

# PROTOCOLS FOR FACULTY AND STAFF SALARY ADJUSTMENTS 2011-2012

## I. General Policy

The 2011 Appropriations Act provides that the “*annual pay of all state employees for the 2011-2013 fiscal biennium shall remain unchanged from that authorized on June 30, 2011 or the last date in pay status*” during the fiscal year. Despite this general prohibition, the Act allows salary increases for the specific “special circumstances.” The General Assembly has provided limited exceptions for salary adjustments which are detailed in the covering salary memorandum and referenced in Appendix 1 of the memorandum.

## II. Protocols for Salary Adjustments and Increases, 2011-2012

### A. Limitations and Conditions for Salary Adjustments

Salary adjustments for 2011-12 are limited to the terms and conditions detailed in the salary memorandum. Additional limitations and conditions include the following:

1. Senior administrative officers’ salaries must be set within ranges established by the President of The University of North Carolina (Section II.B. below.) Requests for exceptions must be forwarded with recommendations from the Chancellor, the President, and the Committee on Personnel and Tenure to the Board of Governors.
2. Faculty salaries in Health Affairs are subject to established ceilings (see section C below.)
3. Salaries for tenured and tenure-track faculty members should be consistent with peer salaries and disciplinary comparisons. The peers for each campus are those identified in the 2005-06 peer study, approved by the Board of Governors in February 2006.
4. Funds from foundations, trust funds, grants, or other non-state sources may be used to provide salary increases within limits set by the President, as detailed in the salary memorandum.
5. For those qualifying persons paid partially or entirely from medical faculty practice plans, any compensation bonuses will be paid from the plans in proportion to the distribution of their salaries between the plan and the state sources. The remaining salary increase for these persons, if any qualify, may be paid from the medical faculty practice plans according to the availability of such funds without regard to the proportionate contribution from state sources.

### B. Salary Ranges for Selected Senior Academic and Administrative Officers

Salary ranges for selected senior academic and administrative officers have been established for the year 2011–2012 and were sent to the Chief Academic Officers and the members of the Human Resources Council on June 28, 2011. These data can be found at:

[http://www.northcarolina.edu/cao/SalaryData2011-2012/2011-2012\\_Salary\\_Ranges\\_Memo\\_With\\_Study\\_Attached\\_\(2\).pdf](http://www.northcarolina.edu/cao/SalaryData2011-2012/2011-2012_Salary_Ranges_Memo_With_Study_Attached_(2).pdf)

As salaries for deans and configurations of colleges and schools vary too much to set system-wide salary ranges, salary ranges for deans are not included. Each institution should have defensible salaries for deans based on discipline and national peer data. Pursuant to Policy 200.6 “*Delegation*

**PROTOCOLS FOR FACULTY AND STAFF SALARY ADJUSTMENTS  
2011-2012**

of Authority to the President”, administrative salary ranges approved by the President and based on CUPA data for the peer institutions, as approved by the Board of Governors in February 2006.

**C. Salary Ceilings for Certain Faculty Groups in Health Affairs**

The ceilings listed below are established for faculty in the Schools of Medicine at East Carolina University and at UNC-Chapel Hill according to the indicated clusters and are based on the *Report on Medical School Faculty Salaries* published by the Association of American Medical Colleges (AAMC). Salary ceilings include funds paid from all sources. Salary ceiling information was submitted jointly by The Brody School of Medicine at East Carolina University and the University of North Carolina at Chapel Hill School of Medicine.

Departments of Anesthesiology, Emergency Medicine, Obstetrics-Gynecology, Ophthalmology, Otolaryngology, Orthopedics, Clinical Pathology, Radiology, Radiation Oncology, Pediatric Cardiology, Neonatology, Internal Medicine Cardiology, Gastroenterology, and Oncology and Surgical Subspecialties (except Cardiothoracic Surgery)

	<b><u>2011-2012</u></b>
Professor and Chair, Division Chief or Center Director	\$1,444,000
Chief	716,000
Professor	680,000
Associate Professor	655,000
Assistant Professor	478,000
Instructor	452,000
 <b>Cardiothoracic Surgery</b>	
Professor and Chair, Division Chief or Center Director	\$1,172,000
Chief	900,000
Professor	621,000
Associate Professor	490,000
Assistant Professor	370,000
Instructor	315,000
 <b>All Other Departments</b>	
Professor and Chair, Division Chief or Center Director	\$ 651,000
Chief	470,000
Professor	450,000
Associate Professor	368,000
Assistant Professor	346,000
Instructor	329,000
 <b>Department of Allied Health Sciences</b>	
Chair (Dean equivalent)	\$ 262,940
Division Director (Chair equivalent)	193,262
Professor	167,860
Associate Professor	133,290

**PROTOCOLS FOR FACULTY AND STAFF SALARY ADJUSTMENTS  
2011-2012**

Assistant Professor	124,032
Instructor	97,480

The ceilings listed below are established for faculty in the Schools of Dentistry and Public Health at UNC-Chapel Hill. These ceilings include salaries paid from all sources.

	<u><b>2011-2012</b></u>
<b>School of Dentistry</b>	
Professor and Chair	\$ 515,000
Professor	485,000
Associate Professor	465,000
Assistant Professor	375,000
Instructor	225,000
<b>School of Public Health</b>	
Professor and Chair	\$494,000
Professor	469,000
Associate Professor	337,000
Assistant Professor	255,000
Instructor	175,000

**D. Salary Reductions for Certain Faculty Members in Clinical Departments of the Schools of Medicine**

Since it is commonplace that substantial components of salaries of full-time faculty members in clinical departments of schools of medicine derive from receipts for patient care by approved institutional clinical practice plans, it is acknowledged that total salaries of faculty members for full-time service in these disciplines should reflect their levels of clinical activity. Thus, it is consistent that the salary of a faculty member in a clinical department be subject to a negative adjustment if there is a substantial reduction in the individual's level of participation in the practice plan.

**E.** Campuses should determine appropriate salary ranges for faculty based on peer data, as identified by the Board of Governors in February 2006, and disciplinary comparisons.

**III. Procedures for Review and Approval**

1. Consistent with the foregoing requirements and Appendix 1 of the salary memorandum, the Chancellors shall present their salary increase recommendations, if any, consistent with salary memorandum for 2011-12, to the President in the form and manner prescribed by the President. *(See Attachment A to this document)*
2. Recommended salary increases of 10% (ten-percent) or more for designated senior academic and administrative officers at campuses without management flexibility to appoint and fix compensation, and for all other EPA personnel in General Administration and the UNC Center for Public Television shall be submitted to the President/Committee for Personnel and Tenure for approval. These designated

## PROTOCOLS FOR FACULTY AND STAFF SALARY ADJUSTMENTS 2011-2012

“senior academic and administrative officers” include the chancellors, vice chancellors and provosts, deans, and directors of major educational or public service activities who have a rank equivalent to dean, head librarians, or legal assistants to the chancellors (*see Attachment B to this document*). The Chancellors’ recommendations for salary increases for senior academic and administrative officers must be received by September 16, 2011 to ensure time for review by the President and the Committee on Personnel and Tenure. Please continue to use the attached “Board of Governors Salary Increase” template for this purpose ([Attachment A](#).) **Campuses with management flexibility to appoint and fix compensation do not need to provide this information for approval for salaries of less than 10% (ten-percent) and should submit the “Board of Governors Salary Increase” template (Attachment A) for information purposes only by September 30, 2011.**

Final approval of all salary increases of 10% (ten-percent) or more have been delegated to the President for all campuses, except that the concurrence of the Committee on Personnel and Tenure shall be required for increases of 10% (ten-percent) or more AND \$10,000 or more over the 2010-2011 salary. Please use the attached form “Board of Governors Salary Increase” template for this purpose (*Attachment A*.) Recommendations must be received by the President by September 16, 2011.

3. For faculty members in clinical departments of the schools of medicine, authority is delegated to the chancellor at those campuses with Management Flexibility to Appoint and Fix Compensation to approve guidelines and procedures as developed by the institutions, and to have final approval of all salary *decreases* recommended to the chancellor for faculty members in those departments. The approved guidelines and an annual summary of salary reductions for faculty members in clinical departments of the schools of medicine under this resolution shall be reported to the Committee on Personnel and Tenure. Submit this report by September 26, 2011.
4. The President is authorized to delegate to the Chancellors of all campuses approval of all increases that are below 10% (ten-percent) consistent with the terms and conditions detailed in the salary memorandum.
5. Salaries for any individual that lead to a salary level of 10% (ten-percent) or more AND \$10,000 or more over the approved salary for 2010-2011 shall continue to require prior approval by the President or the Committee on Personnel and Tenure. Such increases should be requested only in exceptional circumstances.

### IV. Term of Protocols

These Salary Protocols rescind the earlier Salary Protocols and will remain in effect until the President adopts Salary Protocols for 2012-2013, or otherwise modifies or rescinds these Protocols.