NOTE: Terms expire on June 30 of the year indicated, but may be extended automatically until a replacement is named.

**Admissions Committee**

Membership consists of both basic and clinical faculty (majority) as well as a representation of medical students, community members and other University employees (in areas of student services i.e. library).

The committee meets on a weekly basis between the months of September to April. Meetings are usually two hours long (lunch is served). Committee members discuss applicants to medical school who were interviewed in the previous week or two. Each application is discussed along with a review of evaluations given by those who met personally with the applicants during the interview day. Committee members then electronically vote anonymously and the votes are tallied and used to rank the applicants.

Members of the committee are selected based on their commitment to service in the form of interviewing candidates, presenting their applications and their willingness to provide input into medical student selection.

In addition to attending at least 50% of weekly committee meetings, members will usually put in one to two hours weekly in both interviewing students and summarizing applications.

Recommendations for selection of the committee chairperson and its membership are made to the Dean of COM. Each member serves a 3 year renewable term.

**Appointments, Promotions and Tenure Committee**

The APT Committee is charged to review faculty requests for promotion and for a grant of Tenure and to provide their recommendations to the Dean. The Committee is composed of full professors with Tenure, none of whom are chairs of departments. The criteria for promotion and descriptions of faculty tracks are in a document that is available on the Office of Faculty Affairs website. The functions of the committee are also written in a Procedures document available to all faculty also on the website. The Criteria document was recently reviewed and a subcommittee of APT Committee members was formed to begin this review, which was then taken on by the whole Committee.

The Committee is the faculty body that determines faculty promotion in rank and also for Tenure, and so its functions are important to all faculty.

The APT Committee meets monthly. Members spend ~4 hours of review per application.

Members are selected so that most if not all departments of the COMLS are represented; members must be full professors and Tenured. The chair is selected by the Dean and appointed. There is continuous terms currently but members have left and been replaced almost every year.

**Continuing Medical Education Advisory Committee**

The UT CME Advisory Committee meets throughout the academic year. The responsibility of this committee is to review the quality of institutional CME activities, needs assessment data, policy and procedure improvements, and review of evaluation and attendance data from recent CME activities. The Committee reviews and updates, when necessary, the CME Mission Statement and determines if the CME activities are meeting this Mission. Since members represent a diverse background, they make recommendations for CME activities or program improvements from an institutional-wide perspective. Some committee members also serve as course directors for CME activities and provide input regarding implementation of the ACCME standards into the CME activities and suggestions for improvement in the credit application process.
The advisory committee is a requirement of the ACCME which the accrediting body for Continuing Medical Education credit. The Continuing Medical Education Advisory Committee is an academic committee appointed by the Dean of the College of Medicine.

Committee meets three times a year for 1.5 hrs

In addition to the Associate Dean, and Administrative Assistant for CME, the Advisory Committee is comprised of stakeholders representing faculty from The University of Toledo with various credentials and specialties. Experts in other areas that support the CME Mission include the Director of the Health Science Library, Senior Outreach Coordinator, Director of Physician Assistant Studies and the medical director for one of the Area Health Education Centers (AHEC). This diversification within the committee supports the overall institutional mission of providing education and quality care that is student and patient-centered.

**Criminal History Review Committee**

This is an ad hoc committee that meets when a medical school application is flagged for review in the event of concern regarding the background check for an applicant. The committee typically convenes two to three times a year. Membership consists of Admissions Associate and Assistant Deans, as well as, the Assistant Dean for Diversity and two other invited Associate Deans. If necessary, invitations may be sent to a member of campus police or legal affairs.

**Dean’s Committee on Libraries**

The Committee was charged to serve as a communication vehicle between students/residents/faculty and the Libraries at UT, helping the Dean to learn of needs and issues in a timely manner.

Enhancing communication is important

The Committee met monthly or bimonthly last year. It will hold its first meeting this week for fall 2013

Members were selected to provide representation by clinical and basic science faculty, medical and graduate students and residents. Members also include the Mulford library director and the clinical medical librarian. They were appointed by the Dean; the chair was selected and appointed by the Dean; terms are continuous at this time.

**Dean’s Diversity and Professionalism Advisory Council (DPAC)**

The rationale for the committee is to enhance diversity and professionalism programs of UT COM LS utilizing expertise from the institution and community. Both diversity and professionalism are critical to the mission of the institution.

There are no subcommittees associated with DPAC.

DPAC meets quarterly for 90-120 minutes.

The COM Dean and the Diversity office identify individuals and the committee is approved by the COM Dean.

**Executive Curriculum Committee**

- The ECC is charged by the Dean to develop, implement and evaluate the curriculum of the medical school.
- The ECC will provide oversight to all the committees that report to it (Pre-clinical, Clinical and Curriculum Evaluation Committee)
- This curriculum must be organized, well designed and integrated both horizontally and vertically.
- The ECC must periodically review vertically integrated programs including but not limited to ethics, professionalism and cultural competency.
- The ECC must develop specific educational program objectives and periodically review those to maintain the highest standard of education for all its programs.
• Ti is also the responsibility of the ECC to align the educational program objectives with the stated mission of the medical school.
• The ECC must identify specific resources needed by the faculty and students to enhance the quality of teaching and further the mission of the medical school.
• The ECC must monitor the content and workload in each discipline including the identification of omissions and redundancies. The committee should also ensure that each academic period maintains common standards of content. These standards should address the depth and breadth of knowledge required for a general professional education regardless of subsequent career specialty.
• The ECC should receive periodic reports and recommendations from its committees. These recommendations should be discussed by the membership and submitted to the Dean as soon as possible but no longer than 60 days of receipt to bring closure to relevant issues.
• Minutes of the committee meeting and reports to the Dean must document that such activities take place and must show the committee’s findings and recommendations.

The committee meets once a month for an hour. The time commitments outside of committee meetings will vary by committee as well as what is going on in the committee. Members are recommended and appointed by the dean for all committees. Faculty and administrative personnel selected to these committees serve on the committee for a three-year term except for the Teaching Awards recipients who are selected on a yearly basis. Students serve on the committee for two years. The chairs are all currently associate or assistant deans.

Preclinical Curriculum Committee

The work of this committee is outlined in the curriculum governance polices of the College of Medicine.

- It is the responsibility of the PCC to align the basic science “blocks” with the specific educational objectives of the medical school
- It is the responsibility of the PCC to review the stated objectives of the individual educational experiences in each block as well as the methods of pedagogy and student evaluation, to assure congruence with the educational program objectives of the medical school
- The PCC must periodically review its course content, the educational course objectives and evaluation and consider changes in the curriculum based on feedback from students and faculty

This committee oversees all aspects of the preclinical portion of the curriculum. It ensures the clear organization and integration of the content of Years 1 and 2

Meeting times are regularly scheduled for the second Tuesday of the month at 4:30 PM. In addition to the meeting times that members of this committee spend time reviewing items for discussion prior to each meeting.

The membership of this committee is dictated by policy.
It includes
- all active block directors and any assistant or associate block directors,
- additional faculty from any basic science department not represented by a block director,
- a member of the library staff
- two student members elected by the student body

The Associate Dean for Preclinical Curriculum serves as the chair for this committee and her office provides that administrative support for the committee.
There are no term limits for faculty participation on this committee as their term is coincident with their responsibilities as block director. The student term is for two years which they serve during the preclinical portion of their curriculum.

Clinical Curriculum Committee

- It is the responsibility of the CCC to align the clinical clerkships with specific educational program objectives of the medical school.
- It is the responsibility of the CCC to review the stated objectives of the individual educational experiences in each clerkship, as well as methods of pedagogy and student evaluation, to assure congruence with educational program objectives of this institution.
• The CCC must develop, implement and monitor policies related to the amount of time students spend in required activities including the total required hours spent in clinical and education activities during clinical clerkships.
• The CCC must review guidelines regarding the requirements for adequacy of clinical experience in each required clerkship
• The CCC must monitor the student performance in years 3 and 4 so that appropriate clinical skills are acquired.

The committee meets once a month for an hour. The time commitments outside of committee meetings will vary by committee as well as what is going on in the committee. Members are recommended and appointed by the dean for all committees. Faculty and administrative personnel selected to these committees serve on the committee for a three-year term except for the Teaching Awards recipients who are selected on a yearly basis. Students serve on the committee for two years. The chairs are all currently associate or assistant deans.

**Curriculum Evaluation Committee**

• It is the responsibility of the CEC to periodically evaluate the curriculum and recommend changes to the executive curriculum committee based on these evaluations.
• The CEC must evaluate effectiveness of programs by outcomes analysis, using national norms of accomplishments as frames of reference, supplemented by other objective and subjective methods of evaluation.
• The CEC must review blocks and clerkships for assessment of course and educator quality.
• The CEC must monitor the performance and content of the curriculum by reviewing an annual report submitted by each block and required clerkship by the beginning of the academic year. Recommendations based on evaluation of these annual reports should be submitted to the curriculum committee within 90 days of receipt.

The committee meets once a month for an hour although the total monthly time commitment is approximately 3 hours. Members are recommended and appointed by the dean for all committees. Faculty and administrative personnel selected to these committees serve on the committee for a three-year term except for the Teaching Awards recipients who are selected on a yearly basis. The chairs are all currently associate or assistant deans.

**College of Medicine and Life Sciences Assessment Committee**

Works with and reports assessment of students’ learning for all COM academic programs to the University Assessment Committee. This Committee oversees completion and submission of reports by individual program directors, compiles summary report for UAC. One member serves as liaison on UAC.

Evidence of assessment activity required by HLC. Collection and review of data at the level of the institution.

Committee members need to review reports for approximately 30 academic programs in the college. Summary report needs to be written for UAC. Annual commitment is approximately 20 - 30 hours annually. Work needs to be done in the fall so most meetings occur in Aug, Sep, Oct to submit college report to UAC by November.

New committee, initially appointed by Dean Gold. No term limits in place at this time. Chair serves as a service to the group.

**Executive Committee of the College of Medicine and Life Sciences**

Chairman
Anesthesiology
Biochemistry & Cancer Biology
Emergency Medicine
Family Medicine
Medicine
Medical Microbiology & Immunology

Jeffrey P. Gold, M.D.
Alan Marco, M.D.
William Maltese, Ph.D.
Kristopher Brickman, M.D.
Linda French, M.D.
Christopher Cooper, M.D.
Akira Takashima, M.D., Ph.D.
Global Health Committee (Health Science Campus Committee)

Committee responsibilities are to develop and facilitate international academic and clinical experiences for students and residents on the HSC including the College of Medicine, College of Nursing, College of Pharmacy.

This committee also facilitates the preparation and arrangement of these global experiences and handles the administrative oversight of the program. The global health committee encompasses all international educational activities including both clinical rotations and medical mission work. Reviews all applications from medical students and residents global rotations.

Meets monthly for one hour. Members may occasionally be asked to complete special assignments.

Graduate Medical Education Committee

GME Committee Meeting
The ACGME has required that each institution establish a GME Committee that is responsible for monitoring and advising the training programs on all aspects of resident education. The committee is comprised of Program Directors, appropriate faculty from the institution, and peer selected residents from each training program. The responsibilities of the committee include:

1. Stipends and position allocation: Annual review and recommendations to the Sponsoring Institution regarding resident stipends, benefits, and funding for resident positions.

2. Communication with program directors: The GMEC must:
   a) Ensure that communication mechanisms exist between the GMEC and all program directors within the institution.
   b) Ensure that program directors maintain effective communication mechanisms with the site directors at each participating site for their respective programs to maintain proper oversight at all clinical sites.

3. Resident duty hours: The GMEC must:
   a) Develop and implement written policies and procedures regarding resident duty hours to ensure compliance with the Institutional, Common, and specialty/subspecialty-specific Program Requirements.
b) Consider for approval requests from program directors prior to submission to an RRC for exceptions in the weekly limit on duty hours up to 10 percent or up to a maximum of 88 hours in compliance with ACGME Policies and Procedures for duty hour exceptions.

4. Resident supervision: Monitor programs’ supervision of residents and ensure that supervision is consistent with:

a) Provision of safe and effective patient care;

b) Educational needs of residents;

c) Progressive responsibility appropriate to residents’ level of education, competence, and experience; and,

d) Other applicable Common and specialty/subspecialty-specific Program Requirements.

5. Communication with Medical Staff: Communication between leadership of the medical staff regarding the safety and quality of patient care that includes:

a) The annual report to the OMS;

b) Description of resident participation in patient safety and quality of care education; and,

c) The accreditation status of programs and any citations regarding patient care issues.

6. Curriculum and evaluation: Assurance that each program provides a curriculum and an evaluation system that enables residents to demonstrate achievement of the ACGME general competencies as defined in the Common and specialty/subspecialty-specific Program Requirements.

7. Resident status: Selection, evaluation, promotion, transfer, discipline, and/or dismissal of residents in compliance with the Institutional and Common Program Requirements.

8. Oversight of program accreditation: Review of all ACGME program accreditation letters of notification and monitoring of action plans for correction of citations and areas of noncompliance.

9. Management of institutional accreditation: Review of the Sponsoring Institution’s ACGME letter of notification from the IRC and monitoring of action plans for correction of citations and areas of noncompliance.

10. Oversight of program changes: Review of the following for approval, prior to submission to the ACGME by program directors:

a) All applications for ACGME accreditation of new programs;

b) Changes in resident complement;

c) Major changes in program structure or length of training;

d) Additions and deletions of participating sites;

e) Appointments of new program directors;

f) Progress reports requested by any Review Committee;

g) Responses to all proposed adverse actions;

h) Requests for exceptions of resident duty hours;
i) Voluntary withdrawal of program accreditation;

j) Requests for an appeal of an adverse action; and,

k) Appeal presentations to a Board of Appeal or the ACGME.

11. Experimentation and innovation: Oversight of all phases of educational experiments and innovations that may deviate from Institutional, Common, and specialty/subspecialty-specific Program Requirements, including:

   a) Approval prior to submission to the ACGME and/or respective Review Committee;

   b) Adherence to Procedures for “Approving Proposals for Experimentation or Innovative Projects” in ACGME Policies and Procedures; and,

   c) Monitoring quality of education provided to residents for the duration of such a project.

12. Oversight of reductions and closures: Oversight of all processes related to reductions and/or closures of:

   a) Individual programs;

   b) Major participating sites; and,

   c) The Sponsoring Institution.

13. Vendor interactions: Provision of a statement or institutional policy (not necessarily GME-specific) that addresses interactions between vendor representatives/corporations and residents/GME programs.

The ACGME has required that each institution establish a GME Committee that is responsible for monitoring and advising the training programs on all aspects of resident education.

The Committee meets monthly at least 10 times per year. The time commitment is the monthly meeting with limited expected attendance at Executive Session of the GMEC.

The Chair of the Committee is the Associate Dean of Graduate Medical Education. The committee is comprised of Program Directors, appropriate faculty from the institution, and peer selected residents from each training program. The peer-selected residents’ term is yearly and the Program Directors’ term limit as long as he/she remains Program Director.

Graduation Committee

The Committee works with the Dean's office to plan and implement activities for COM graduation, including the graduation ceremony, the awards ceremony held the day before, the graduation booklet, student photographs, student volunteers, and other things needed (hoods/gowns; invitations to invited guests; email and other announcements.

Graduation is a multi-step event and faculty, staff and student involvement is crucial.

The Committee meets each year, starting in February to begin to plan for the June (now end of May) event.

Members are selected based on their administrative or staff roles (dean's staff, associate dean and assistant dean for student affairs, vice-chancellor, office of student affairs and HSC graduate office staff, medical and graduate students). They are appointed by the dean and have continuous time limits at this time.
M.D./Ph.D. Committee

The MD/PhD committee is the oversight committee for the MD/PhD dual degree program. The committee evaluates applicants, makes recommendations for tuition scholarships, tracks and reviews student progress, and reviews and modifies program structure and delivery. The committee meets regularly once per month and is jointly chaired by co-program directors, Dr. Marlene Welch and Dr. Randall Ruch.

Medical Student Conduct and Ethics Committee

The Medical Student Conduct and Ethics Committee oversees all due process hearings for professionalism and/or conduct issues of students within the College of Medicine & Life Sciences. There are no subcommittees.

Per institutional policies 3364-81-04-017-01 Standards of Conduct/Due Process and 3364-81-04-017-02 Professionalism/Due Process, “due process will be provided to a student accused of violating institutional standards of conduct that is beyond a verbal warning or where the action is punitive in nature, or for violations of professionalism or ethics.” The Medical Student Conduct and Ethics Committee fulfills this obligation.

The Committee meets only when a due process hearing is needed, and not all Committee members are involved in each case based on member availability. Hearings occur approximately 1-2 times per academic year. The time commitment for each hearing is variable ranging from 2-3 hours to multiple hearing sessions depending upon the need.

Committee members are selected by the Dean. Recommendations are made by the current chair. The chair is also selected by the Dean based on recommendations from the outgoing chair. There is no term limit imposed on the chair of this committee.

Medical Student Research Committee

The Medical Student Summer Research Committee reviews project descriptions submitted by faculty to insure that students will have a meaningful role in hypothesis driven research over the 10 week period.

The growth in student involvement, 18 in 2009 to 56 in 2013, demonstrates that research experience is considered a valuable component of medical education and to success in the residency match. The committee’s role has changed over this time frame, with its current emphasis being encouragement of the faculty to make time and resources available for student mentoring.

The committee meets once in the early spring and reviews additional project descriptions by email prior to program start in May.

Committee members have requested to participate or been recommended by their Chair. The Chair is appointed by the Dean, terms are 1 year renewable.

Medical Student Scholarship and Awards Committee

Committee responsibilities/duties: The committee is charged with the task of identifying medical students who are eligible to receive scholarships and then choosing the recipients from the eligible students. The committee works with the UT Foundation, Institutional Advancement, and Financial Aid to maintain an ongoing data base of available scholarships and award the scholarships in a timely manner. The Committee also awards certain scholarships to MD/PhD students, College of Nursing and Grad students

Subcommittee: The Admission Committee Scholarship Subcommittee

Importance: The committee through their work awards excellent performance, helps students to minimize debt, and recruits students to the University of Toledo College of Medicine and Life Sciences. Special scholarships are awarded to students with specific experience, background and interests.
The Committee schedule of meetings is determined by scholarship availability which traditionally has occurred during the summer months. In 2013 the first meeting was June 11 and the last was August 26. The meetings occurred every other week.

The Committee is chaired by the Associate Dean of Student Affairs. Members are appointed by the Dean of the College of Medicine and Life Sciences and includes the Associate Dean of Admissions, the Assistant Dean of Admissions, Associate VP of Development, Assistant Dean, Student Diversity Recruitment & Retention, Associate Dean of Clinical Education, Associate Dean for Pre-Clinical Medical Education, and the Assistant Director, Financial Aid HSC.

**Student Promotions Committee**

The Medical Student Promotions committee evaluates all aspects of student performance. If students are not achieving satisfactory academic progress, the promotions committee will review the total student performance record, interview the student, and determine if further intervention is needed. The committee may determine that remedial work or repetition of one or more curriculum components is needed, or that the student should be dismissed. The decision may be appealed to the Dean of the College of Medicine. The committee is guided by the “Medical student academic promotion, remediation and dismissal/due process/appeals” policy (3364-81-04-013-02).

The committee also reviews medical students for infractions of the “Professionalism and related standards of conduct/ disciplinary action and due process/appeals” policy (3364-81-04-017-02). The committee determines if disciplinary actions up to and including whether the student should be dismissed. The decision may be appealed to the Dean of the College of Medicine.

The committee meets 6-7 times per year. Meetings last 1-2 hours.

Potential committee members are identified and their willingness to serve is determined. Appointments are made at the end of the academic year by the Dean of the COM.

The chair is usually chosen from committee members that have several years of experience on the committee and are willing to serve.

There are no term limits.