College of Pharmacy
Administrative Policies and Procedures

The College of Pharmacy primarily follows all Board of Regents(BOR) and University of Georgia (UGA) policies and procedures, however when further clarification or additional interpretation are needed a college policy may be created. Additional administrative policies may be created for college specific matters where no BOR or UGA policy exists. College of Pharmacy administrative policies and procedures are reviewed and updated on a regular basis.

Policy Number	CoP07-001D
Policy Title	University of Georgia College of Pharmacy **Guidelines for Endowed Positions in the College of Pharmacy**
Attachment(s)	• College of Pharmacy Endowed Positions • Appointments to College of Pharmacy Endowed Positions
Policy Owner	Dean
Responsible Department/Unit	Office of the Dean
Contact Information	Questions about policy content should be directed to the Office of the Dean.
Pertinent Dates	Original Policy Date: June 19, 2009 Revision Date: August 1, 2023
Entities Affected	All departments and units of the college.
Who Needs to Know About This Policy	All faculty, staff, and students of the University of Georgia College of Pharmacy.
Reason for Policy/Purpose	This document provides general guidance for appointing, evaluating and reappointing faculty to endowed positions in the College of Pharmacy. Particular steps may be guided by UGA Human Resources, Faculty Affairs, or other practices or elements (e.g., procedures set forth in the endowment agreement).
Abstract	• Guidelines for Appointment of Endowed Position • Guidelines for Endowed Position Review / Appointment Continuation • College of Pharmacy Endowed Positions • Appointments to College of Pharmacy Endowed Positions

GUIDELINES FOR APPOINTMENT OF ENDOWED POSITIONS

Process Management
- The process for appointment is conducted by the Dean and coordinated by the Dean's Office.

Step 1. Soliciting Nominations
- A call for nominations to the endowed position will be issued (e.g., to Department/Unit Head, to all eligible faculty).
  - The name of the position and language from the fund agreement that relates to the purpose of the position will be provided.
- Examples of information that may be solicited in the nomination process include:
  - A brief overview of the individual's professional accomplishments;
  - Support from the Department/Unit Head for the candidate;
  - The candidate's current Curriculum Vitae.

Step 2. Evaluation and Selection
- The evaluation process may be conducted solely by the Dean or by a group empaneled for such.
- Each nominee will be evaluated in the context of the faculty member's accomplishments and alignment with the intent of the named position.
- The final selection of the candidate to the named position will be made by the Dean.
- Should there not be anyone currently qualified for the endowed role, the position will remain unfilled until a qualified candidate is identified.

Step 3. Notification, Approval, and Appointment
- The Department/Unit Head of the individual to be appointed will be promptly notified of the outcome.
- The Dean will issue an offer of appointment letter to the candidate (including details of the named position) and copy the Senior Director of Development & Alumni Relations and the Director of Finance & Administration.
- After the offer has been accepted by the faculty candidate, the Dean's Office will notify the Senior Director of Development & Alumni Relations and the Director of Finance & Administration.
- The Dean's Office will gather, compile, and submit the required appointment information for approval by the Provost (and subsequently the Board of Regents) per university procedures posted here.
  - While the nomination is moving forward to the Board of Regents, it is appropriate to let the candidate know the status of the nomination. However, it should be made clear that until Board of Regents approval has been obtained, nothing is finalized.
- Upon Board of Regents approval, the Dean's Office will notify the faculty member, Department/Unit Head, Director of Finance & Administration, and the Senior Director of Development & Alumni Relations.
- The Office of Development & Alumni Relations will work with the donor and coordinate a public announcement, recognition for the faculty member, and initiate a stewardship plan.

GUIDELINES FOR ENDOWED POSITION REVIEW / APPOINTMENT CONTINUATION

An endowed position is among the highest honors the University can award a faculty member. All holders of endowed positions, except those in positions that are performance-based (e.g., GRA Eminent Scholars), are reviewed for appointment continuation every five years.

Process Management
- The process is conducted by the Dean and coordinated by the Dean's Office.
- The Dean's Office will initiate the review by contacting the holder of the endowed position (hereafter referred to as "faculty member") with guidance about the impending review, including timelines and documents requested (the review package).

Role of the Endowed Position Holder
- The faculty member will assemble and submit a review package to the Dean's Office per the prescribed timeline.
- The review package will be designed to convey the faculty member's accomplishments in research and scholarly activity during the review period, illustrate the impact of the endowed account funds on their accomplishments, and project their plans to sustain high-level research and scholarly productivity for the requested continuation period (next five years).
- Review packages will include the following for the time period since the faculty member was first appointed or received notice of continued appointment to the position:

Content	Format	Suggested Length
1. Current curriculum vitae	N/A	N/A
2. Current NIH biosketch	N/A	N/A
3. Description of research program (e.g., primary themes / aims)	Narrative summary	1 page
4. Major research / scholarly accomplishments during the review period	Narrative summary with reference to representative examples of major elements (e.g., extramural funding history, highly cited original work)	1 page
5. Impact of research accomplishments on teaching and mentoring trainees (e.g., classroom instruction, student mentoring) during the review period	Narrative summary	1 page
6. Descriptive report of endowed funds used and their impact, on an annual basis, during the review period	Narrative or spreadsheet (PDF format), with description of how funds were used, how the funds uniquely positioned the faculty member for success	2 pages
7. Descriptive spending plan for the requested reappointment period (next five years)	Narrative or spreadsheet (PDF format), with description of how funds will be used annually, how the funds will uniquely position the faculty member for success	1-1.5 pages

NOTE: *Should the faculty member no longer wish to continue in the endowed position, they may communicate that intent and forego the review process.*

Evaluation
- The Dean will evaluate the review package in the context of the faculty member's accomplishments and projected alignment with the intent of the named position.
- Considerations for the evaluation include:
  - Demonstrable and consistent success in research and scholarly work during the review period, as evidenced by extramural funding, peer-reviewed publications in high-impact journals, invited presentations, or other research/scholarly measures as valued by the discipline;
  - Enhancement of the capacity for research and scholarly accomplishments of others through mentoring, instruction, and other measures of impact on students, trainees, and colleagues;
  - Impact of the use of the position's funding on the faculty member's accomplishments;
  - Effective use and management of funds derived from the position;
  - Strategic intent for use of future funding derived from the position.
- If the appointment is continued, a letter will be sent to the holder stating the effective dates of the reappointment.

COLLEGE OF PHARMACY ENDOWED POSITIONS

Endowed Fund Name	Faculty Holder Considerations	Selection / Reappointment Considerations	Spending Guidance
ENDOWED CHAIRS			
Georgia Research Alliance and David Chu Eminent Scholar in Drug Design	• Qualified for tenure upon appointment at the full professor level • Outstanding record of externally funded research and scholarly publications • National / international prominence in the field • Engaged in cutting edge research primarily and have reduced teaching and/or public service duties as appropriate	• Five-year preview cycle • Conducted by the GRA, Vice President for Research, and Unit Head (or designee) to recommend/not recommend continued occupancy of the position	• Salary support and requisite fringe benefits <u>and</u> supplemental salary support and requisite fringe benefits for research support staff • Research, teaching, or service and outreach assistance needed but not otherwise available • Professional travel expenses, memberships, and other expenses that enhance the effectiveness of the Chair beyond those ordinarily provided
ENDOWED PROFESSORSHIPS			
Dr. Samuel C. Benedict Professorship	• Qualified for tenure upon appointment at the associate professor level OR (with Provost approval) be a currently tenured associate professor at UGA • Has at least one significant extramural grant that will last the duration of the Professorship (3 years) • Shall not hold the position in conjunction with any other chair or special professorship • Engaged in teaching, research, public service, or a combination consistent with the duties of the professorship	• Three-year, non-renewable term	• Not for base salary, related benefits or usual clerical aid • May use for supplemental salary support and requisite fringe benefits • May use for research or teaching assistance • May use for professional travel expenses, memberships, and other expenses to enhance the holder's effectiveness beyond those ordinarily provided • Costs related to outreach or service programs connected to the mission of the professorship
Georgia Athletic Association Professorship in Pharmacy	• Full professor • Outstanding national reputation • Shall not hold the position in conjunction with any other chair or special professorship • Engaged in teaching, research, public service, or a combination consistent with the duties of the professorship	• Holder will occupy the Professorship as long as their performance warrants in sole judgment of Dean	• Not for base salary, related benefits or usual clerical aid • May use for supplemental salary support and requisite fringe benefits • May use for research or teaching assistance • May use for professional travel expenses, memberships, and other expenses to enhance the

			• holder's effectiveness beyond those ordinarily provided • Costs related to outreach or service programs connected to the mission of the professorship
Albert W. Jowdy Professorship in Pharmacy Care	• Has normally reached the highest rank in the appointed track • Demonstrated scholarly achievements in pharmacy care • Outstanding national reputation demonstrated by a distinguished record of scholarship, teaching, and/or service • Commitment to develop and embody into related course offerings the stimulation of student curiosity, creativity, and critical thinking • Engaged in teaching, research, public service, or a combination consistent with the purpose (pharmacy care)	• Five-year term, renewable at the discretion of Dean	• Not for base salary, related benefits or usual clerical aid • May use for supplemental salary support and requisite fringe benefits • May use for research or teaching assistance • May use for professional travel expenses, memberships, and other expenses to enhance the holder's effectiveness beyond those ordinarily provided • Costs related to outreach or service programs connected to the mission (pharmacy care) of the professorship
Kroger Professorship in Community Pharmacy	• Support education in community pharmacy • Senior level faculty member • Outstanding national reputation • Engaged in teaching, research, public service, or a combination consistent with the purpose (community pharmacy)	• The holder will occupy the professorship as long as their performance warrants in the sole judgment of the College • Detailed selection process outlined in agreement addendum	• Not for base salary, related fringe benefits or usual clerical aid • May use for supplemental salary support and requisite fringe benefits • May use for research or teaching assistance • May use for travel, memberships, and other necessary support services • Costs related to outreach or service programs in connection with the mission of the professorship (community pharmacy practice)
Millikan-Reeve Pharmacy Professorship	• Full professor • Demonstrated scholarly achievements in pharmaceutical sciences, administrative sciences, or clinical services • Outstanding national reputation demonstrated by a distinguished record of	• Five-year term, renewable at the discretion of Dean • Detailed selection process outlined in original donor agreement	• Not for base salary, related benefits or usual clerical aid • May use for supplemental salary support and requisite fringe benefits • May use for research assistance, travel or other necessary support services

	scholarship, teaching, and/or service		
Panoz Professor of Pharmacy	• Full professor • Demonstrated scholarly achievements in drug development, drug regulation, or pharmacy practice • Outstanding national reputation demonstrated by a distinguished record of scholarship, teaching, and/or other service • Commitment to develop and embody into related course offerings the stimulation of student curiosity, creativity, and critical thinking • Engaged in teaching, research, public service, or a combination consistent with the purpose (drug development, drug regulation, or pharmacy practice)	• Five-year term, renewable at the discretion of Dean • Annual narrative report to donors describing courses, number of students taught, and description of research performed – report must be endorsed by Dean	• Not for base salary, related benefits or usual clerical aid • May use for supplemental salary support and requisite fringe benefits – if so, may not exceed 25% of total salary • May use for research assistance, travel or other necessary support services • May use for professional travel expenses, memberships, and other expenses to enhance the holder's effectiveness beyond those ordinarily provided
Rite Aid Professorship in Community Pharmacy	• Associate or full professor in community pharmacy • Clinical or tenure track • Outstanding national reputation • Engaged in teaching, research, public service, or a combination consistent with the purpose (community pharmacy) • Preference to licensed pharmacist, particularly in GA	• Holder will occupy the Professorship as long as their performance warrants in sole judgment of Dean	• Not for base salary, related benefits or usual clerical aid • May use for supplemental salary support and requisite fringe benefits • May use for research or teaching assistance • May use for professional travel expenses, memberships, and other expenses to enhance the holder's effectiveness beyond those ordinarily provided • Costs related to outreach or service programs and administrative costs in connection with the mission of the professorship (community pharmacy practice)

UGA Athletic Association Distinguished Professorship in Pharmacy and Pharmaceutical Sciences	• Qualified for tenure on appointment at the full professor level OR approval from the Provost for current tenured full professor • Outstanding record in externally funded research and/or scholarly publications • Shall not hold Professorship in conjunction with any other chair or professorship, except institutional professorships (e.g., Josiah Meigs Distinguished Teaching Professorship, Regents' Professorship, Distinguished Research Professorship, University Professorship) • Engaged in teaching, research, public service, or a combination consistent with the purpose	• Five-year term, renewable at the discretion of Dean •	• May use for supplemental salary support and requisite fringe benefits • May use for research, teaching, or service and outreach assistance • May use for professional travel expenses, memberships, and other expenses that enhance the effectiveness of the Professorship beyond those ordinarily provided • May use for any expenditure in connection with the mission of the Professorship
Kenneth L. Waters Pharmacy Professorship	• Qualified for tenure on appointment at the full or associate professor level OR approval from the Provost for current tenured full or associate professor • Outstanding record in externally funded research and/or scholarly publications • Shall not hold Professorship in conjunction with any other chair or professorship, except institutional professorships (e.g., Josiah Meigs Distinguished Teaching Professorship, Regents' Professorship, Distinguished Research Professorship, University Professorship) • Engaged in teaching, research, public service, or a combination consistent with the purpose (pharmacy – broadly defined)	• Five-year term, review cycle at the discretion of Dean based on performance • Sole responsibility and prerogative of the College	• May use for supplemental salary support and requisite fringe benefits • May use for research, teaching, or service and outreach assistance • May use for professional travel expenses, memberships, and other expenses that enhance the effectiveness of the Professorship beyond those ordinarily provided • May use for any expenditure in connection with the mission (pharmacy – broadly defined) of the professorship

Appointments to College of Pharmacy Endowed Positions

Endowed Position	Current Holder	Initial Appointment Date	Scheduled Review Cycle							
			2022	2023	2024	2025	2026	2027	2028	2029
Dr. Samuel C. Benedict Professorship*	Vacant									
Georgia Athletic Association Professorship in Pharmacy	Eileen Kennedy	10/22	✓					X		
Georgia Research Alliance and David Chu Eminent Scholar in Drug Design	David Crich	5/2019			X					
Albert W. Jowdy Professorship in Pharmacy Care	Christopher Bland	4/2023		✓					X	
Kroger Professorship in Community Pharmacy	Henry Young	8/2013	✓					X		
Millikan-Reeve Pharmacy Professorship	Vacant									
Panoz Professor of Pharmacy	Y. George Zheng	4/2023		✓					X	
Rite Aid Professorship in Community Pharmacy	Beth Phillips	12/2013	✓					X		
UGA Athletic Association Distinguished Professorship in Pharmacy and Pharmaceutical Sciences	Yaguang Xi	8/2023		✓					X	
Kenneth L. Waters Pharmacy Professorship	Somanath Shenoy	4/2023		✓					X	

*Three-year, non-renewable appointment

Other Resources

- Additional UGA resources, entitled *Instructions and Resources for Endowed Positions*, can be found at https://provost.uga.edu/faculty-affairs/endowed-positions/.
- As of July 7, 2022, those resources included:
    - Establishing an Endowed Chair or Professorship;
    - Appointing a Faculty Member to an Endowed Position;
    - Modifying an Endowed Position;
    - Required Endowment Values for Different Chairs and Professorships;
    - BOR Meeting Dates;
    - Reports denoting dates endowed positions were established, as well as specific endowed position appointments, across the university.

College of Pharmacy	Policy Number CoP07-003D
Department Head Three-Year Evaluation **Administrative Policies and Procedures**	**Effective Date –** **Last Reviewed 06/19/09**

The Dean is responsible for the review of all Department Heads who have served a term of office of three years, as described in the *Statues of the University of Georgia*, Article IX, Section 5, Paragraph (i).

To be consistent with general practices on Campus and with the University Statues, the process for the three-year review that the College will follow for Department Heads is as follows:

1. The Department Head will be requested to write a 3-6 page self-evaluation, focused primarily on the accomplishments during his/her term as Department Head and plans for the future of the Department. This self-evaluation will be made available to the Faculty of the Department.
2. The Department Head will be requested to provide the names of at least three individuals (two of whom must be at UGA) holding similar or higher administrative positions than the Department Head who can comment on the Department Head as an administrator seen from outside the Department. Comments from these individuals will be sought by the Dean via telephone or in person.
3. A faculty meeting will be held between the Dean and the Department faculty (for the Department of Clinical and Administrative Sciences a meeting will be held on the Athens campus as well as the other distant campuses). Comments from the outside references will be presented followed by a general discussion.
4. A secret ballot will be cast having only two options: (1) To renew the appointment of the Department Head or (2) To initiate a search for a new Department Head.
5. If 30% or more of the Faculty members of the Department vote to initiate a search for a new Department Head, the Dean or the Associate Dean will interview all the faculty members of the Department to determine the underlying reasons for the recommendation.
6. After assessing the result of the interviews, the Dean will inform the President and the Department Head of the result of the evaluation.

Faculty should observe strictly the rules of confidentiality throughout this process. All matters pertaining to the review are confidential and any communication should be through the Office of the Dean. No notes will be kept of the department meeting(s) or individual interviews.

College of Pharmacy	Policy Number CoP07-004D
Disposition of State Property	Effective Date –
Administrative Policies and Procedures	Last Reviewed – 06/19/09

Introduction

The Department of Administrative Services defines surplus property as "any item that is non-consumable, non-expendable, and is no longer needed." These items may or may not be inventoried by the University of Georgia. There are several options for disposing of state surplus property.

Direct Transfers – Transfers from one UGA department to another are allowed with the exception of vehicles.

Surplus – Turn into the UGA surplus warehouse or to a Department of Administrative Services surplus facility.

Sale - All sales must be approved by the Department of Administrative Services and conducted by authorized Property Control personnel.

Destruction - Items that have been destroyed by flood, fire, lightening, etc.; can be removed from a department's inventory as destroyed. This method of disposal requires the approval of the Department of Administrative Services and the completion of an Affidavit of Destruction.

State property cannot be disposed of as refuse without the prior approval of the Department of Administrative Services.

(Taken from the University of Georgia Administrative Policies and Procedures)

College of Pharmacy Procedures for the Disposition of State Property

In the College of Pharmacy, the Facilities Coordinator is responsible for the overall use, transfer and disposal of all state property in the College.

In accordance with the University of Georgia Administrative Policies and Procedures, the following procedures have been developed by the College of Pharmacy and must be followed to properly dispose of state property items that are no longer needed by you or your department.

1) Provide a written list to the Facilities Coordinator of all items to surplus. An authorization signature from the Department Head should be included on this list. The list must include:

- Brief description of each item to be removed.
- Current location of each item.
- Manufacturer's serial number (if applicable).
- UGA inventory number (if applicable).

2)   The Facilities Coordinator will promptly arrange to meet with the responsible person to inspect the listed items and to discuss any steps that are necessary to prepare the items for removal.

3)   Once the items have been prepared for removal, the responsible person must sign the required UGA certifications regarding data security, chemical, biological and radiological safety, as applicable.

4)   The Facilities Coordinator will arrange for the removal of the items. Please make sure that all items are accessible on the date of removal.**

5)   Upon pick up of the items by the Facilities Coordinator or the UGA Support Services unit, the Facilities Coordinator will provide a receipt to the responsible person. This receipt should be retained by the Department through the following year's physical inventory count.

**   In order to comply with safety standards set forth by the Georgia Fire Safety Laws and to guard against theft of unattended equipment, at no time should University equipment be placed in the hallway or any other public space in the College of Pharmacy for pickup except by written authorization from the Facilities Coordinator.

College of Pharmacy	Policy Number CoP07-005D
Distribution of Time Between Administration, Teaching & Research for Tenure Track Faculty Administrative Policies and Procedures	**Effective Date –** **Last Reviewed – 06/19/09**

The standard budgetary appointment for tenure track faculty in non-administrative positions will be 50% research and 50% teaching. Faculty with administrative duties at the Departmental and College level can reduce the percentage of assigned teaching and research dependent upon the time commitment of administrative duties assigned. Implicit in this budgetary distribution is that 10% of the overall time be associated with service to the College or University.

Faculty can increase their fractional research time up to 75% after agreement with the department head and approved by the Dean. Percentages higher than 50% must be "bought out" by the respective faculty. The buyout must come from faculty share of salary return from contract and grants, endowments or equivalent sources. Percentages over 75% will only be permitted under special circumstances, such as under career development grants, research (sabbatical) leaves, etc.

Teaching percentage can be increased above 50% upon agreement between the individual faculty and the Department Head.

The teaching duties assigned should approximately parallel the percentage of teaching appointment, realizing that the comparison between different types of teaching sometimes are difficult, that other duties (such as course coordination, development of new courses, etc.) may substitute for direct teaching and that vacancies and other economic situations may warrant deviations from this norm.

Consideration for merit should be based upon the distribution between Administration, Teaching and Research. For example, for a person with 50% research and 50% teaching, 45% of the weight for merit should come from teaching, 45% from progress and achievements in research and 10% from service to the College and University. For a person with 100% teaching the merit should solely be based upon teaching and service.

Variation from this norm may be granted by the Dean upon recommendation by the Department Head.

College of Pharmacy	Policy Number CoP07-009D
Hiring, Merit & Promotion for Faculty Spanning More Than One Unit Within the College of Pharmacy Administrative Policies and Procedures	**Effective Date –** **Last Reviewed – 06/19/09**

The College of Pharmacy will follow the following guidelines for initiating hiring, merit and promotion:

<u>Faculty in non-CAP units holding clinical titles in CAP</u>. When a position is budgetarily allocated to a unit, this unit is considered the faculty member's Home Unit. Searches are initiated by the Home Unit. However, a candidate cannot be offered a position until the individual has been approved of by CAP. Normally, therefore, the search should be conducted together with CAP. Merit raises are initiated by the Home Unit, but require input from CAP. Promotions are initiated by CAP but require concordance by the Home Unit to go forward.

<u>Faculty having budgetary appointments in two or more departments and/or units</u>. The unit with the highest budgetary contribution will be considered to be the Home Unit. The Home Unit will initiate searches, merit and promotion requests (unless the faculty title resides in a different unit, then the promotion is initiated by the unit providing the faculty title). However, all units with budgetary contributions must agree to an appointment. All units with budgetary contributions are to provide input to promotion and merit requests.

<u>Example:</u> A position is to have a clinical appointment in CAP, but will be budgetarily paid by CE (30%) and the Experiential program (70%). The Experiential program is in this case the Home Unit and will initiate hiring and merit requests. However, before an offer can be made for hiring, both NT and CAP have to approve of the candidate. Merits will be initiated by the Experiential program with input from NT and CAP. CAP will initiate any promotion to Associate and Full Clinical Professor, but this will require that both the NT and the Experiential programs agree that the faculty member is ready.

College of Pharmacy	Policy Number CoP07-010D
Laboratory Safety Regulations for College of Pharmacy Administrative Policies and Procedures	Effective Date – Last Revised – 06/19/09

1. Each laboratory will be assigned a faculty member (PI) who will be responsible for the laboratory safety. Laboratories used by more than one PI, will be assigned a responsible PI by the Department Head. If no one has been assigned, the Head of the Department will be the default responsible PI.

2. The PI is responsible for the safety of his or her assigned laboratories and that they meet operational standards set by the University. This responsibility includes all personnel working in the laboratory, regardless of whether they are working for the PI or not. This responsibility cannot be delegated.

3. Any PI who does not keep laboratory safety violations to a minimum in his or her assigned laboratory can lose the privilege to operate an independent laboratory in the College of Pharmacy. Situations that may result in loss of laboratory privileges are as follows:
    a. Citations of three or more Major[1] violations.
    b. Receiving an extensive number of violations[2] (6 or more minor and/or major violations) and failing to implement acceptable remedies by the next inspection.
    c. Safety conditions that are sufficiently egregious that Environmental Safety, or EPD after inspection recommend a laboratory shutdown.

   In any of these situations there will be mandatory submission of plans to the College of Pharmacy Facility and Safety Committee that outline how future violations will be avoided. There will also be mandatory meeting with the Facility and Safety Committee to defend the proposed plans and to explain why laboratory privileges should not be revoked. Further violations will results in automatic review of laboratory privileges by the Facility and Safety Committee.

4. New PI, students, postdocs and staff are required to take the Right-to-Know safety training within two months of employment.
    a. Each PI with an active laboratory is responsible for ensuring that all students, postdocs and all other relevant scientific staff with access to their laboratories maintain up-to-date required training, including annual Right-to-Know training, Chemical-specific Right-to-Know training, Hazardous Materials training, and Radiation safety training, etc., as appropriate for the laboratory.
    b. Laboratory personnel purchasing, receiving or handling chemicals must have an original signed "Employee On-going Chemical Specific Right-to-Know Training Record" in their personnel file in the College of Pharmacy Business Office. This document must be kept in the Business Office for a minimum of three years as required by University policy. Laboratory personnel will be barred from ordering chemicals if current documentation is not on file.

c. To facilitate record-keeping and timely verification of lab personnel training status, a copy of the original laboratory safety training records will be included in the annual laboratory pre-inspection currently performed by the Facilities Coordinator. Each faculty member is responsible for providing a current list of ALL laboratory personnel and the appropriate training required prior to the annual pre-inspection. The Facilities Coordinator will determine if current training records are on file for each lab member and forward a list of missing training documents to the Facilities and Safety Committee and the appropriate Department Head.

5. All spills and use of spill kits must be reported to Environmental Safety.

6. The Facility and Safety Committee is available to work with individual PIs to establish and maintain viable plans for lab safety. Please contact the College laboratory Safety Officer or Chair of the Facility and Safety Committee for help.

---

[i] Major violations are:

1. Possession of expired chemicals 3. Lack of adequate identification of hazardous waste
2. Open chemical waste containers 4. Not keeping separate storage of incompatible chemicals

[ii] If any of the following is missing, a citation will be made. (Check the Laboratory Safety Manual for updated regulations.)

Section 1 – Laboratory Postings
  A. Door signs present/updated
  B. Refrigerators have lab use only label
  C. Emergency phone numbers posted in lab
Section 2 – Chemical Storage
  A. Chemicals stored by class/compatibility
  B. Acids and bases in secondary containers
  C. All chemicals properly labeled
  D. No outdated peroxide formers present
  E. Flammable liquids stored properly
  F. Allowable total flammable volume allowed in lab is not exceeded
  G. Allowable volume outside flammable cabinet is not exceeded
  H. Explosion proof refrigerator for flammable
  I. Waste containers properly labeled/stored
  J. Waste containers properly closed
  K. Gas cylinder properly labeled/anchored
  L. Lecture bottles properly labeled/stored
Section 3 – Emergency Equipment
  A. Fire extinguishers present/inspected
  B. Safety shower: tested/unobstructed
  C. Safety shower location posted
  D. Eye wash: tested/unobstructed

  E. Eye wash location posted
  F. First aid kit present
  G. Spill kit appropriate for laboratory
Section 4 – Laboratory Equipment
  A. Belt guarded on motors and pumps
  B. Equipment properly grounded
  C. Electrical cords not frayed
  D. Only UL 1449 rated power strips employed
  E. 1449 strips used with computers and equipment
  F. Outlet wiring correct
  G. Extension devices used only temporarily
  H. Fume hood rating (OK, Caution, Danger)
Section 5 – Laboratory Conditions
  A. Hand washing facilities available
  B. Sink conditions OK
  C. Corridors and exits unobstructed
  D. Aisles unobstructed
  E. Lab doors closed to main corridor
  F. No eating, etc., around hazardous chemicals
  G. Personal protective equipment available/used
Section 6 – Laboratory Records
  A. RTK records and MSDS maintained
  B. Chemical inventory kept

College of Pharmacy	Policy Number CoP07-014D
Reward for Teaching Excellence **Administrative Policies and Procedures**	**Effective Date –** **Last Reviewed 07/01/2020**

Teaching is central to the mission of the College. The mission statement of the College states that we are "To transform pharmacy practice, drive scientific discovery, and elevate the health and well-being of Georgians and the global community through innovative, collaborative, and distinctive academic programs, research, and service." As such, it is essential that all faculty be involved in delivering high quality teaching and that the faculty are appropriately recognized for this important activity.

Evaluation of teaching
- The various administrative unit heads of the College will review each faculty member's teaching load and assess the quality of the education provided in the individual courses to determine exemplary and innovative practices that can be emulate elsewhere, and to help identify what can be improved upon and where adjustments and changes are needed.

Award for teaching excellence.
- Each Department or administrative unit head shall use a system that will allow the previous year's documentation of quality of teaching to be an important factor in determining merit raises (in years where we are allowed merit raises).
- Starting in FY2020-2021, the College teaching awards will result in a one-time award of up to $1,000 provided funds are available.

Policy Number	CoP08-001D
Policy Title	University of Georgia College of Pharmacy **Administrative Succession**
Attachment(s)	None
Policy Owner	College of Pharmacy Dean
Responsible Department/Unit	Office of the Dean
Contact Information	Questions about policy content should be directed to the College of Pharmacy Dean.
Pertinent Dates	Original Policy Date: September 18, 2008 Last Revision Date: July 10, 2023
Entities Affected	All departments and units of the college.
Who Needs to Know About This Policy	All faculty, staff, and students of the University of Georgia College of Pharmacy.
Reason for Policy/Purpose	The policy outlines the succession system that is in place to assure a smooth and orderly transition upon a planned or unplanned absence of the Dean and/or other key members of the leadership team.
Abstract	The procedure for Administrative Succession of the Dean and Unit Heads.

Background

It is inevitable that a change in College leadership will take place. It is important that a succession system be put in place to assure a smooth and orderly transition upon a planned or unplanned absence of the Dean and/or other key members of the leadership team. The College must be in a position to operate without disruption and in a manner that ensures timely transfer of critical information including, but not limited to, operations, financial status, established policies and procedures as well as information regarding organizational commitments previously entered into that must be honored. Therefore, it is imperative that critical current information, as well as key historical information, be maintained in an ongoing manner such that it can be collectively transferred in the event of change within the College leadership.

Procedure
Transition of Dean

1. The scheduled departure or extended absence of a Dean must be reported to the Provost well in advance of the departure or absence.
2. If the departure or absence is unscheduled, the Provost's Office must be contacted as soon as possible by the Dean. If the Dean is not available, it is incumbent upon the senior ranking Associate or Assistant Dean to inform the Provost's Office. This communication will be coordinated by the Dean's Office.
3. Upon the departure of the Dean, the Provost appoints an Interim Dean until a new Dean can join the College.
4. Upon departure of the Dean, the Assistant Dean for Institutional Effectiveness and Strategic Initiatives will notify ACPE and provide information regarding the plan for their replacement and interim leadership arrangements.
5. The Dean's Office will coordinate a meeting with the Executive Committee, the Interim Dean, and the incoming Dean to review College operations, budgets, and obligations, as well as familiarize them with the College Central Repository and with College administrative policies and procedures.
6. The Dean's Office will arrange for the Incoming Dean or Interim Dean to meet with the Provost to review critical College/University administrative relationships, obligations, and relevant communications within 10 working days from the start date.

7. The Dean's Office will arrange for a meeting with the Office of Legal Affairs to review critical policies and documents pertinent to the operation of the College within 10 working days from the start date.
8. The incoming Dean will meet with Faculty Council to review faculty issues and College Bylaws, as coordinated by the Director of Faculty Affairs.
9. The Dean's Office may arrange for New Dean training opportunities such as that available through AACP.

Transition of Unit Head
1. Scheduled departure and extended absence of a Unit Head must be reported to the Dean well in advance of the Departure or absence.
2. If the departure or absence is unscheduled, the Dean's Office must be informed as soon as possible.
3. The Dean will appoint an Interim Unit Head until such time that a permanent Unit Head joins the unit.
4. The Dean, key unit staff and faculty, and members of the College Executive Committee will meet with the Interim Head and the new Head respectively, to review the unit's operations, budget, policies and procedures including any special conditions governing the operation of the unit.
5. The Dean's Office may arrange for administrative training such as that available through the University and AACP.
6. The incoming Head will meet with Faculty Council to review faculty issues and College Bylaws, as coordinated by the Director of Faculty Affairs.

College of Pharmacy	Policy Number: CoP08-002D
Subject: Central Repository Administrative Policies & Procedures	Effective Date - 09/18/08 Last Reviewed – 06/19/09

Procedure for Processing Central Repository Documents

Triaging

All documents identified as being Central Repository documents i.e., documents that have been determined to have enduring or semi-enduring (limited to a certain time period) obligations that are received in the Dean's Office will be held separately from the regular mail in a folder labeled **"Central Repository Documents"** to be reviewed with the Dean on a regular basis (if the Dean's calendar permits, this means on a daily basis).

These documents shall be treated in the following manner:
- Document will be date stamped upon receipt.
- The deliverable(s) as per the document will be identified.
- The principal parties whose responsibilities to meet the deliverable(s) /obligation(s) will be identified.
- Assigned duties will be communicated to the principal parties responsible for meeting the obligations.
- A system for monitoring adherence to the deliverable(s) /obligation(s) will be created.
- An annual report will be provided to the Dean's Office by the principal parties responsible for meeting the obligations.
- A folder will be created for the document(s) which will then be placed in the Central Repository in the appropriate file cabinet/drawer, indexed for quick location and retrieval and a notation of annual report schedule as appropriate will be placed in the Dean's Master Calendar.

The actual procedure that will be followed is dependent upon the deliverable(s) /obligation(s) identified in the document. For example, who is affected, what is the time frame of the deliverable(s)/obligation(s), whether monitoring is part of dual governance responsibilities, etc. The procedure determined to be used to meet the obligation(s) will be attached to the document.

Security of Records

Records cannot be removed from the Central Repository without approval of the Dean or his designee. Whenever a record is withdrawn whether for review or photocopying, an outcard (showing date, pulled file name and name of person requesting) must be inserted in its place.

Archiving

Documents in the Central Repository shall be reviewed on an annual basis. Documents that are no longer needed shall not be destroyed but archived in the University of Georgia Archives.

University of Georgia College of Pharmacy
Central Repository
Document Identification
Monitoring/Reporting Adherence Assignment

Principal parties whose responsibilities to meet the deliverable(s)/obligation(s) and assigned duties, if separate:

Principal party	Assigned duty (i.e. financial, etc.)

Annual Reporting

_____
(Year)

I attest that all deliverables have been monitored and adhered to with no deviation from the original document.

(Signature)	(Title)	(Date)

I attest that all deliverables have been monitored and adhered to with the following changes as noted below:

_____

_____

_____

(Signature)	(Title)	(Date)

I attend that not all deliverables have been adhered to (please provide explanation on reverse side of form):

(Signature)	(Title)	(Date)

College of Pharmacy	Policy Number: CoP08-003D
Subject: Document Receipt/ Distribution/Retention Administrative Policies and Procedures	Effective Date – 09/18/08 Last Reviewed – 06/19/09

Background

The College of Pharmacy has grown considerably in scope and complexity over the course of the past decade. We now have many more employees and programs located in many different physical locations. While this growth can certainly be viewed as being positive, it does bring with it certain administrative challenges in effectively managing organizational knowledge operations and organizational knowledge loss across the College.

The College is continuously called upon by various entities to provide a wide range of information regarding our activities including information relating to compliance and adherence to numerous agreements, policies and procedures. It becomes imperative that the Dean's Office establish a Central Repository and follow-up system to assure that information critical to the operation of the College is maintained in a manner that ensures appropriate oversight, accountability and that allows the College to operate without disruption in the event of a change in leadership.

Policy

Originals, or copies if appropriate, of **all** documents that relate to the obligation of action(s) or control, review, commitment of time and/or resources[1] between any College employee or College unit and an outside source[2] must be submitted to the Dean's Office and appropriate Department (or Unit) Office at the time they are executed. Copies (or originals) of the document(s) identified as Central Repository document(s) must also be maintained by the originating faculty member and/or his/her administrative unit as appropriate. The retention of documents must minimally comply with the Board of Regents' Policy on Records Management (http://www.usg.edu/usgweb/busserv)

The documents will be handled according to Procedure CoP-002D for inclusion in the Central Repository.

---

[1] Includes, but is not limited to, MOUs, service agreements, leases, IPPEs, APPEs, grants and contracts, settlement agreements, legal issues, material transfers, consulting agreements, etc.

[2] Includes, but is not limited to, NIH, federal, state and local governmental entities, universities, companies, health care facilities, pharmacies, physician practices, foundations, independent contractors, etc.

Policy Number	CoP10-001D
Policy Title	University of Georgia College of Pharmacy **Bloodworth Conference Room Usage**
Attachment(s)	None
Policy Owner	Dean
Responsible Department/Unit	Office of the Dean
Contact Information	Questions about policy content should be directed to the Office of the Dean.
Pertinent Dates	Original Policy Date: August 17, 2010 Last Revision Date: August 31, 2023
Entities Affected	All departments and units of the college.
Who Needs to Know About This Policy	All faculty, staff, and students of the University of Georgia College of Pharmacy.
Reason for Policy/Purpose	This document provides guidance for the use of the Bloodworth Conference Room.
Abstract	General use procedures. Room capacity and equipment available. Food consumption. Reservation requests.

Policy/Procedure:
The Bloodworth Conference Room has been designated for use by the College of Pharmacy Dean and Senior Administrators and for other high-level meetings or occasions that serve a college-wide interest or help the College cultivate relationships with internal and external entities relevant to its mission.

The Bloodworth Conference Room is not intended for use as a classroom or other general workspace.

Room Capacity and Equipment Available
The room furnishings include a conference table that seats 14 people comfortably. Additional seating for 11 is available around the room. The room is equipped with an audio-visual Crestron control system that has the capability to project wirelessly from a laptop and the ability for videoconferencing via Zoom. In addition, the room has a dry erase board.

Requests for audio-visual or videoconferencing support should be made through the UGA College of Pharmacy's KACE ticking system no later than four days prior to your scheduled meeting/event. If you need immediate assistance on the use of any equipment available in the room please contact the IIT office at (706) 542-1396.

Food Consumption
Light snacks or boxed lunches are allowed in the conference room. There is an adjoining kitchen available for the purposes of storing or preparing food to be consumed in the conference or just outside in the adjoining lobby space. Do not remove any equipment from the kitchen. General clean-up is the

responsibility of the administrator using the conference room.

General Use Procedures
Any individual or group using the conference room is required to follow all fire and safety regulations. No hanging, pasting, nailing or stapling on ceiling or walls. The room should not be reconfigured in any way other than moving chairs. Chairs shall be returned to their original arrangement prior to departure. In addition, all doors to the conference room and kitchen must be closed and locked after use, and all audio-visual equipment must be turned off.

Reservation Requests
Requests will be taken on a first-come, first-serve basis; however, the Dean's Office reserves the right to cancel the reservation in the case of an unforeseen conflict. Notification will be made in advance if a cancellation is necessary. The Dean's Office reserves the right to refuse requests for events deemed inappropriate for this conference room.

To request use of the Bloodworth Conference Room please contact: Executive Assistant to the Dean, College of Pharmacy Dean's Office (706) 542-1914.

College of Pharmacy	Policy Number CoP10-002D
Subject: New Faculty Orientation	**Effective Date – 12/22/10**
Administrative Policies and Procedures	**Last Revised – 10/03/11**

In addition to any University-wide orientation for new faculty, the College will offer a one-day orientation for new faculty each fall semester. The focus on the orientation will be on specific issues relating to the College of Pharmacy. The issues may vary from year to year but will cover topics such as the College administrative structure and organization, the profession of pharmacy, Doctor of Pharmacy curriculum, graduate and undergraduate programs offered by the College, faculty services offered, and where to go for support relating to teaching, grant applications, student affairs, etc.

The faculty will also be oriented as to individual units' mentoring and development programs, complaint policy, copyright laws, open record act, FERPA, HIPAA, etc., to the degree not covered by the University-wide orientation.

College of Pharmacy	Policy Number CoP11-001CC
Subject: Course Review Process	Effective Date – 08/15/11
Administrative Policies and Procedures	Last Revised – 10/03/11

PharmD Curriculum Course Review Process

Framework of the Review Process

The Curriculum Committee developed a criteria-based, systematic course review process which consists of two parts: an overall curriculum review process and measurable criteria for evaluation of specific courses within the curriculum. The committee has started the implementation of this process during Fall Semester 2011.

The Curriculum Committee structures the process based on the defined function of the course in relation to the overall curriculum. The curriculum is divided into four categories as outlined in the table below. One category a year is reviewed with the first review to start FY11/12 and the full cycle of review completed over four years, at which time the cycle will start over again.

The Curriculum Committee documents and submits an overall assessment (or specific conclusions) regarding the overall PharmD curriculum review process at the end of the fourth year (or every four years). The four year cycle allows for the majority of the curriculum to be reviewed in-depth more than once during an accreditation cycle.

Electives are reviewed a minimum of every 5th year or as determined by the strategic plan, results of the assessment data collected, or needs determined by external constituencies. Additionally, the review of IPPE courses utilizes additional methods of evaluation due to the experiential nature of those courses.

"Foundation" Pre-requisite or co-requisite courses	"Skills" Skill development courses	"Stand Alone" Courses with no pre- or co-requisites	"End" Courses not serving as pre- or co-requisites
Anatomy/Physiology I & II	Skills Lab I and II	Introduction to Pharmacy	Pharmaceutics
Biochemistry I & II	Clinical Applications I & II	Communications	Adverse Drug Reactions
Pharmacology I & II	IPPE I	Drug Information I	Pharmacokinetics II
Disease State Mgt. I & II	Skills Lab III and IV	Health Care System	P4 APPE*
Medicinal Chemistry I & II	IPPE II and III	Clinical Applications II	Chemotherapy
Pharmacokinetics I	P3 Skills Lab V	Quantitative Methods	OTC
Infectious Diseases	IPPE IV and V	Drug Information II	
Pharmacotherapy I & II		Drug Information III	
		Pharmacy Management	
		Pharmacy Law	
		Pharmacy Seminar	
Total: 14	**12**	**10**	**11**

APPE includes: Direct Patient Care; Indirect Patient Care; Community; Outpatient; Institutional

Course Review Process

The course review process is an in-depth analysis of the objectives, teaching methods, and student experiences in a specific course. Each academic year, each qualified member of the curriculum committee is assigned a course that is scheduled for review. The committee member is responsible for contacting the course coordinator for the course in question and will work with them to complete the in-depth analysis of the course. The committee member will use data collected and analyzed by the assessment committee during the previous academic year and will

use additional methods of data collection that have been approved by the assessment committee and created by the curriculum committee.

Using the assessment cycle in the COP Assessment Plan, the curriculum committee members will work with the Director of Assessment to collect data, limit duplication of efforts in assessment of the curriculum, and compile a report. The report of this analysis is reviewed by the Assessment Committee and the Curriculum Committee.

The step-by-step review process for individual courses is as follows:

1. The selected committee member contacts the course coordinator for the course being evaluated.
2. Explain the review process with the course coordinator.
3. Send a survey link where they can review responses to the course evaluations.
4. Analyze all data related to the course and share with the Curriculum Committee who makes recommendations for any changes.

College of Pharmacy	Policy Number CoP13-001D
Subject: Service Dog Policy **Administrative Policies and Procedures**	**Effective Date – 09/11/13**

Unless an exemption has been received from EOO, the College of Pharmacy prohibits the presence of service animals in the following areas due to health and safety restrictions, where their presence may compromise the integrity of research or otherwise fundamentally alter a program or activity, or where their presence may lead to violations of government regulations:

- Research Laboratories and Facilities
- Practice/Skills Laboratories
- Patient Care Areas
- Medication Preparation and Storage Areas
- Other Sterile Environments

Students or faculty with service dogs who have questions as they relate to activities at affiliated training sites should contact the Assistant Dean of Experience Programs to identify the relevant policies or contact individuals at these locations.

College of Pharmacy	Policy Number CoP15-001D
Subject: Administrative and Operational Reviews Administrative Policies and Procedures	Effective Date – 06/08/15 Last Revised: 06/08/15

Administrative and operational reviews are critical in assuring compliance with the College's mission, that we are employing a culture of continuous improvement, having programmatic effectiveness, utilizing resources in an efficient manner and are making informed decisions regarding the strategic direction of the College.

Mechanisms for Dean and department head reviews, faculty and staff reviews, curriculum reviews, and academic program reviews are provided through Georgia Board of Regents Policies, UGA Statues, and SACSCOC Principles of Accreditation, and standards set forth by professional accrediting bodies such as ACPE and ASHP. This policy is modeled after the policy for review of support units at the University level[1], and outlines review procedures for unit/department/division/office (hereinafter referred to as *unit*) of the College of Pharmacy that lie outside the purview of the formal UGA and external review committees and processes. These reviews are to be undertaken every five (5) years.

Data will be obtained via self-studies, stakeholder feedback, and other data points/performance metrics suitable to the *unit* under review. An *ad hoc* "Review Team" under the charge of the Dean and/or his/her designee (hereinafter referred to as *Dean*), will review the *unit* in light of its mission, strategic goals, and success in achieving its expected outcomes.

Essential aspects of the administrative and operational reviews include:
- Evaluating the viability, quality, and productivity of the *unit* according to a set of criteria designed to meet the unique goals and outcomes of the particular *unit's* programs;
- Evaluating the success of the *unit* in fulfilling its mission as defined by its own strategic plan;
- Assessing the strength of leadership and the internal organization of the *unit;*
- Evaluating the *unit's* contribution to the College's mission and strategic goals; and
- Recommending a set of priorities for enhancing the *unit's* quality and performance.

Self-Study
Based on the *unit* goals and mission, the self-study serves to identify expected outcomes of the *unit's* programs and/or services and describe key strengths and weaknesses in achieving those outcomes. It will include strategies for continued development of its strengths and correction of any weaknesses. In the process of preparing the self-study, the *unit* should revisit and renew its mission statement in accordance with the College's strategic plan.

While each *unit* will respond to a set of exploratory questions generated specifically for that *unit's* self-study, common across all self-study requirements is an analysis of the *unit* leadership and personnel. As part of this analysis, all members of the *unit* will compare their HR job descriptions to that of their actual duties and responsibilities. Critical to this aspect of the self-study is a clear description of the workload and workflow within the *unit* as it relates to all members of the *unit*.

---

[1] See the "University of Georgia Policy for Periodic Review of Academic and Administrative Support Groups (January 2014)" located at http://oap.uga.edu/uploads/pr/SUR_Policy.pdf (Office of Academic Planning)

The quality and usefulness of the self-study is greatly enhanced by the broadest possible participation of faculty and staff within each *unit*.

Stakeholder Feedback
Unit leaders will provide names and contact information for specific individuals and stakeholder populations outside of the *unit* (both inside and outside of the College) who have interacted with the *unit* and who can provide useful feedback regarding that *unit's* functional and operational impact.

Online surveys and/or person-to-person interviews will be conducted with relevant stakeholders, external clients and collaborators. Survey and interview questions will be customized depending upon the audience and the *unit* under review. Data collected from these solicitations will be shared with the *unit* and the Review Team and will be considered in combination with the information gathered from the self-study in formulating a comprehensive vision of the *unit*.

Review Teams
For each review, an *ad hoc* "Review Team" will be appointed. The Review Team will consist of at least three members, selected by the *Dean* in conjunction with the *unit* under review. The Review Team will be charged with analyzing the available data and generating a report that addresses the functionality of the *unit*.

The Review Team may request additional information as necessary during the process, and they may also conduct their own interviews at their discretion in order to ascertain a more comprehensive picture of the *unit*.

Finalized Review Team reports will be submitted to the *Dean* according to the Review Process Timeline.

Review Process Timeline
The review process is expected to be completed in approximately three (3) months:
- Within two (2) weeks of the initiation of the review, the *unit* is to provide the *Dean* with a comprehensive list of names and contact information of stakeholders and/or constituents outside the *unit* (i.e., students, faculty, staff, alumni, donors, preceptors, external clients, and collaborators) who may speak to its administration and operation. These individuals will be contacted and asked to provide feedback on their perceptions of and experiences with the *unit*.
- The *unit* will have four to five (4-5) weeks to complete the self-study, during which time the *Dean* will solicit feedback from stakeholders.
- Once all self-study data and stakeholder feedback are collected and provided to the Review Team, the Review Team will have approximately three (3) weeks to comlete its charge.
- The Review Team will submit the report to the *Dean*. The *Dean* will then share the report with the *unit*. The *unit* will have one (1) week to provide written feedback in response to the report to the *Dean*.

At the end of the process, the Review Team's report – along with any *unit* comments – is returned to the *Dean*, who may require additional consultation with the Review Team and/or the *unit* to insure the proper consideration and application of the information provided through this process.

Policy Number	CoP22-001D
Policy Title	**University of Georgia College of Pharmacy Stewardship of Administrative Policies**
Attachment(s)	Administrative Policy Template
Policy Owner	Assistant Dean for Institutional Effectiveness and Strategic Initiatives
Responsible Department/Unit	Office of the Dean
Contact Information	Questions about policy content should be directed to the Assistant Dean for Institutional Effectiveness and Strategic Initiatives
Pertinent Dates	Original Policy Date: Last Revision Date: None. This is a new policy.
Entities Affected	All departments and units of the college.
Who Needs to Know About This Policy	All faculty, staff, and students of the University of Georgia College of Pharmacy.
Reason for Policy/Purpose	This policy allows for a common, consistent, transparent, and ongoing process for all college administrative policies to be thoroughly developed, presented, reviewed, approved, implemented, decommissioned, communicated, and made broadly available to the college community. It serves to promote policy awareness, compliance, mitigation of risks, and accountability across the college and supports a culture of risk-aware decision-making. Implementation of this policy ultimately seeks to protect the college and its faculty, staff, and students.
Abstract	This policy outlines the procedures for developing, revising, decommissioning, and ongoing review of official administrative college policies and procedures.

Overview

Policy stewardship is an ongoing process. The processes related to policy stewardship are described in the following sections, in accordance with the policy lifecycle.

Developing a New Policy

If an individual or group identifies a need for a new policy that meets the college administrative policy criteria,[1] a policy owner will be designated by the Dean.

The policy owner, in concert with the Assistant Dean for Institutional Effectiveness and Strategic Initiatives (IESI), will consider the current UGA and College administrative policies to determine if the new content fills a gap not already fully covered by a UGA policy or could be incorporated into an existing College policy.

If it is determined a new College policy is needed, the policy owner will consult with key stakeholders and draft a proposed policy, along with any associated documents. The draft policy will be transmitted to the Assistant Dean for IESI.

Upon notification from the Assistant Dean for IESI, the Policy Working Group (PWG) will review the proposed policy and suggest revisions of content, language, level of detail, consistency, and readability, as pertinent. Requested edits will be transmitted by the Assistant Dean for IESI to the policy owner for revision of the policy.

Once the draft policy is revised, the Assistant Dean for IESI and the policy owner will present the proposed policy to the Executive Committee for consideration and endorsement.

Upon endorsement by the Executive Committee, the Dean will consider the proposed policy for approval. If approved, the new policy will be numbered and dated, and communication will be sent from the Assistant Dean for IESI to faculty and staff notifying them of the new policy. As a courtesy, if the policy falls under a UGA policy, the new College policy will be shared with the unit responsible for that policy.

Revising an Existing Administrative Policy

If an individual or group determines that a policy needs to be revised, the policy owner will consult with key stakeholders and propose revisions, including updating any documents associated with the policy. The proposed, revised policy will be transmitted to the Assistant Dean for IESI.

Upon notification from the Assistant Dean for IESI, the Policy Working Group (PWG) will review the proposed, revised policy and suggest edits of content, language, level of detail, consistency, and readability, as pertinent. Requested edits will be transmitted by the Assistant Dean for IESI to the policy owner for incorporation.

Once the draft policy is revised, the Assistant Dean for IESI and the policy owner will present the proposed, revised policy to the Executive Committee for consideration and endorsement.

Upon endorsement by the Executive Committee, the Dean will consider the proposed, revised policy for approval. The newly revised policy will be edited and published through appropriate forms and mediums if approved. A communication will be sent from the Assistant Dean for IESI to faculty and staff notifying them of the revised policy.

Decommissioning an Administrative Policy

If a policy owner believes that a College of Pharmacy administrative policy should be decommissioned, they should seek consultation from other groups that may be primarily impacted by the policy and provide the Assistant Dean for IESI with a statement of intent to decommission the policy. The statement should include their reasoning and any feedback received from other groups consulted.

Upon notification from the Assistant Dean for IESI, the Policy Working Group (PWG) will review the recommendation to decommission and provide feedback to the Assistant Dean for IESI.

The Assistant Dean for IESI will bring any policies recommended for decommissioning to the Executive Committee for discussion and endorsement of action.

Upon endorsement by the Executive Committee, the Dean will consider the decommissioning action. If decommissioning is approved, the policy will be removed from the manual and the Assistant Dean for IESI will send communication of the change to faculty and staff.

Annual Administrative Policy Review Process

The Assistant Dean for Institutional Effectiveness and Strategic Initiatives (IESI) is the designated manager of College policies. University of Georgia College of Pharmacy administrative policies will be reviewed at least annually in February or in response to UGA policy changes that impact College policies. Each policy reviewed will be led by the Assistant Dean for IESI, the Policy Working Group (PWG), and the designated policy owner to recommend policy stewardship action, including:

    a) Developing a new policy;
    b) Revising an existing policy;
    c) Decommissioning a policy;
    d) Affirming an existing policy.

The Assistant Dean for IESI will inform the Executive Committee of the outcome of the review and collect any feedback or recommendations.

---

[1] The College of Pharmacy primarily follows all Board of Regents (BOR) and University of Georgia (UGA) policies and procedures. However, when further clarification or additional interpretation are needed a college administrative policy may be created. Additional administrative policies may be created for college specific matters where no BOR or UGA policy exists.

[2] Policy Numbering System:

CoP	Administrative Policy
A	Academic (Faculty Governed Policy)
1st No.	The Year Policy First Instituted
2nd No.	The Number Policy for the Year
Last Letters	Committee Responsible

Attachment - Administrative Policy Template

Policy Number	**CoP XXX** Number will be provided after the policy is approved.
Policy Title	University of Georgia College of Pharmacy **Policy Title**
Attachment(s)	List any attachments.
Policy Owner	The title of the individual not the name of the individual.
Responsible Department/Unit	Department or Unit Name
Contact Information	Questions about policy content should be directed to The title of the individual not the name of the individual.
Pertinent Dates	Original Policy Date: To be inserted after approval by the Executive Committee. Last Revision Date: None. This is a new policy.
Entities Affected	All departments and units of the college.
Who Needs to Know About This Policy	All faculty, staff, and students of the University of Georgia College of Pharmacy.
Glossary	Definitions of terms used in this policy.
Reason for Policy/Purpose	Brief description of the policy/purpose.
Abstract	What this policy explains.

Policy/Procedure:
Provide written text.

Policy Number	CoP23-001SA
Policy Title	University of Georgia College of Pharmacy **Lost and Found and Abandoned Property – University of Georgia College of Pharmacy Athens Campus**
Attachment(s)	Lost and Found Spreadsheet Template
Policy Owner	Assistant Dean for Student Affairs
Responsible Department/Unit	R.C. Wilson: Office of the Dean Pharmacy South: Office of Student Affairs
Contact Information	Questions about policy content should be directed to the Assistant Dean for Student Affairs.
Pertinent Dates	Original Policy Date: November 14, 2022 Last Revision Date: January 12, 2023
Entities Affected	All departments and units of the college.
Who Needs to Know About This Policy	Faculty, staff, students, visitors and guests of the University of Georgia's College of Pharmacy facilities on the Athens campus.
Glossary	*Lost and found:* Abandoned or retrieved items without an immediate or identifiable owner. *Abandoned property:* Belongs to someone who willingly or accidentally leaves an item behind.
Reason for Policy/Purpose	To provide guidelines regarding for lost and found and abandoned personal property in the College of Pharmacy.
Abstract	When items are left in or around College of Pharmacy facilities (i.e. R.C. Wilson and Pharmacy South) or when there is not ownership indicated on items, the items will be considered lost or abandoned.

Procedure:

I. When an abandoned or lost item is found, the finder should turn in the item to the building closest to the community office from where the item was found. In the R.C. Wilson Building, the finder should turn in the item(s) to a staff member in the Office of the Dean. In the Pharmacy South Building, the finder should turn in the item(s) to a staff member in the Office of Student Affairs.

II. The receiving staff member should note the date, time, location where found and the name of the finder turning in the property on the abandoned or lost property log. The name of the owner of the property should also be documented in the shared Google Sheet if it is known.

III. The receiving staff member will store the item(s) and communicate the storage location to the designated staff member.

IV. If the owner is known, staff should make reasonable attempts to contact the owner and document those attempts in the log.

V. For items with personal identifying information (e.g. a wallet, purse, credit/debit card, driver's license,

checks, or passport) or items with an estimated value greater than $100. In this situation, two (2) staff members should investigate the items found and seal them in an envelope with the total amount of value that was found at the time of the retrieval. They should contact the UGA Police Department if it is not picked up by the owner within 24 hours. The arrangements for drop off/pick up of the item should occur within 5 business days of being logged. Until drop off/pick up occurs, the item will be locked in a secured location where the designated staff members will be the only individuals with access to it. This all should be documented in the log.

VI.   To claim any item, the owner must describe the item in detail and show identification to staff member. The staff member records the claimed item in the abandoned or lost property log, including the name and signature of the owner, the staff member's name, and the date and time.

VII. If abandoned property is not retrieved by the owner by the end of the semester, staff will reach out to the Unit Head/Administrative Manager to assess the items to determine what can be donated or discarded. The designated staff member will report what items were donated and which were discarded on the shared Google Sheet.

VIII. Lost UGA OneCards should be returned by inter-departmental mail to the UGA OneCard Office in the Tate Student Center (Room 309).

Found/Lost	Date	Location	Item	Item Description	Turned In By	Contact If Found	Email	Phone Number

Policy Number	CoP23-002D
Policy Title	University of Georgia College of Pharmacy **Faculty Salary Return**
Attachment(s)	http://rx.uga.edu/wp-content/uploads/2021/08/Salary-Buyout-Form-revised.pdf
Policy Owner	Associate Dean for Science Education, Research and Technology
Responsible Department/Unit	Office of the Dean
Contact Information	Associate Dean for Science Education, Research and Technology
Pertinent Dates	Original Policy Date: July 1, 2021 Last Revision Date: August 31, 2023
Entities Affected	All departments and units of the college.
Who Needs to Know About This Policy	All faculty of the University of Georgia College of Pharmacy.
Glossary	**EFT:** Equivalent Full Time
Reason for Policy/Purpose	Policy covers need to include salary in grants and how teaching and research time will be treated.
Abstract	Policy describes how salary return funds will be distributed within the College of Pharmacy.

Policy/Procedure:

All faculty must include salary on all grants commensurate with your effort, unless the granting agency does not allow or limits the amount of salary that can be charged. This policy applies even if you have already covered your full summer salary for 9-month appointments.

Academic year (9-month) or calendar year (12-month) salary will be distributed in the following manner.

If applied to your teaching budgeted EFT, you must buy out at least 12.5% to get a reduction in your teaching load. 80% of these funds will go to the unit to help cover the teaching and 20% to the college to support faculty start-up costs.

If applied to your research budgeted EFT, 40% of these funds will be returned to the investigator, 40% to the unit and 20% to the College.