GEFFEN SCHOOL OF MEDICINE AT UCLA
DEPARTMENT OF SURGERY
BY-LAWS
UCLA SCHOOL OF MEDICINE
DEPARTMENT OF SURGERY BY-LAWS

ARTICLE I - NAME
The Department of Surgery, University of California, Los Angeles.

ARTICLE II - MISSION
To advance the knowledge of surgical science within an environment which provides optimal postgraduate medical education, fosters creative excellence in research, and maintains the highest quality of patient care.

ARTICLE III - MEMBERS

Section 1. - Full-Time Faculty. All members who are salaried at UCLA Center for the Health Sciences (CHS), Santa Monica/UCLA Medical Center or at one of the primary teaching affiliated institutions are appointed to the full-time faculty in one of the following academic series: Regular Rank, In-Residence, Clinical X, Adjunct or Heath Sciences Clinical. Each full-time faculty member shall have one vote in divisional or general departmental faculty meetings.

Section 2. - Voluntary Faculty. Individuals who are community physicians and non-salaried by the University or one of the affiliated institutions may be appointed to the Voluntary Faculty. Initial appointments shall be made for a maximum of three years. Voluntary Faculty must fulfill defined teaching activities on an annual basis in order to remain members. Each Division shall be responsible for setting standards for teaching requirements, expectations for participation in educational activities of the division, and other privileges of the appointment which may include, but are not limited to, use of the UCLA name, use of faculty title, or advertisement of UCLA affiliation. Voluntary Faculty participation is reviewed at least every three (3) years to ensure compliance with Voluntary Faculty Guidelines as stated in divisional policy. Each Division shall designate a review process for appointment and reappointment of Voluntary Faculty, and the results of these reviews shall be reported to the Chair’s Office and subsequently to the Dean’s Office.

Section 3. - Staff. All non-faculty employed by the Department of Surgery are defined as staff under the following classifications: Management and Senior Professionals (MSP), Administrative and Professional (PSS), Research, Clinical, Clerical, and Technical. Members of the Clinical, Research, Clerical, and Technical classifications are represented by recognized bargaining units. Staff may be employed as career employees with
comprehensive University benefits or limited appointment employees with partial benefits.

Section 4. - The Department of Surgery does not discriminate in hiring, promotion, teaching or patient care delivery on the basis of race, religion, gender, national origin, age, sexual preference, or disability.

ARTICLE IV - DIVISIONS AND SECTIONS

The Department of Surgery shall be comprised of separate divisions representing distinct surgical subspecialties. The Departmental Chairman, in consultation with the Surgery Division Chiefs and the Provost/Dean of the School of Medicine, may at his/her discretion create additional, merge, or eliminate divisions contingent upon programmatic or financial justification. The following Divisions shall be recognized as designated academic divisions:

Cardiac Surgery
General Surgery
Head and Neck Surgery
Liver and Pancreas Transplantation
Pediatric Surgery
Plastic Surgery
Surgical Oncology
Thoracic Surgery
Vascular Surgery

All full-time and clinical faculty shall be a member of a division. In addition, there shall be certain administrative programs or units established as separate financial centers. These shall include the Chairman's Office and the Animal Surgery Laboratory. All staff shall be employed within a division or unit.

ARTICLE V - OFFICERS

The Department Chair shall be the executive officer of the Department, responsible to the Dean and Provost for Medical Sciences for the effective operation of the Department's programs, financial management, and for compliance with University policies and goals.

Based on the recommendation of the Provost and Dean for Medical Sciences, the Department Chair shall be appointed by the Chancellor of the University through the customary review and approval process. The Chair is normally appointed for a term of five (5) years and renewal of a Chair's appointment is contingent upon a favorable five-year review conducted by the Chancellor in consultation with the Provost and Dean for Medical Sciences.
The Chair may propose the appointment of an Executive Vice-Chair who would assist the Chair in determining department policy, represent the Department in lieu of the Chair at various School-wide and University committees, and shall serve as Chair in the event the Chair is out-of-town, on vacation, or unable to temporarily carry out his duties as Chair. Appointment of the Executive Vice-Chair shall be approved by the Provost/Dean and renewed annually.

Vice Chairs with designated responsibilities within the Department may be appointed by the Chair with the approval of the Provost and Dean for Medical Sciences. The Chiefs of Surgery at West Los Angeles Veterans Administration Medical Center, Harbor/UCLA Medical Center, Olive View/UCLA Medical Center, Cedars-Sinai Medical Center, and Martin Luther King/Drew Medical Center shall be designated as Vice Chairs of the Department of Surgery upon proposal by the Chair and approval by the Chancellor.

ARTICLE VI - DIVISION CHIEFS

Division Chiefs are appointed and serve at the discretion of the Department Chair. Their appointment is administrative, rather than academic in nature, and therefore may be extended or terminated provided there is programmatic justification to do so. Division Chiefs shall be reviewed at least every five (5) years by a peer review body of surgeons both inside and outside the Department. The review shall include a comprehensive site visit of the division’s programs with interviews with representatives at the faculty, resident, student, and administrative level. Additional interviews with the Chair and related departments or services within the School shall also be conducted. A written, formal report of the reviewing body’s findings and recommendations shall be presented to the Chair within thirty (30) days of completion of the site visit. A copy of the report shall also be forwarded to the Provost/Dean of the Medical School.

ARTICLE VII - POSTGRADUATE EDUCATION

The faculty shall have the overall responsibility for the selection and training of all house staff appointed by the Department of Surgery. The training experience shall assure an optimal provision of education to residents and medical care to patients, consistent with the general and specific requirements of the Accreditation Council on Graduate Medical Education. Requests for assignment of house staff positions by the various institutions affiliated with the Department shall be considered by the appropriate reviewing bodies within the Department. The Director of Surgical Education shall be responsible for overseeing the curricula and policies of the postgraduate educational programs. This position shall be appointed by the Chair and report directly to the Chair for all educational matters.
ARTICLE VIII - MEETINGS

The Department Chair shall convene meetings of the general faculty at least annually. The Chair shall set agenda for the meetings in advance and notices of the scheduled meetings shall be distributed at least one week in advance to the full-time faculty. Upon individual request, voluntary faculty may be permitted to attend general meetings, but the Chair shall reserve the right to deny their attendance. Voluntary faculty shall not have voting privileges. One attendee more than 50% shall constitute a quorum and a two-thirds majority vote shall be required in any matter before the body. All meetings and committees conducted by the Department will utilize appropriate and customary parliamentary procedures for order and voting processes.

ARTICLE IX - STANDING COMMITTEES

The Chair shall appoint standing and ad hoc committees as appropriate. The Department shall maintain the following standing committees:

**Surgical Chiefs** - The Surgical Chiefs Meeting shall be attended by the Surgery Department Chair, Executive Vice-Chair of Surgery, Director of Surgical Education, Chief of each Surgical Division, or his/her designee, and the Executive Administrator of the Department. Other guests may be invited as appropriate on a periodic basis. The Surgical Chiefs Meeting shall normally be held on a monthly basis with at minimum quarterly meetings. The Surgical Chiefs shall approve all Appointments and Reappointments to the UCLA Medical Staff, decide policies on intra- and inter-departmental issues, and provide leadership in strategic planning efforts. The Surgical Chiefs, in conjunction with the Chair, shall have general responsibility for the development, implementation, and enforcement of the administrative, academic, and patient care policies of the Department of Surgery

**Academic Senate** -

The Department of Surgery shall elect two representatives to the Legislative Assembly of the Academic Senate for three-year terms. The Chair, in consultation with the Division Chiefs, shall recommend a slate of six candidates representing the ten surgical divisions. A ballot will then be mailed to the Academic Senate members of the Department. Results of the election ballot will be tallied by the Chairman’s Office and forwarded to the Campus Academic Senate Office.

**Appointments and Promotions Committee** - This is a committee of senior, tenured faculty appointed by the Department Chair. The Chair of the Committee shall convene the Committee in accordance with the Campus dossier submission timetable and assign dossiers to each committee member for in-depth review. The Departmental Academic Personnel Coordinator shall provide staff support, i.e. schedule meetings, distribute the dossiers, record minutes, etc. This Committee shall meet at least four (4) times
annually for the purpose of reviewing all dossiers proposed for appointment, promotion, termination of appointment, change in series, merit increase, five year academic reviews, or other required academic review processes. The Committee shall forward their recommendations to the Executive Committee. Minutes of the meeting shall be discussed at the Executive Committee and maintained both in the academic dossier forwarded to the Dean's Office and in departmental academic files.

**Executive Committee** - The executive Committee is a joint committee of the surgical departments (Surgery, Neurosurgery, Orthopaedic Surgery and Urology) charged with review of academic actions put forward by the appropriate A&P Committee(s). The Executive Committee shall be composed of the following standing members: Department Chairs or their designees, Surgery Executive Vice-Chairman, Division Chiefs, Service Chiefs, the Chair of the Appointments and Promotions Committee, Vice Chair for Surgical Education, Vice Chair for Clinical Research, Vice Chair for Basic Science Research, three (3) elected Academic Senate Representatives in Surgery, an appointed representative of the clinical faculty in Surgery, and two full-time Surgery faculty members appointed by the Chair. Additional members may be appointed by the Chairs of Neurosurgery, Orthopaedic Surgery, and Urology. One more than 50% of the total members shall constitute a quorum. The Department Executive Administrator and/or Academic Personnel Coordinator shall provide staff support and attend the Committee in a non-voting, ex-officio capacity. The Committee shall meet at least four (4) times annually.

The Executive Committee shall vote on all academic actions received from the Appointments and Promotions Committee. The Chair of the Appointments and Promotions Committee shall present the minutes for general discussion of the Executive Committee followed by a written, confidential ballot. Votes are tallied by the Chairman's Office following the meeting. The results shall then be forwarded to the tenured faculty for their vote as well as recorded in the dossiers. The Executive Committee may address and/or vote on other general academic or departmental issues in coordination with the Department of Surgery Academic Senate. Minutes of the Executive Committee shall be signed by the Department Chair and maintained on file in the Departmental Office, as well as in the faculty dossiers.

**Education Committee** - The Education Committee shall be responsible for overseeing the curriculum of the training programs (medical student clerkships, residencies, and fellowships, recommending policy, and adjudicating coverage and resource allocation issues. The Committee is comprised of the Department Chair, Director of Surgical Education, the Residency Program Chairs, Clerkship Director and the Administrative Director of the Education Office. The committee shall meet at least annually, but sub-committees may be convened on a more frequent basis, as specific aspects of the educational program require. The Director of the Education Office shall maintain minutes of all Committee meetings.
**Quality Improvement Committees** – Each Division shall have the responsibility of developing a QI plan to be presented to the Chair for approval. Divisional faculty shall either participate in the General Surgery Morbidity and Mortality conferences, or maintain an independent M&M process. The Departmental Quality Improvement Nurse Coordinator shall represent the Department in the appropriate Enterprise QI process for the purpose of assuring compliance with JCAHO regulations and state licensing regulations, and assuring consistency of QA/QI policies with Enterprise standards.

**Space Allocation Committee**: This Committee shall develop strategic direction, in concert with the Department Chair, with respect to allocation of research space. The Vice Chair for Research shall chair this body. This Committee shall meet at least once annually in order to review the space plan for the Department as well as to review and prioritize any requests for new or additional space, and provide recommendations on retention of existing research space by investigators.

**ARTICLE X - APPOINTMENT AND PROMOTION**

A. The full-time faculty shall be responsible for evaluating candidates for appointment and promotion. Candidates shall be evaluated based on the following criteria: 1) professional training and technical competence; 2) local, regional and national recognition in their academic specialty; 3) evidence of teaching abilities and on-going commitment to the training program; 4) evidence of creative investigation in either basic or clinical research; and 5) university service. Each dossier must contain documentation that strongly supports fulfillment of the aforementioned criteria. Each dossier beyond the initial appointment must contain teaching evaluations by residents and students as well as peer review evaluations by faculty. Appointments, promotions and changes in academic series must also provide letters of intramural and extramural support that attest to the individual's capabilities with respect to the above criteria. Actions shall be reviewed according to the following process:

1. Review and vote of the divisional faculty
2. Appointments and Promotions Committee review
3. Executive Committee vote
4. Department of Surgery Tenured Faculty vote
5. Dean’s Office review
6. Ad Hoc Review Committee (as needed at the discretion of the Chancellor's Office)
7. Committee on Academic Personnel (CAP) review
8. Chancellor’s Office review

Standard on-schedule merit increases within each rank and appointments at the Assistant rank shall be approved at the Dean's Office level.
B. Appointments and promotions in the Clinical (Voluntary) series require at minimum division review of the programmatic need for such actions under consideration. Appointment to this series shall not be automatic either upon departure from the full-time faculty or graduation from a University of California resident or fellowship training program. Appointments at the assistant professor rank and higher shall require a division vote of the Academic Senate faculty as well as the Department of Surgery Executive Committee. Appointments and promotions at the Associate Professor and Full Professor ranks shall require a division vote, vote of the Department of Surgery Executive Committee, as well as a vote of the tenured faculty of the Department.

ARTICLE XI - COMPENSATION PLANS

1. Income Limitation Plan

   a. ILP members are compensated commensurate with the academic base salary only. Other compensation is generated by the individual through the professional practice of surgery. ILP faculty are permitted to independently handle their billing and collection activities by University approved external vendors, as well as to maintain sole shareholder, single employee professional corporations. Billing activities shall utilize the billing software system that is maintained by the School of Medicine. ILP members are required to pay for all University staff and services utilized in the course of performance of their academic duties and clinical practice. ILP members shall be required to submit an ILP Annual Report to the Department no later than the 15th of every June that documents their income, practice related expenses and assessment payable to the Department for the prior calendar year period. ILP members are assessed a quarterly estimated amount in September, December and March based on their prior year's assessment. All balances are due on June 15th, with any credits applied to the next quarter's billing. Members are additionally required to provide the Department with a year-end management report and incorporated members may be required to forward a copy of their federal corporate tax return to the Department's outside accountancy firm for audit purposes. Specific guidelines for the Income Limitation Plan are enumerated in Section V.B.2 of the UC Medical Compensation Plan and Section III.G. of the Campus Procedures.

   The Dean shall assess 20% of annual ILP assessment payments made to the Department. The Department shall assess a percentage of gross ILP professional fee income to cover overall departmental expenses such as resident overage and administrative infrastructure costs.

   b. The Department Chair, or designee, shall monitor compliance with ILP policies and procedures, including compliance with the annual ILP reporting process. Issues involving such ILP policies and procedures, including compliance with the annual reports, shall be resolved by the Department Chair after discussion with
the ILP member. If the ILP member disagrees with the resolution, the matter shall be referred to the Vice Chancellor of UCLA Health Sciences, Dean of the David Geffen School of Medicine.

2. **Health Sciences Compensation Plan:** All Department of Surgery full-time, non-ILP faculty engaged in clinical practice shall be required to be members of the medical compensation plan. New full-time faculty (all ranks) will be guaranteed a salary (X and Y components) for at least their first two years of practice. The base salary (X) and the delta (Y) shall be guaranteed thereafter on an annual basis. After the initial three years of appointment or by special agreement by the Division Chief and the Department Chair, faculty may also be eligible for incentive pay (Z) and their Y may decrease accordingly. Associate Professors and Professors are eligible to receive incentive payments as soon as they reach profitability. All faculty shall be eligible to receive incentive payments no later than the beginning of their fifth year on the full-time faculty. Guidelines of this plan are as follows:

a. The Department Plan permits each division to determine which scale (0-9) of the UC expanded base salary schedule to utilize according to their established academic program units (APU’s). The following exceptions pertain to all divisions:
   1. Fellows and visiting faculty shall be assigned to scale 0.
   2. Faculty on the plan with primary teaching and administrative duties may be assigned to scale 3.
   3. Basic scientists shall be assigned to Scale 1. Exceptions may be made on a case by case basis with the approval of the Department Chair and the Dean’s Office.
   4. Clinical Ph.D. (or other non-MD) practicing faculty shall be assigned to scale 3.

b. Each individual will receive an additional negotiated salary component (Y) based on his/her accomplishments in research, teaching, and administrative work over the past academic year. Performance assessment in these areas shall be made by the individual’s division chief after consultation, as appropriate, with divisional faculty members and the Department Chair. The Y component shall reflect the following criteria:

1. **Research**

   a. Number and quality of research publications, including basic laboratory and clinical research. The assessment of quality shall take into account a subjective estimate of the importance of the findings and the prestige of the journals in which material is published.
   b. Acquisition of peer reviewed research grants or other independent funding.
c. Special awards in recognition of outstanding research.

2. Teaching

a. Extent of resident and medical student teaching
b. Resident/student and peer evaluations of teaching effectiveness
c. Administrative responsibility for resident or medical student teaching programs e.g. as clerkship director, Assistant Dean for Student Affairs, etc.
d. Awards for teaching excellence e.g. Golden Scalpel Award
e. Ratings of effort and effectiveness of teaching made by one’s section chief, division chief or the Department Chair.

3. Administration

a. Amount and quality of administrative work within the Department e.g. as section chief, division chief, on departmental committees, etc.
b. Amount and quality of administrative work on School of Medicine, Medical Center, or University Committees.
c. Amount and quality of administrative work on regional and/or national professional organizations

4. Clinical Practice

a. History of professional fee revenues during the prior three academic years.

b. Likelihood of sustained clinical productivity

The model targets the salary guarantee $(X + Y$ components) to be, at a minimum, within the 20th-50th percentile of the AAMC guidelines for rank and specialty (Total compensation – All Regions). However, the Division Chief shall have discretion in determining the amount of $Y$ to be paid to divisional faculty members. If special circumstances either preclude a division from reaching the 20th percentile target, or necessitate that a division exceed the 50th percentile target, the Division Chief shall propose the level of divisional guarantee with approval by the Department Chair.

c. Incentive pay ($Z$ component) may only be paid to full-time faculty on the group practice plan who generate clinical revenues. Payments shall be made only after all academic and practice costs have been met. If a division is in deficit in their group practice account, $Z$ payments to a particular faculty member(s) shall not be permitted without approval of both the Department Chair and the Dean’s Office.
d. The general principles outlined above in Article XI, Section 2, will be maintained for all non-ILP faculty within the Department who maintain a clinical practice. Individual Divisions may adopt a variation of the Health Sciences Compensation Plan for the Division for the purpose of distributing academic and practice costs among the Division faculty, and computing incentive payments. A plan that varies from the default departmental plan (Sections “e” – “l” below) must be approved by a two thirds majority of the Division faculty and the Division Chief, and is subject to approval by the Department Chair and the Dean. Any Division Compensation Plan must comply with the applicable University and UCLA School of Medicine Health Sciences Compensation Plan rules.

e. In the default Departmental compensation plan, the Z component shall be based on net income after practice expenses (billing and collections, facility usage charges, secretary, other), taxes (Dean’s Department, Division), the reserve requirement, and the faculty salary guarantee (and corresponding fringe benefits) have been covered as follows:

<table>
<thead>
<tr>
<th>Faculty Level</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Assistant Professor</td>
<td>80%</td>
</tr>
<tr>
<td>Associate Professor</td>
<td>85%</td>
</tr>
<tr>
<td>Professor</td>
<td>90%</td>
</tr>
</tbody>
</table>

The remainder of the net income reverts to the Division for discretionary needs. If a faculty member is separating from the University and is due a Z payment, he/she will receive payment computed in the normal fashion and distributed from any remaining accounts receivable in the same manner as faculty continuing on the faculty. The Z payment would reflect professional fee collections received through the faculty member’s last day of employment with the University. Collections received after the faculty member’s separation date would belong to the Department/Division.

f. All professional fee income generated by Compensation Plan members shall be reported to the Department and flow through departmental accounts. Professional fee income includes clinical services to patients, expert witness fees or other like consulting income. There shall be a Dean’s Tax, Department Tax, and Divisional Tax applied against gross professional fee income before any expenses are covered and incentive payments are made. The Dean shall assess 4% of gross professional fee income, net of agreed upon adjustments. The Department tax shall comprise two components: 1) each division shall be assessed its prorated share of the UCLA Medical Group/PSS allocation and 2) each division shall be assessed a percentage of gross professional fee income to cover overall departmental expenses such as resident overage and administrative infrastructure costs. The Division tax may vary between 0-
10% depending upon divisional programmatic needs, and the compensation formula approved for the Division. A division may tax above the minimum at a higher rate with the majority concurrence of its faculty. With sufficient programmatic justification, the Department Chair may at his discretion waive customary departmental and divisional taxation for community-based full-time faculty as long as the community-based faculty pay all direct expenses, as well as an agreed upon annual fee for indirect administrative overhead incurred by the department and/or division.

g. The University requires that reserves be set aside for non-recurring expenditures such as capital expenditures, renovations, start-up support for new programs, etc. A minimum of 5% of total group practice revenues shall initially be set aside as reserves. Effective Fiscal Year 1997-1998, the Medical School is requiring that departments work toward a 25% reserve. The reserve pool of funds may include reserve contributions set aside from prior years. In Surgery each division shall build to the 25% requirement, as funds allow, over a 2-3 year period. Once a division has reached the 25% level, that division may cease setting aside reserves until such time that reserves fall below the 25% level. The Division Chief shall consult with the Department Chair before reserve contributions are ceased.

h. Standard plan expenses represent billing and collections, facility fees, and academic secretary salary and benefits. Other expenses are defined as all other expenses funded through the group practice to support the practice and/or academic activities of the individual faculty member. Examples of such expenses may include, but are not necessarily limited to, the following categories: travel, professional dues and subscriptions, slides/media preparation, office supplies and equipment, photocopying, books, printing and publications, lab coats, pagers, telephones, etc. Allocation of plan expenses varies by division.

The “other expense” category is meant to denote expenses specifically attributable to an individual’s practice or academic activities. The plan does not intend to customarily allocate capital projects or other non-recurring expenses in the “other expense” category. However, there may be circumstances in which programmatic expenses are shared by faculty where mutual benefit is derived or where available discretionary funds are insufficient to support capital projects. Such circumstances would require general agreement by divisional faculty in concert with the recommendation of the Division Chief. The Department Chair shall adjudicate differences, which cannot be resolved at the divisional level. Any expenditure practice which falls outside of these parameters is
inconsistent with the intent and spirit of the plan.

i. If a new Associate Professor or Professor generates a profit before the end of year 2 and requests to go on the incentive plan before year 3, he/she may be permitted to do so, with the approval of the Division Chief in consultation with the Department Chair. Assistant Professors will not be permitted to go on the incentive plan until year 3. Division Chiefs shall be allowed discretion, in consultation with the Department Chair, to place group practice faculty on the incentive plan in years 3, 4, or 5 of their full-time appointment. However, all group practice faculty shall go on the incentive plan as of the fifth year of their appointment. This policy is intended to ensure that the academic/research programs of new faculty have an adequate opportunity to develop.

j. At the point that a faculty member goes on the incentive plan, his/her subsequent cash collections accrue to the calculation of that faculty member's Z compensation, regardless of whether these collections relate to services rendered prior to or following movement on the incentive plan.

k. In general, incentive "Z" payments shall be made on a quarterly basis during the month following the close of each fiscal year quarter. Exceptions may be made at the discretion of a division chief and/or Department Chair, based on divisional need and/or individual circumstances.

l. The default departmental compensation plan may be reviewed and revised by a majority vote of the faculty with approval by the Department Chair and Dean.

m. The Department shall utilize a "UCLA Portion Firm" salary pattern for full-time faculty. Exceptions may be made on a case by case basis with the approval of the Department Chair and the Dean's Office.

3. **Basic Science Faculty**: Effective July 1, 2000, the Basic Science faculty shall be integrated into the Campus Health Sciences Compensation Plan. Compensation shall include base salary (X) and delta (Y) components. Compensation of the basic science faculty shall be negotiated annually between the faculty member and the division chief subject to Departmental Chair and Dean's Office approval. The Department shall utilize an "X+Y Firm" salary pattern for full time faculty. Exceptions may be made on a case by case basis with the approval of the Department Chair and the Dean's Office.
ARTICLE XIII – ACADEMIC ENRICHMENT ACCOUNTS

The Department of Surgery may at its discretion, establish, fund an operate Academic Enrichment Accounts for the purpose of funding expenditures in support of research and academic activities and/or employee development. Any Academic Enrichment Account established is subject to the following guidelines:

1. Academic Enrichment Accounts are funded solely from funds available for distribution under the “Z” component of the faculty’s compensation. Once the available surplus total has been calculated and confirmed by the Department, the department will determine the amount to be set aside for academic enrichment. Such funds will be deposited to a University revenue account and will remain specifically subject to forfeiture for use by the Department if required in accordance with Article VI, Section D of the UCLA School of Medicine Procedures under the UC Health Sciences Compensation Plan. The Department also has the authority to pay out a portion of, or the entire “Z” component to the individual faculty member.

2. Any funds in Academic Enrichment Accounts will be held to support academic, research and professional expenditures of the faculty member in connection with his/her performance of services with the Department. The Department in accordance with substantiation procedures established by the Department and University purchasing and other policies must approve all expenditures from Academic Enrichment Accounts.

3. Unexpended balances in Academic Enrichment Accounts remain the property of the University when the faculty member separates from employment with the University.

4. The Department Chair may, in his/her discretion, direct that funds in an Academic Enrichment Account be used to fund the faculty member’s negotiated salary if the faculty member does not generate sufficient revenue during the year to fund the total negotiated salary for the year as established during the annual salary setting process.

5. The amount or percentage of the surplus to be set aside for Academic Enrichment Accounts will be determined in the sole discretion of the Department based on its assessment of the academic, research and development needs of the faculty member. However, individual faculty may request exceptions for either less or more funds to be set aside for academic enrichment in unusual circumstances, such as when a faculty member has substantially different needs for additional research support funding relative to the other needs of the faculty in the Department.
ARTICLE XIV - APPOINTMENTS TO SCHOOL, MEDICAL CENTER AND UNIVERSITY COMMITTEES

The Department Chair shall sit on standing and ad hoc committees in the Medical School, Medical Center, and the University Campus. In his absence the Executive Vice-Chair or other designee shall represent him. The Department Chair may also propose that members of the Department of Surgery represent the Department on appropriate committees. Individuals may be asked to serve on more than one committee.

ARTICLE XV - AMENDMENT OF BY-LAWS

The Department By-laws may be amended at any time by a quorum vote of the Academic Senate members of the Department of Surgery, provided that the proposed amendment has been submitted in writing and circulated to the entire full-time faculty at least one month prior to the vote being taken. Minor amendments to language in the By-laws that reflect changes in University nomenclature or procedure and do not impact the prerogatives of the faculty made be made by the Chair.

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