPENDIX D –Criteria for Expedited Review

Expedited Approval: Federal regulations permit the IRB Chairperson to review and approve proposed research through an expedited procedure if the proposed research activities (a) present no more than minimal risk to human subjects, and (b) involve only procedures listed in one or more of the categories in 45 CFR 46.110 and 21 CFR 56.110 (as quoted below).

1. Clinical studies of drugs and medical devices only when condition (a) or (b) is met.
   a. Research on drugs for which an investigational new drug application (21 CFR Part 312) is not required. (Note: Research on marketed drugs that significantly increases the risks or decreases the acceptability of the risks associated with the use of the product is not eligible for expedited review.)
   b. Research on medical devices for which (i) an investigational device exemption application (21 CFR Part 812) is not required; or (ii) the medical device is cleared/approved for marketing and the medical device is being used in accordance with its cleared/approved labeling.

2. Collection of blood samples by finger stick, heel stick, ear stick, or venipuncture as follows:
   a. From healthy, nonpregnant adults who weigh at least 110 pounds. For these subjects, the amounts drawn may not exceed 550 ml in an 8 week period and collection may not occur more frequently than 2 times per week; or
   b. From other adults and children, considering the age, weight, and health of the subjects, the collection procedure, the amount of blood to be collected, and the frequency with which it will be collected. For these subjects, the amount drawn may not exceed the lesser of 50 ml or 3 ml per kg in an 8 week period and collection may not occur more frequently than 2 times per week.

3. Prospective collection of biological specimens for research purposes by noninvasive means. Examples: (a) hair and nail clippings in a nondisfiguring manner; (b) deciduous teeth at time of exfoliation or if routine patient care indicates a need for extraction; (c) permanent teeth if routine patient care indicates a need for extraction; (d) excreta and external secretions (including sweat); (e) uncannulated saliva collected either in an unstimulated fashion or stimulated by chewing gumbase or wax or by applying a dilute citric solution to the tongue; (f) placenta removed at delivery; (g) amniotic fluid obtained at the time of rupture of the membrane prior to or during labor; (h) supra- and subgingival dental plaque and calculus, provided the collection procedure is not more invasive than routine prophylactic scaling of the teeth and the process is accomplished in accordance with accepted prophylactic techniques; (i) mucosal and skin cells collected by buccal scraping or swab, skin swab, or mouth washings; (j) sputum collected after saline mist nebulization.

4. Collection of data through noninvasive procedures (not involving general anesthesia or sedation) routinely employed in clinical practice, excluding procedures involving x-rays or microwaves. Where medical devices are employed, they must be cleared/approved for
marketing. (Studies intended to evaluate the safety and effectiveness of the medical device are not generally eligible for expedited review, including studies of cleared medical devices for new indications.) Examples: (a) physical sensors that are applied either to the surface of the body or at a distance and do not involve input of significant amounts of energy into the subject or an invasion of the subject’s privacy; (b) weighing or testing sensory acuity; (c) magnetic resonance imaging; (d) electrocardiography, electroencephalography, thermography, detection of naturally occurring radioactivity, electroretinography, ultrasound, diagnostic infrared imaging, doppler blood flow, and echocardiography; (e) moderate exercise, muscular strength testing, body composition assessment, and flexibility testing where appropriate given the age, weight, and health of the individual.

5. Research involving materials (data, documents, records, or specimens) that have been collected, or will be collected solely for nonresearch purposes (such as medical treatment or diagnosis). (NOTE: Some research in this category may be exempt from the HHS regulations for the protection of human subjects. 45 CFR 46.101(b) (4). This listing refers only to research that is not exempt.)

6. Collection of data from voice, video, digital, or image recordings made for research purposes.

7. Research on individual or group characteristics or behavior (including, but not limited to, research on perception, cognition, motivation, identity, language, communication, cultural beliefs or practices, and social behavior) or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance methodologies. (NOTE: Some research in this category may be exempt from the HHS regulations for the protection of human subjects. 45 CFR 46.101(b) (2) and (b) (3). This listing refers only to research that is not exempt.)

8. Continuing review of research previously approved by the convened IRB as follows:
   a. where (i) the research is permanently closed to the enrollment of new subjects; (ii) all subjects have completed all research-related interventions; and (iii) the research remains active only for long-term follow-up of subjects; or
   b. where no subjects have been enrolled and no additional risks have been identified; or
   c. where the remaining research activities are limited to data analysis.

9. Continuing review of research, not conducted under an investigational new drug application or investigational device exemption where categories two (2) through eight (8) do not apply but the IRB has determined and documented at a convened meeting that the research involves no greater than minimal risk and no additional risks have been identified.
Date: August 27, 2012
To: Academic Council
From: 2011-2012 AC Executive Committee
Re: Academic Calendar Issues

Over the summer, faculty members on the AC Executive Committee brought faculty concerns about the 2012-13 academic calendar to the attention of the Senior VP for Academic Affairs. Specifically that, in July, the Registrar’s office published a revised 2012-2013 academic calendar that presented a number of problems. The start of the Spring 2013 semester was January 14, violating the Journal of Record (JOR) mandate of a break between semesters of “approximately one month”. Furthermore, the Spring semester, by eliminating Tuesdays following a Monday schedule, had markedly different numbers of classes meetings on different days of the week. Though there are good reasons for eliminating these “administrative Mondays,” the resulting inequities are problematic for once a week classes/labs. They also lead to a week’s difference in the length of semesters following the common undergraduates schedules of M/Th versus T/F.

The AC Executive Committee discussed these issues at its most recent meeting. At that time, the SVPAA addressed one of the faculty concerns by agreeing to move the start date of the spring 2013 semester to after the Martin Luther King, Jr. holiday.

The AC EC acknowledges, as many faculty are aware, that these sorts of calendar problems arise periodically because the construction of the calendar is constrained by a number of policies:

• The JOR specifies that the first semester begins in September and must be completed before Christmas, and that there be approximately one month between semesters.
• Faculty contracts begin on September 1 so the Fall semester cannot begin any earlier.
• The JOR specifies a minimum of 3 reading days per semester and says that students cannot be required to take more than 2 final exams in a day.
• Commencement is held the weekend before Memorial Day weekend.
• Various accrediting bodies have requirements about the minimum lengths of semesters.

Furthermore, these problems typically surface after the calendar is published because there is no regular faculty review of the calendar built into our governance structures.

In order to address these matters once and for all, the AC Executive Committee recommends that the Academic Council set up a two-person subcommittee each Fall to review proposed academic calendars and report back to the Academic Council before these calendars are published. In 2012-2013, this subcommittee could also review the constraints described above and, if appropriate, propose policy changes and/or guidelines for calendar construction. During 2012-13, the subcommittee should draft Journal of Record language that would articulate the subcommittee’s permanence as well as its ongoing charge.

MOTION. That the Academic Council elects a two-person subcommittee from its 2012-13 faculty membership to:

(1A) Review all of Fairfield’s policies related to the academic calendar;
(1B) Examine how our academic calendar issues are addressed by other schools;
(1C) If appropriate, propose policy changes and/or guidelines for calendar construction to the AC.
(2) Review any academic calendars proposed in 2012-13 before publication and report concerns to the AC.
(3) Draft language for the Journal of Record that would articulate that a two-person AC subcommittee is appointed every year by the AC in September and is charged annually to review any academic calendars published that year and report concerns to the AC before they are published.
To: Academic Council  
Bob Epstein, Executive Secretary
From: Laura Nash, Chair, Department of Visual and Performing Arts  
Re: Academic Grievance Process time limit language
Date: September 15, 2012

Both the language and timeline of the student grievance process, as presented in the Journal of Record, recently became a concern as a result of the following situation: a student failed a course in Fall 2011, but did not approach Dawn DeBiase regarding the grievance process until July 19, 2012. Dawn showed the student the grievance process as stated in the catalog and notified both the professor and me. As a new chair, I immediately consulted the process as outlined in the JOR/Course catalog and then asked Dawn why this student was being allowed to start the grievance process at such a late date since the assumption, based on current wording, is that the grievance will be submitted the following semester. I pointed out that many professors, following language also found in the JOR, would have kept fall final exams until the end of spring semester, and then shredded the fall exams. Fortunately for the case in question, the professor still had all the materials from fall 2011. Dawn was unaware of the JOR language regarding the retention of course materials and as a result, she and I thought that it would be helpful if the wording were better aligned in the two sections (for example, “reasonable period (usually a semester)” is very subjective) and that a timeline be established. The areas in question are:

Retention of Final Examinations:
That final examinations (blue books, etc.) and term papers or other written assignments used by the professor for determining the final course grade be retained by the professor until the end of the following term, so as to be available for student inspection.
AC: 02/03/1984

and

AC: 4/13/1982
AC: 10/3/2005
AC: 5/03/2010

Time Limits
The procedure herein defined must be initiated within a reasonable period (usually a semester) after the event that is the subject of the grievance, and for graduating seniors, no later than one semester after a degree is awarded.
Also published in the Fairfield University Course Catalog, p48 of AY 11-12

It seems that the process would be compromised if student work were no longer available and this lack of material would be detrimental to all parties involved in the discussion. It is also a concern that without clear language and a timeline, a faculty member will be compelled to enter into, or continue, the grievance process, regardless of how far after the fact the request is made, in order to avoid the threat of a lawsuit. When can a faculty member, (or the Dean’s office, or the SVPAA’s office) say that too much time has passed and the window for the grievance process is over?

In the case in which I am involved, the student met with the faculty member on Wednesday, August 29. The student then wrote Dawn on Sept 4 and stated that: “[the professor] refused to change my grade so now I have to go to the next step.” I have not heard from the student, but wonder how much time this student will be allowed before taking the next step, if that is what the student decides to do. Perhaps the student, upon reflection, has now accepted the explanation of the professor. How do we know that the process is over? This student might decide to contact me over winter break, or next summer, or...

Based on a conversation with a wise person, I understand that some flexibility is required, such as for students who are abroad – though they could be expected to notify the professor that they will be pursuing the grievance process upon their return, thus allowing the professor to retain all materials. Or if a student is in a course with the same professor the following semester, that the student might be hesitant to contest a grade from the previous semester. And there are probably other situations, as well.

I realize there are no easy answers, but I do believe the language in the JOR regarding this process could be better articulated and that a timeline would ensure that the rights of all parties is respected and that necessary documentation would be preserved until the process reaches its conclusion, and we know when it’s over because...??

I would suggest that the language of the “Retention of Final Exams” section of the JOR is satisfactory, but that the language of the “Time Limits” section of the grievance process be amended to something such as:

"The procedure herein defined must be initiated within a semester after the event that is the subject of the grievance."

In addition, I would suggest that timeline language be added to the process, for example:

Procedure - Informal:
Step one: The student attempts to resolve any academic grievance with the faculty member, informing the faculty member and the appropriate academic Dean’s office(s) with written communication. This step must be undertaken in the semester after the event that is the subject of the grievance. If, following this initial attempt at resolution,
the student remains convinced that a grievance exists, she or he advances to step two.

**Step two:** **Within two weeks of the meeting with the faculty member, the student consults with the chair or program director, bringing written documentation of the process to this point. If the student continues to assert that a grievance exists after attempted reconciliation, she or he advances to step three.**

**Step three:** **Within two weeks of meeting with the chair or program director, the student presents the grievance to the dean of the school in which the course was offered, bringing to this meeting documentation of steps one and two. After conversation with the instructor of record and the department chair/program director, the dean will inform the student whether or not the grade shall be changed by the instructor of record. If the student is dissatisfied with the outcome, the dean will inform the student of the right to initiate formal review procedures.**

**Procedure - Formal:**

**Step one:** **Within two weeks of meeting with the dean of the school in which the course was offered, if the student still believes that the grievance remains unresolved following the informal procedures above, she or he initiates the formal review procedure by making a written request for a formal hearing through the dean to the SVPAA. Such a request should define the grievance and be accompanied by documentation of completion of the informal process. It should also be accompanied by the dean’s opinion of the grievance.**

I assume that once the formal process begins that the SVPAA’s office rather than the student will control the timing and that this office will ensure that the formal process unfolds in a timely manner.
Dear Bob,

I recently sent a series of issues for consideration to the FSC, and it has been brought to my attention that one issue is more AC business than FSC business. Here it is, excerpted from that other communication:

4. Revisions to the University Merit Plan should clarify/change the relationship between Standard Merit and pre-tenure faculty. Currently, the University Merit Plan indicates that pre-tenure faculty qualify for Standard Merit automatically during their first three years. But it does not specify whether this is the first three years on their tenure clock or their first three years at Fairfield. We hire a number of folks with time towards tenure and they begin at Fairfield in their second or third year on their tenure clock. I believe it would make more sense that ALL PRE-TENURE FACULTY AUTOMATICALLY QUALIFY FOR STANDARD MERIT WHEN THEY RECEIVE A RENEWAL OF THEIR CONTINUING CONTRACT (that is, as long as they continue on the tenure track). After all, pre-tenure faculty receive a thorough and rigorous annual review, and this requires materials both greater than and different from the University Merit Review process and this review is done on a different calendar (and these aspects are set by the Deans of the schools, not held common across the University). Pre-tenure faculty should submit merit applications only in years when there is funding for Additional and Extraordinary Merit. This change would be very straightforward, and I think would be strongly supported across the University.

Specifically, I propose amending JOR Appendix 12 as follows (deletions in strikethrough, additions in bold):

Because they are already extensively reviewed each year and they should be focused on longer-term, rather than annual, goals, untenured, tenure-track faculty members automatically qualify for standard merit in their first three years as long as their continuing (tenure track) contracts are renewed. In years when further merit is available, they may apply for it. In addition, the merit assessments for untenured, tenure-track faculty should recognize that they do not have as many opportunities for leadership in service as tenured faculty do.

Thank you,
Robbin
Robbin D. Crabtree, Ph.D.
Dean of the College of Arts & Sciences
Fairfield University