

Sabbatical Handbook

Sabbatical Report Guidelines

Upon return to the University following a sabbatical leave, faculty should complete a report on accomplishments according to the following guidelines before October 15th, following the academic year in which the sabbatical leave was taken. Prior to submitting an electronic copy to the Office of the Provost, the faculty member must submit a copy of the report to his/her dean and chairperson (as appropriate) for review and for completion of item #13 (see below). An approved original electronic report will then be forwarded to the Office of the Provost by the dean by October 15th.

The format for the presentation of the Sabbatical Report, which should be limited to one to three pages, should be as follows:

1. Name of faculty member.
2. Academic rank.
3. Program/School/College and Department.
4. Duration of sabbatical
5. Brief summary of the original plan.
6. Where sabbatical was spent.
7. Summary of sabbatical activities.
8. Where pertinent, reason for departure from original plan.
9. Appraisal of satisfaction or dissatisfaction with development of the program. (Were goals achieved, and if not, why not?)
10. Contributions of the sabbatical to individual development, and/or benefits to the University.
11. Suggestions for modifications.
12. List of supporting agencies. In order to compile a list of possible sources of support, the Committee would appreciate a list of agencies and institutions from which you were successful in obtaining funds.
13. Review by dean and chair. The Committee asks that each report include a signature line for the dean and chair, to indicate that he/she has reviewed and endorsed the report. There should also be a section that allows the dean and chair to comment on the report, should he/she wish. The plan will be accepted only if the dean and chair approved sabbatical report.

Sabbatical reports must be approved by the unit dean or designated representative. Any discrepancy must be worked out within the unit prior to submission to the Office of the Provost. All reports will be collected and reviewed by the unit dean or designated representative. If approved, the unit dean or designated representative will send all submissions with endorsement of approval to the Office of the Provost no later than the 15th of October preceding the academic year in which the sabbatical leave is planned. Submit one (1) copy of the signed report electronically to lori.montezon@marquette.edu for each faculty member's submission. Once the Sabbatical Review Committee and the Provost review the submissions, a memorandum will be sent to the unit dean or designated representative with the results. The unit dean or designated representative is responsible for informing the individual faculty members of the results.

Revised 02/14

EXAMPLE 1: SABBATICAL REPORT

1. John D. McCabe
2. Assistant Professor
3. Arts and Sciences, English Department
4. Spring Semester, 1988-89
5. The original proposal called for the continuation of an on-going project: a study of the intertextuality of medieval translations of and commentaries on Aristotle's *Nicomachean Ethics* and Chaucer's *Canterbury Tales*.
6. Milwaukee: at home, office and Marquette Library.
7. I. The major portion of sabbatical research was given over to advancing the schema of the proposal and included:
 - a. solidifying the evidence for continuity of the medieval tradition of moral realism in the textual commentaries on the *Ethics*. The numerous commentaries of the 14th century are all extensions of the principles established in the 13th century by Thomas Aquinas and Albertus Magnus. Though evidence does not allow me to establish that Chaucer had read a specific commentary, I can now establish that the provenance of the English Walter Burley's commentary - and its representational features in the Thomistic tradition accord it a special status as a "model" of the kind of text that Chaucer must have known. The evidence for the continuity of this Thomistic throughout the 14th c. enable me the better to include as well Thomas' theological exploration of Aristotelian-based virtues in the *Summa*.
 - b. deepening, far beyond my original expectations, the evidence that the thematic center of the highly diverse cluster of six tales in Fragment VI of the *Canterbury Tales*, and especially the enigmatic "Nun's Priest's Tale", is rooted in the scholastic treatment of the virtue of personal Prudence and the distinctions and connections between Art and Prudence. New evidence acquired on the sabbatical enabled me to recast an earlier formulation of this schema in a far stronger fashion.
 - c. uncovering the relationships and oppositions entailed in the medieval treatment of the Aristotelian notion of friendship (*amicitia*; Bk VIII, Ethics) and Chaucer's patterns of reciprocity and opposition in six of the seven tales of Fragments III, IV and V of the *Canterbury Tales*. This was the most time-consuming and productive of the several aspects of the project undertaken during the sabbatical.
 - d. undertaking a broad examination of texts in the medieval tradition of the "penitential" literature, searching for the connections between the treatises and manuals on the sacrament of Penance in the 13th-14th centuries and the disposition of the virtues and vices in the Aristotelian canon. This research is directed toward an accounting of why it is that Chaucer concludes his "Aristotelian" *Canterbury Tales* with the Parson's discourse

on the sacrament of Penance, and how it is that the arrangement of virtues and vices in the Tale resonates with the medieval understanding of Aristotle's teaching on the "bonum honestum" and the "summum bonum." Though I cannot claim as yet to have reduced the vast literature of penitential documents to manageable proportions, I believe I have come upon a key to the reciprocity of the Aristotelian with the Patristic traditions in the work of Robert Grosseteste in the 13th century who was simultaneously involved in the definitive translation of Aristotle's *Ethics* and with the promulgation of pastoral and sacramental reform inaugurated by the Lateran Council.

8. none.
9. I am very satisfied with the results. Much was accomplished in completing aspects of this project, and much was advanced in those aspects which (though not completed) are in far better focus and control.
10. The sabbatical enabled me to advance considerably a project that bears both upon teaching and scholarly development.
11. none.
12. none.

EXAMPLE 2: REPORT ON SABBATICAL ACTIVITIES

Name: Linda Milson
Rank: Associate Professor
School: Program in Medical Technology
Duration of Sabbatical: One Semester, Fall, 1989

Brief Summary of Original Plan

One of the three major objectives of my sabbatical was to compare state-of-the-art laboratory instrumentation used in large diagnostic settings to the type of instruments found in smaller hospitals and/or physician offices and clinics. Another was to assess new technologies and instruments in anticipation of the future market, while the third objective was to update my knowledge of hematology/immunology and the utilization of flow cytometric analysis for diagnosing pathological states in these areas. Benefits of my sabbatical were anticipated to be in the areas of teaching and curriculum development and possible publication of my findings.

Where Sabbatical Was Spent

Mayo Clinic, Rochester, MN
Marshfield Clinic, Marshfield, WI
Akron City Hospital, Akron, OH
Cook County Hospital, Chicago, IL
Sacred Heart - St. Mary's Hospital, Inc., Rhinelander, WI
Rhinelander Medical Center, Rhinelander, WI
Redwood Falls Medical Center, Redwood Falls, MN
Hartford Parkview Clinic, Ltd., Hartford, WI
Howard Young Medical Center, Woodruff, WI
Eagle River Memorial Hospital, Inc., Eagle River, WI
Eastman Kodak Company, Rochester, NY

Summary of Sabbatical Activities

To maximize the benefit of instrument comparison, I chose to spend time on-site (several days to two weeks/site) observing instruments in operation during peak workload demands. This also afforded me the opportunity to evaluate the amount of down-time encountered with specific instruments and to learn troubleshooting techniques. Because the greatest variety is found in instruments manufactured for chemistry and hematology analyses, I spent most of my time in these two areas of the clinical laboratories. I did observe microbiology and urinalysis instruments at institutions where these laboratory departments were automated. Due to my familiarity with instrumentation used in Milwaukee area hospitals, I selected clinical facilities in other geographic locations. Each visit was preceded by independent study preparation and followed by time to evaluate and condense my notes and read pertinent literature and suggested references.

During August and September I visited institutions in northern Wisconsin and southern Minnesota. Instrument set-up calibration along with specimen processing and work flow patterns were observed. I learned about analyzers providing throughput of 300 samples per hour, extensive monitoring of quality control and computer interfacing for patient reporting. Medical technologists shared with me their rationale for instrument selection and freely discussed customer support efforts provided by various manufacturers. Not only was instrument variation dramatically different among the laboratories but also their managerial practices and scheduling protocols were quite unique to insure 24-hour service at a time when certified medical technologies are in short supply.

October was spent in the diagnostic immunology laboratory at Cook County Hospital learning principles of flow cytometric technology. Using a Coulter Epic V analyzer, I evaluated histograms and correlated pattern recognition with diagnoses of the

leukemias, lymphomas and Immunodeficiency Syndromes (AIDS and others). While at Cook County I had the opportunity to observe and compare instruments in the hematology and chemistry laboratories.

My visits to Eastman Kodak and Akron City Hospital occurred in November. The experience at Kodak far exceeded my expectations of learning about instrument manufacturing. Their principle of dry slide technology was not new to me but observing the entire manufacturing process from research and development to customer delivery and support led me to appreciate the quality of their laboratory products. Meeting with Dr. Margaret Smith-Lewis, senior research chemist, resulted in another unexpected benefit. She explained to me that team effort is what makes it possible for Kodak to produce quality products with superior performance and encouraged me to try experiential team-based learning in my college classroom. As a result, the emphasis in my instrumentation class this semester focuses on a team approach to troubleshooting and problem solving. Students work together in small groups to share knowledge and experiences. Feedback from them has been positive. Medical technologies with problem solving skills and experience in group dynamics will be valuable assets to clinical laboratories in tomorrow's marketplace.

In December I returned to northern Wisconsin for a visit to the large medical clinic and spent a few days at Hartford Parkview Clinic. Workload demands and testing patterns differ from those found in acute care facilities but I found these laboratories to be highly automated only on a smaller scale. All of the instrumentation I viewed is based on principles and theory identical to those taught in my course. It is merely an application of these principles that differs with advanced technology in the most sophisticated instruments.

Departure from Original Plan

I did not delete any of the activities outlined in my original proposal but did alter the time spent at each institution. This afforded me the opportunity to expand the number of laboratories I visited providing me more data for comparison. When making the arrangements with the Eastman Kodak Company, I realized that manufacturers were not going to share proprietary information with me regarding new products thus limiting my experience to only one company.

While in Chicago I met with the medical technology program directors and faculty at Rush University and the University of Illinois. We discussed curriculum as well as recruitment activities and lamented about the problems anticipated in health care delivery due to the shortage of qualified medical technologists.

In December I served on the University Promotion and Tenure Committee as the representative for medical technology and physical therapy. I had accepted this committee assignment in June, 1989, knowing that it not jeopardize my sabbatical activities.

Appraisal of Satisfaction/Dissatisfaction

I was extremely satisfied with my sabbatical and my original expectations were exceeded.

Benefits of Sabbatical

This sabbatical updated my knowledge in hematology/immunology and flow cytometric technology used in evaluation pathophysiological states. Being immersed in the clinical laboratory environment of acute care facilities helped me appreciate the problems management faces in providing reliable results with minimal resources. As a result of my meeting with faculty from the University of Illinois, I was asked to author a chapter in an instrumentation book scheduled for publication in late 1990. Offers for collaboration on continuing education and research were made by the staff of Cook County Hospital.

The people I met were very impressed with Marquette University for giving the faculty release time to update their knowledge. Many more institutions outside the Milwaukee area now know that the medical technology program at Marquette still graduates a relatively large number of students compared to other colleges and universities and I have contacts at these facilities for placement of our graduates. Because of my positive interchange with the Eastman Kodak Company, Marquette University will be remembered for paving the way for other medical technology faculty to have a similar experience with their Clinical Products Division.

The benefits of the change in teaching strategy for my instrumentation course were discussed previously. Medical technologists at every institution I visited verified for me that we are using valid teaching methodologies in our program. They encouraged me to continue teaching instrumentation based on theory and principles because if a person understands these, application to state-of-the-art instrumentation is easily made.

As a result of my visit to Eastman Kodak, they donated a clinical chemistry analyzer to us. This instrument is different from any of our other "gifts" because it is a functional unit that has been calibrated and is capable of producing reliable results. With this instrument in our possession there is a possibility that we can use it for research as well as teaching purposes.

Suggestions for Modifications

The only modification that I can identify would be to schedule my next sabbatical for an entire year in order to visit more facilities.

Supporting Agencies

Due to the fact that my sabbatical involved multiple facilities, I did not seek external funding for expenses. Additional dollars were not required for the salary of the medical technologies who carried my teaching load during the Fall semester. She was paid the exact amount of my salary reduction.