MARSHALL UNIVERSITY

Joan C. Edwards School of Medicine

Department Chair Administrative Guide

Practical Leadership and Operations Guide

Prepared by the Office of Faculty Advancement

For academic and clinical department chairs

Updated from the 2022 guide

GUIDE

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INTRODUCTION

How to Use This Guide

Department chairs lead the academic, clinical, operational, and people-related work of their departments. This guide provides practical expectations, checklists, and templates for onboarding, planning, and ongoing leadership. It does not replace current university, school, health system, accreditation, legal, or human resources policies.

> **Important.** Before acting on personnel, financial, research, learner, clinical, compliance, or legal matters, confirm current policy and consult the appropriate institutional office.

Recommended Uses

- **New-chair onboarding:** Work through Parts I–III during the first 90 days.
- **Annual planning:** Use the annual operating calendar and mission dashboard to set priorities.
- **Faculty development:** Use the career and feedback tools during individual meetings.
- **Dean–chair alignment:** Use the briefing template to frame decisions, risks, and requests.
- **Department review:** Use the self-assessment and evidence checklist to prepare for the annual evaluation.

Guide Structure

Part	Focus	Primary Use
I. The Chair Role	Role, responsibilities, governance, and first 90 days	Role clarity and onboarding
II. Leading the Missions	Education, research, clinical care, faculty advancement, and administration	Strategic and operational leadership
III. Leading People	Development, feedback, communication, and culture	Faculty and staff effectiveness
IV. Accountability	Planning, metrics, risk, evaluation, and transition	Evidence-based review and continuity
Appendices	Templates, checklists, prompts, dashboard, references	Ready-to-use tools

SECTION 01

The Department Chair's Mandate

Department chairs advance the School of Medicine's education, patient care, research, service, and community missions. Each chair is accountable for departmental performance and for supporting the broader institution.

> **Guiding principle.** Lead the department as part of the School of Medicine. Departmental success should strengthen the institutional mission, trust, and collaboration.

Five Interdependent Roles

Role	Chair Accountability	Evidence of Effective Practice
Academic leader	Set direction across education, scholarship, clinical care, and service.	Clear priorities, measurable goals, mission-aligned resource choices
People leader	Recruit, develop, evaluate, recognize, and retain faculty and staff.	Timely reviews, development plans, succession depth, equitable opportunity
Operating executive	Oversee budget, staffing, space, compliance, and performance.	Reliable processes, responsible stewardship, early risk escalation
Institutional partner	Collaborate with the dean, other chairs, administrative offices, and health-system leaders.	No-surprise communication, shared solutions, cross-unit initiatives
Culture steward	Model professionalism, inclusion, accountability, psychological safety, and continuous improvement.	Trust, respectful conduct, fair processes, learning from concerns

Chair Decision Test

- **Mission:** Does this advance education, research, clinical care, service, or community impact?
- **People:** Who benefits, who carries the burden, and whose perspective is missing?
- **Evidence:** What data, policy, precedent, or professional judgment supports the decision?
- **Resources:** What financial, staffing, space, technology, and opportunity costs are involved?
- **Risk:** What are the compliance, safety, reputational, equity, and implementation risks?
- **Alignment:** Is the decision consistent with the dean's priorities and institutional strategy?
- **Communication:** Who needs to know, contribute, approve, implement, or receive follow-up?

SECTION 02

Leadership Responsibilities

The chair sets direction, supports others' success, and turns school priorities into departmental action.

Expected Leadership Practices

- Promote the vision, mission, and strategic priorities of JCESOM.
- Create a department strategy with measurable goals across all relevant missions.
- Build academic excellence through high-quality teaching, scholarship, clinical care, and service.
- Participate actively in school and university governance and ensure departmental representation.
- Promote faculty authorship, dissemination, innovation, collaboration, and national visibility.
- Ensure compliance with university, school, health-system, accreditation, and sponsor requirements.
- Develop faculty and staff through feedback, mentoring, sponsorship, stretch opportunities, and recognition.
- Promote collaboration within the department and across disciplines, campuses, and community partners.
- Recruit and develop a workforce that brings varied experiences and supports the institutional mission.
- Complete meaningful annual reviews and follow through on agreed goals and development needs.

From Strategy to Execution

1. Assess the current state using mission outcomes, workforce data, stakeholder input, resource realities, and external trends.
2. Choose three to five priorities; distinguish essential operations from strategic change.
3. Define outcomes, measures, accountable leaders, milestones, dependencies, and resource requirements.
4. Review progress quarterly; surface variance early and revise tactics without losing strategic intent.
5. Communicate results and lessons to faculty, staff, learners, the dean, and partners.

SECTION 03

Working Effectively with the Dean

The dean and chair share responsibility for institutional success. Chairs should understand the dean's priorities, present issues clearly, communicate risks early, and follow through on decisions.

Dean–Chair Alignment Questions

Question	Chair Preparation
What am I trying to accomplish?	State the desired institutional outcome, not only the departmental request.
How does this connect with the dean's goals and concerns?	Identify strategic alignment, tensions, and enterprise implications.
What does the dean need to know?	Provide relevant facts, assumptions, options, risks, and timing.
What decision or support is needed?	Be explicit about approval, advocacy, resources, or consultation.
Who else should be engaged?	Identify partners, affected units, decision owners, and credible champions.
How will support be sustained?	Define implementation, reporting, measures, and follow-up.

No-Surprise Communication

- Escalate material patient-safety, learner-safety, compliance, legal, financial, workforce, and reputational concerns promptly.
- Differentiate information, consultation, recommendation, and decision requests.
- Share emerging issues early, even when all facts are not yet available; label uncertainty clearly.
- Avoid bypassing responsible offices or presenting commitments before authority and resources are confirmed.
- Close the loop after decisions: who will do what, by when, and how progress will be reported.

> **Effective briefing formula.** Outcome → context → evidence → options → recommendation → risks → specific ask → follow-up date.

SECTION 04

First 90 Days and Strategic Planning

Days 1–30: Listen and Map

- ☐ Clarify expectations, delegated authority, evaluation criteria, and communication cadence with the dean.
- ☐ Meet faculty, staff, learners, program leaders, administrative partners, and key external stakeholders.
- ☐ Review budgets, commitments, workforce, space, contracts, compliance status, educational outcomes, research portfolio, and clinical performance.
- ☐ Identify immediate safety, compliance, personnel, financial, and operational risks.
- ☐ Map formal and informal decision pathways, dependencies, and partnership opportunities.

Days 31–60: Diagnose and Prioritize

- ☐ Validate strengths, constraints, and root causes with data and stakeholder perspectives.
- ☐ Separate urgent stabilization needs from strategic opportunities.
- ☐ Draft three to five priorities with outcomes, measures, owners, and resource assumptions.
- ☐ Review priorities with the dean and department; name what will not be pursued now.

Days 61–90: Align and Mobilize

- ☐ Publish a concise departmental direction and first-year scorecard.
- ☐ Establish leadership team roles, meeting cadence, decision rights, and escalation rules.
- ☐ Launch early actions that build credibility and address material risk.
- ☐ Set quarterly strategy reviews and a transparent communication rhythm.

WORKSHEET · **First-Year Priority Statement**

Purpose: *Convert a broad ambition into an accountable commitment.*

☐ **Outcome:** By [date], the department will…

☐ **Why now:** This matters because…

☐ **Baseline and target:** We will move from… to…

☐ Accountable leader and partners:

☐ Resources and dependencies:

☐ Risks and mitigation:

☐ Quarterly milestones:

SECTION 05

Governance, Administration, and Financial Stewardship

Effective administration supports fair, transparent, and reliable academic work. The chair remains accountable for delegated responsibilities.

Operational Control Areas

Area	Chair Responsibilities	Minimum Routine
Budget and commitments	Align resources with priorities; monitor revenue, expense, commitments, and variance.	Monthly review; documented assumptions and corrective actions
Workforce	Plan positions, clarify roles, oversee workload, and address vacancies and performance.	Quarterly workforce review; annual role and effort confirmation
Space and assets	Allocate transparently and based on mission need, productivity, safety, and policy.	Annual inventory; documented allocation decisions
Policies and compliance	Ensure awareness, responsible ownership, training, documentation, and escalation.	Standing compliance review; corrective-action tracking
Decision governance	Define who recommends, decides, executes, and must be consulted or informed.	Decision log for material commitments and exceptions
Business continuity	Prepare for leadership absence, system disruption, emergencies, and critical-role gaps.	Annual continuity review and contact update

Financial Stewardship Questions

- What assumptions drive the plan, and how sensitive is it to volume, funding, recruitment, or timing changes?
- Which commitments are recurring, restricted, externally funded, time limited, or contingent?
- Are effort, workload, space, and resources aligned with documented responsibilities and outcomes?
- What variance requires action now, and what is the recovery plan?
- What decision requires institutional approval or coordination?

SECTION 06

Faculty Advancement, Recruitment, and Retention

The chair oversees the faculty lifecycle: planning, recruitment, onboarding, development, evaluation, promotion, recognition, retention, and transition. Each process should be timely, equitable, evidence-based, and consistent with policy.

Faculty Lifecycle Standards

Stage	Chair Actions	Useful Evidence
Plan	Define mission need, role, effort, resources, competencies, and success measures.	Workforce plan, business case, approved position
Recruit	Use inclusive outreach, structured evaluation, documented criteria, and coordinated approvals.	Search plan, candidate rubric, reference checks
Onboard	Clarify expectations, connect mentors and resources, and set 30/60/90-day milestones.	Signed role expectations, onboarding plan
Develop	Hold regular career conversations; offer mentoring, sponsorship, feedback, and opportunities.	Individual development plan, progress notes
Evaluate	Use multiple sources of evidence; distinguish performance, potential, conduct, and resource barriers.	Annual review, goals, improvement or development plan
Advance	Provide early promotion guidance and verify documentation and readiness.	Current academic portfolio/Interfolio record, promotion plan
Retain / transition	Understand valued contributors' needs; plan succession and respectful transitions.	Retention analysis, succession map, transition plan

Annual Faculty Review: Minimum Components

- ☐ Review role expectations, assigned effort, accomplishments, outcomes, and barriers.
- ☐ Use relevant evidence across teaching, research/scholarship, clinical work, service, leadership, and professionalism.
- ☐ Discuss career aspirations, strengths, development needs, well-being, and support required.
- ☐ Provide specific feedback on observed behavior and impact.
- ☐ Agree on measurable goals, development actions, resources, and follow-up dates.

☐ Document the conversation and any required plan according to current policy.

Documentation principle. Faculty should maintain a current academic record, including activities not automatically captured by institutional systems. The chair should reinforce timely review and verification of the record used for annual evaluation, reporting, and promotion.

SECTION 07

Education and Training Programs

The chair is responsible for an educational environment that is high-quality, safe, inclusive, and appropriately supervised.

Education Leadership Responsibilities

- Promote faculty participation in undergraduate, graduate, and continuing medical education.
- Support integrated teaching and collaboration with clinical and biomedical science departments.
- Ensure departmental courses, clerkships, rotations, residencies, and fellowships are well organized and appropriately resourced.
- Review learner outcomes, evaluation quality, supervision, duty environment, mistreatment concerns, and improvement plans.
- Recognize teaching contributions and support development in teaching, assessment, feedback, advising, and educational scholarship.
- Maintain readiness for relevant accreditation requirements and respond promptly to identified concerns.

Education Dashboard Questions

Domain	Questions for Quarterly Review
Quality	Are learning objectives, teaching methods, assessment, and supervision aligned?
Learner experience	What do evaluations, concerns, and narrative comments reveal?
Outcomes	Where are learners succeeding or struggling, and what explains the pattern?
Faculty capacity	Are teaching roles, effort, development, and recognition adequate?
Learning environment	Are professionalism, inclusion, psychological safety, and due process supported?
Improvement	What action is underway, who owns it, and how will impact be measured?

SECTION 08

Research and Scholarly Innovation

The chair supports discovery, innovation, scholarship, collaboration, responsible research, and investigator development.

Research Leadership Priorities

- Develop a research strategy with focus areas, measurable goals, partnerships, and resource assumptions.
- Build a balanced portfolio appropriate to the department's mission, including basic, translational, clinical, population, and/or educational scholarship.
- Strengthen mentorship, collaboration, infrastructure access, grant development, and protected-time accountability.
- Monitor funding pipeline, publications, presentations, trials, innovation, research workforce, and trainee participation.
- Ensure compliance with sponsor, university, federal, human-subject, animal, biosafety, data, conflict-of-interest, and research-integrity requirements.
- Recognize multiple forms of contribution, including team science, data and methods expertise, mentorship, and community-engaged work.

Portfolio Review

Time Horizon	Review Focus	Chair Question
Current	Active awards, protocols, projects, staffing, milestones, and compliance	What needs intervention now?
Pipeline	Submissions, resubmissions, pilot work, collaborations, and trainee projects	Is the pipeline sufficiently strong and diversified?
Capacity	Mentors, methods, cores, data, space, protected time, and research staff	What capability gap constrains progress?
Impact	Publications, translation, practice change, policy, education, community benefit	How are we defining and communicating value?

SECTION 09

Clinical Affairs, Quality, and Safety

Clinical chairs work with health-system partners to advance quality, safety, access, professionalism, workforce sustainability, education, and research.

Clinical Oversight

- Set and monitor standards for clinical quality, patient safety, access, experience, and outcomes.
- Review material adverse trends, risk events, credentialing or scope concerns, and corrective actions.
- Align clinical growth, staffing, scheduling, facilities, and technology with sustainable performance.
- Ensure learning needs and research activities are integrated responsibly into clinical environments.
- Collaborate across departments and sites to improve transitions, reduce fragmentation, and address shared constraints.

> **Safety escalation.** When patient or learner safety may be at risk, act promptly: stabilize, notify the appropriate leader or office, preserve relevant information, avoid premature conclusions, and support a fair review.

SECTION 10

Culture, Belonging, Well-Being, and Professionalism

Department culture reflects the behaviors a chair models, recognizes, permits, and corrects. A strong culture combines high standards with respect, inclusion, accountability, and support.

Culture-Building Practices

- Model respectful communication, reliability, candor, confidentiality, and ethical conduct.
- Use transparent criteria for opportunities, resources, workload, recognition, and advancement.
- Invite dissent and different perspectives before decisions; explain decisions after they are made.
- Address incivility, mistreatment, retaliation concerns, bias, and unprofessional behavior through appropriate processes.
- Monitor workload and operational contributors to burnout; pursue system improvements, not only individual resilience.
- Recognize contributions consistently and ensure credit is appropriately shared.

Culture Pulse Questions

- Do people know how decisions are made and how to raise a concern?
- Whose voices are heard repeatedly, and whose are absent?
- Are expectations applied consistently across status, role, and location?
- What work creates avoidable burden or moral distress?
- What behavior is being unintentionally rewarded or tolerated?
- What recent action demonstrates that feedback leads to improvement?

SECTION 11

Career Development and Succession

Career development is a shared responsibility. The chair provides feedback, support, and access to opportunities. Faculty and staff members identify goals and follow through on agreed actions.

Three-Part Career Conversation

Conversation Stage	Explore	Chair Contribution
1. Where are you now? *Performance*	Results, strengths, feedback, development needs, contribution, engagement	Clarify expectations; offer specific observations; identify barriers and resources
2. Where might you go? *Potential*	Interests, aspirations, values, transferable skills, possible next roles	Expand possibilities; test assumptions; distinguish readiness from aspiration
3. How could you get there? *Opportunity*	Learning, stretch work, mentors, sponsors, networks, visibility, practice	Create access; sequence development; establish milestones and check-ins

Development Options Beyond Courses

- Stretch assignments with clear authority, support, and learning goals
- Leadership of a time-limited project, committee, curriculum, quality initiative, or research collaboration
- Observation or shadowing of an experienced leader
- Mentoring, coaching, peer consultation, and sponsorship
- Cross-departmental or institutional service that builds perspective and networks
- Teaching, presenting, writing, and dissemination opportunities
- Progressive delegation with structured feedback and reflection

WORKSHEET · **Career Conversation Preparation**

Purpose: *Prepare for a developmental—not merely evaluative—conversation.*

- ☐ What has this person contributed over the last 12–18 months?
- ☐ What strengths appear transferable to broader or future responsibilities?
- ☐ What energizes or disengages this person?
- ☐ What role or contribution might be a suitable next step?
- ☐ What experience, exposure, education, or relationship would accelerate development?
- ☐ What behavior or blind spot may inhibit progress, and what evidence supports that observation?
- ☐ What opportunity can I realistically offer or help secure?

SECTION 12

Feedback, Difficult Conversations, and Performance Support

Effective feedback is timely, specific, based on observable behavior, and followed by support and accountability. It should reinforce strengths as well as address concerns.

Six Practices for Effective Feedback

1. Focus on development and future effectiveness.
2. Give feedback regularly rather than saving it for the annual review.
3. Prepare first-hand examples of context, observed behavior, impact, and preferred behavior.
4. Listen with openness and assume you may not have all the facts.
5. Ask open questions, then allow space for the person's perspective and self-assessment.
6. Agree on next steps, support, measures, and a follow-up date.

Context–Behavior–Impact–Next Step

Element	Use	Example Starter
Context	Locate the specific event without generalizing.	*"During yesterday's project review…"*
Behavior	Describe observable action; do not infer motive.	*"I observed that the final data were presented without…"*
Impact	Explain the effect on people, work, trust, safety, or outcomes.	*"This left the team unable to verify…"*
Perspective	Invite additional facts and self-assessment.	*"How did you see the situation?"*
Next step	Define the preferred behavior and support.	*"For the next review, please… What support would help?"*

When Performance Is Below Expectation

- Confirm the applicable policy and consult the appropriate office early.
- Clarify the expected standard and the evidence of the gap.
- Ask about contributing factors without diagnosing or excusing the gap.
- Define specific actions, resources, measures, documentation, and review dates.
- Apply standards consistently and preserve confidentiality.

- Escalate when safety, misconduct, discrimination, retaliation, legal, or compliance issues may be involved.

> **Avoid delayed ambiguity.** Kindness is not vagueness. Timely, respectful clarity gives the individual a fair opportunity to understand expectations and improve.

SECTION 13

Meetings, Communication, and Change Leadership

Well-designed meetings support communication, decisions, accountability, and responsible use of faculty and staff time.

Meeting Architecture

Meeting	Purpose	Suggested Cadence	Required Output
Chair–dean	Alignment, decisions, material risks, support	As agreed; often monthly	Decision/issue log and follow-up
Department leadership	Integrate mission and operations	Weekly or biweekly	Actions, owners, due dates
Faculty meeting	Shared understanding, governance, dialogue	Monthly or quarterly	Decisions and concise summary
One-on-one	Performance, priorities, barriers, development	Monthly or quarterly by role	Agreements and follow-up
Strategy review	Assess outcomes and adapt	Quarterly	Updated scorecard and decisions
Risk/compliance review	Surface concerns and corrective action	Quarterly or as needed	Risk owner and mitigation status

Purpose-Driven Agenda

- Label each item: inform, discuss, recommend, decide, or plan.
- Distribute essential pre-reading and state the question in advance.
- Allocate time according to importance, not habit.
- Record decisions, rationale when useful, owner, due date, and follow-up.
- End with a verbal recap; circulate a concise record promptly.

Leading Change

1. Name the case for change and the consequence of maintaining the status quo.
2. Identify affected groups, likely gains and losses, dependencies, and sources of trust.
3. Co-design what is genuinely open to influence; be clear about fixed requirements.
4. Pilot when feasible, learn visibly, and adjust.
5. Support adoption through resources, workflow redesign, communication, and local champions.
6. Measure outcomes and unintended effects; reinforce the new practice.

SECTION 14

Annual Planning, Metrics, and Chair Evaluation

Chair evaluation should consider leadership, mission outcomes, stewardship, faculty development, and progress on agreed priorities. Metrics should inform, not replace, professional judgment.

Annual Operating Rhythm

Period	Chair Focus	Key Outputs
Quarter 1	Confirm goals, effort, budget, workforce, educational and research plans	Approved priorities and scorecard
Quarter 2	Review performance and pipeline; address variance; hold development conversations	Midyear actions and resource decisions
Quarter 3	Plan recruitment, succession, budget, curriculum/program changes, and annual reviews	Draft next-year plan and talent map
Quarter 4	Complete evaluations; assess outcomes and risks; document lessons and commitments	Annual report, evaluations, transition items

Balanced Chair Scorecard

Domain	Illustrative Measures	Interpretive Questions
Education	Learner outcomes, teaching quality, program status, faculty participation	What improved, for whom, and why?
Research	Funding pipeline, awards, publications, trials, collaboration, compliance	Is capacity growing sustainably?
Clinical	Quality, safety, access, experience, productivity, workforce	Where are outcomes or risk trending?
People	Recruitment, retention, advancement, engagement, reviews, succession	Are opportunity and accountability equitable?
Stewardship	Budget variance, space, effort, compliance, operational reliability	Are resources aligned with priorities?
Leadership	Strategic progress, collaboration, communication, culture, responsiveness	How has leadership enabled outcomes?

Chair Self-Assessment

- What were the three most important outcomes achieved this year?
- What evidence demonstrates impact rather than activity?

- Where did performance fall short, and what did I learn?
- What material risk did I reduce—or fail to surface early enough?
- Whom did I develop, sponsor, or prepare for broader responsibility?
- How did I strengthen collaboration beyond my department?
- What behavior should I continue, stop, or change?
- What support or clarity do I need from the dean?

SECTION 15

Transition and Leadership Continuity

Continuity planning protects people, programs, resources, partnerships, and institutional knowledge. It should be maintained throughout a chair's term.

Continuity Essentials

- ☐ Maintain current lists of critical commitments, decision calendars, approvals, contracts, risks, and external relationships.
- ☐ Identify interim decision authority and backups for essential leadership and administrative roles.
- ☐ Develop successors through exposure, delegation, mentoring, and cross-training.
- ☐ Document open searches, personnel matters, program reviews, financial commitments, and compliance actions with appropriate confidentiality.
- ☐ Prepare a factual transition briefing that distinguishes completed work, active work, decisions pending, and emerging issues.
- ☐ Support a respectful handoff and avoid binding a successor beyond authorized commitments.

APPENDIX A

Dean–Chair Briefing Template

Meeting Objective

Purpose: Make the desired outcome explicit.

This meeting is intended to: ☐ inform ☐ consult ☐ recommend ☐ request a decision

Desired outcome by the end of the meeting:

Briefing Element	Chair Notes
Issue or opportunity	
Connection to institutional priorities	
Essential facts and assumptions	
Options considered	
Recommended course and rationale	
Financial, people, operational, and reputational implications	
Material risks and mitigation	
Specific decision/support requested	
Owner, milestone, and next update	

APPENDIX B

Faculty Career Development Conversation

Faculty/Staff Preparation

- ☐ What accomplishments and contributions from the last 12–18 months matter most?
- ☐ What feedback have you received, and how have you applied it?
- ☐ What work uses your strengths and gives you energy?
- ☐ What capability would most improve your current performance?
- ☐ What future role, contribution, or impact are you considering?
- ☐ What experiences, relationships, visibility, or resources would help?
- ☐ What barriers are within your influence, and where do you need support?

Development Plan

Goal	Action / Experience	Support / Partner	Evidence of Progress	Review Date

APPENDIX C

Effective Feedback Preparation

Prompt	Preparation Notes
Specific context—when and where	
Observable behavior—facts, not intent	
Impact on people, work, trust, safety, or outcomes	
Preferred or effective behavior	
Open question to invite perspective	
Agreed next steps and support	
Evidence of progress and follow-up date	

Sentence Starters

- **Context:** “During the meeting…” / “The agreed expectation was…”
- **Behavior:** “I observed…” / “I noticed…”
- **Impact:** “This affected…” / “The result was…”
- **Perspective:** “How do you see the situation?” / “What happened from your perspective?”
- **Next step:** “What could be done differently next time?” / “How can I support improvement?”
- **Follow-up:** “Let us review progress on [date] using [evidence].”

APPENDIX D

Department Meeting Planner

Field	Plan
Purpose and desired output	
Participants and roles	
Pre-read and preparation	
Item 1: inform / discuss / decide	
Item 2: inform / discuss / decide	
Item 3: inform / discuss / decide	
Decision(s)	
Actions, owners, due dates	
Communication and follow-up	

APPENDIX E

Annual Chair Checklist

Strategy and Governance

- ☐ Review mission alignment and three-to-five priorities.
- ☐ Update scorecard and material risk register.
- ☐ Confirm governance, committee representation, and decision rights.

Faculty and Workforce

- ☐ Complete annual faculty reviews and development plans.
- ☐ Review recruitment, retention, promotion readiness, workload, and succession.
- ☐ Recognize contributions and address performance concerns promptly.

Education

- ☐ Review learner outcomes, evaluations, program status, and improvement plans.
- ☐ Confirm teaching capacity, supervision, learning environment, and faculty development.

Research

- ☐ Review active portfolio, pipeline, mentorship, infrastructure, impact, and compliance.
- ☐ Confirm protected-time expectations and accountability.

Clinical Affairs

- ☐ Review quality, safety, access, experience, productivity, and workforce trends.
- ☐ Confirm action on material risks and cross-site dependencies.

Administration

- ☐ Review budget, commitments, staffing, space, contracts, and business continuity.
- ☐ Confirm required reports, policy updates, and compliance actions.

APPENDIX F

Risk and Escalation Log

Risk / Issue	Impact	Likelihood	Immediate Action	Owner	Escalation / Review

Confidentiality note. Do not place protected health information, privileged material, detailed personnel information, or other sensitive data in a general-purpose log. Use the approved secure system and consult the responsible office.

APPENDIX G

Chair Annual Report Outline

1. **Executive summary:** major outcomes, challenges, and requests.
2. Progress on prior-year strategic priorities and measures.
3. Education and training outcomes and improvements.
4. Research, scholarship, innovation, and impact.
5. Clinical quality, safety, access, and performance, if applicable.
6. Faculty and staff recruitment, development, advancement, retention, and recognition.
7. Culture, professionalism, belonging, and well-being actions.
8. Financial, workforce, space, and operational stewardship.
9. Compliance, accreditation, and material risk status.
10. Next-year priorities, resources, dependencies, and dean decisions requested.

REFERENCES

References and Attribution

This guide updates the Marshall University Joan C. Edwards School of Medicine Department Chairs Administration Guide (2022) and adapts leadership concepts from the following resources. Consult the original sources for complete guidance.

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Document Maintenance

Owner	Review Cycle	Last Review	Next Review	Approved By
Office of Faculty Advancement / Dean's Office	At least every three years, or when policy changes	2026 revised dr		

Before institutional use, verify policy references, office names, timelines, and approval pathways.