

# Academic Appointment, Promotion & Tenure

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Chair, Academic Appointment, Promotion and Tenure  
Committee

University of Tennessee Graduate School of Medicine

# University of Tennessee Graduate School of Medicine Core Values

- To foster an innovative learning organization through the leadership of pre-eminent faculty
- To educate fellows, residents and students to provide competent, safe and compassionate healthcare
- To promote basic science and clinically relevant research
- To cultivate physicians to be educational scholars, life long learners and informed consumers of clinical research
- To collaborate with our partners and community for shared responsibility

# Policy: Faculty Affairs Website

[http://www.utmem.edu/Medicine/Acad\\_Affairs/Fac\\_Adm/](http://www.utmem.edu/Medicine/Acad_Affairs/Fac_Adm/)

- Faculty Handbook – UTHSC policy
- COM By-Laws – COM policy
- Insider's Guide to Promotion in COM
- Guidance for Publication Productivity at the GSM

# Academic Appointment and Promotion Categories

- Regular appointments
  - Professor, associate professor, assistant professor and instructor
  - Receive compensation
  - Tenure or non-tenure tracts
  - Research/educator or clinician/educator tracts

# Academic Appointment and Promotion Categories

- Part-time faculty
- Limited term faculty
- Affiliated faculty
- Volunteer faculty
- Joint faculty appointments
- Emeritus faculty

# Tenure – value to UTHSC COM

- good job in assigned duties throughout tenure track period
- shown promise of continued growth and success in these roles
- ability to contribute to programs/activities that are likely to be needed at UTHSC

# TENURE

- Tenure entitles a faculty member to an automatic continuation of his or her annual appointment until relinquished or forfeiture or termination for a specific cause.
- Placement on tenure tract and probationary period determined at appointment. Standard 6 years.
- Criteria for tenure tract:
  - Fulfills a distinctive requirement for the mission
  - Demonstrated excellence in area
  - Expectation of ongoing productivity
- Award of Tenure
  - Regular Cumulative Performance Reviews
  - Award requires recommendation by the President of the University of Tennessee and approval by the Board of Trustees
  - Tenure not awarded: out
- Enhanced Post-Tenure Performance Reviews

# VOLUNTEER FACULTY

- Volunteer faculty play a major role in educating our trainees.
- Volunteer appointments are for faculty members who serve without monetary compensation.
- Recognized by prefix of “Clinical” if eligible for patient care or “Adjunct” if not.
- Initial appointment predicated on qualifications and interest in participation in the activities and goals of the department or division.
- Promotion based on the candidate’s desire, needs of the department, and the quality and/or magnitude of contributions in the area of teaching, research or other scholarly activities, patient care, and university service or outreach.
- Standard promotion criteria apply but long term, substantial service can substitute for some scholarly requirements.
- Appointment as Clinical faculty should be reviewed by the Department Chair at least every three years.



# Essentials for Criteria for Rank

## ■ Assistant Professor

- show promise as a teacher
- show evidence of ability in research and/or professional promise
- Certified by American Board or equivalent credentials

## ■ Associate Professor

- accomplished in teaching, patient care, research and/or service with promise of continued productivity and development
- Publications: peer-reviewed, reviews, textbook chapters, case studies
- ~4 year minimum time as an Assistant Professor

## ■ Professor

- made and continues to make outstanding contributions in teaching, patient care, research, and/or service
- achieved a high level of productivity in the academic arena
- developed new technique in a surgical procedure or clinical protocol
- ~5 year minimum time as an Associate Professor
- *national or international recognition*

# Essentials for Criteria for Rank

## ■ Instructor

- Terminal degree of discipline or equivalent training or experience
- Commitment to the University's mission
- Excellent scholastic record
- Ability to relate effectively to students and/or colleagues

## ■ Assistant Professor

- Doctorate or terminal degree in discipline or equivalent
- Demonstrate potential for excellence in teaching
- Demonstrate potential for excellence in research and/or scholarly activity
- Demonstrate potential for excellence in service
- Demonstrated ability to relate effectively to students and colleagues
- Demonstrate potential for excellence in patient care when applicable
- Board certification in his/her discipline when applicable

# Essentials for Criteria for Rank

- Associate Professor
  - Doctorate or terminal degree or experience appropriate for appointment
  - Demonstrates significant contributions as teacher with expectation of continued effectiveness
  - Demonstrates significant contributions in research/scholarly activity with strong likelihood of continuing effectiveness
  - Demonstrates significant contributions to service with strong likelihood of continuing effectiveness
  - Demonstrated ability to relate to students and professional colleagues
  - Active participation in professional organizations
  - Rank of Assistant Professor for at least 4 years
  - Demonstrates significant contributions to patient care when applicable
  - Board certification when applicable
  - Developing local or regional reputation or impact \*

# Essentials for Criteria for Rank

## ■ Professor

- Doctorate or terminal degree in discipline or equivalent training
- Clear and convincing record of a high level of sustained effectiveness as a teacher
- Clear and convincing record of a high level of sustained effectiveness in research/scholarly activity
- Clear and convincing record of a high level of sustained effectiveness in service
- Ability to relate effectively to students and faculty
- Held the rank of Associate Professor for 5 years
- Clear and convincing record of high level of sustained effectiveness in patient care when applicable
- Board certified when applicable
- National or International reputation in the discipline

# National / International Reputation:

- invited lectureships outside UTHSC
- leading symposia outside UTHSC
- membership on grant review sections
- editorial board appointments
- elected position/membership in professional society (exclusive)
- developing a now accepted surgical technique or clinical protocol
- comments made in “arms length” external letters of recommendation

# Time in Rank Requirements for Promotion

Rank	Minimum Number of Years at UTGSM or Other Academic Institution
Assistant Professor	Boards required
Associate Professor	4
Professor	5

# Minimum Number of Discipline-Specific Publications for Promotion

Track	Assistant to Associate Professor	Associate to Full Professor
Non-tenure (Clinicians and teachers)	2	5
Non-tenure (Researchers)	5	10
Tenure	5	10

# Quantity and quality of publications

- Pub count made over time in rank
- All should list UTHSC as affiliated institution.
- If >50% research effort, then should be first or last author on majority of pubs.
- Tenure Track: peer reviewed journals, journal Impact Factor >1.0, citation history of pubs >3 years old should be > 0-1
- Non-tenure track: peer reviewed journals and scholarly works such as textbook chapters, monographs etc



# Number of Required Letters of Recommendation

Type of Action	Internal Letters	External Letters
Instructor to Assistant Professor	3	0
Assistant Professor to Associate Professor without tenure	3	2
Assistant Professor to Associate Professor with tenure	2	3
Associate Professor to Professor with or without tenure	2	3
Tenure evaluation at any rank without promotion	2	3

# Letters of Evaluation

- Internal and external
- Number and source defined by desired appointment rank and/or tenure evaluation.
- Evaluator Criteria
  - Distinguished individuals in candidate's field with sufficient expertise to assess his/her current and projected contributions
  - At or above the rank to which the candidate aspires to be promoted
  - Evaluators for tenure consideration must be tenured
  - Lack conflict of interest/Arm's length: coinvestigators on grants, past mentors, practice partners, cowriters on articles
- Mechanism
  - Chair and candidate select potential evaluators by mutual agreement.
  - Solicitation letters include CV, relevant supporting material, UTHSC Faculty Handbook requirements.
  - Letters returned to Dean's Office.
  - All letters included in dossier.
  - Select evaluators carefully.

# Missions of the University of Tennessee Health Science Center

- Four Missions
  - Composite Teaching
  - Scholarly Activity
  - Patient Care
  - Service/Outreach
- Individual faculty missions establish where you spend your time/ percent effort.
- Determined by Department Chair or supervisor.
- Confirmed at time of appointment and at yearly evaluation.
- Forms basis for Metric evaluation.

# METRIC EVALUATION CATEGORIES

- COMPOSITE TEACHING
  - Teaching Director
  - Other teaching duties
  - Acknowledged excellence in teaching
  - Innovation in teaching
- SCHOLARLY ACTIVITY
  - Publications
  - Extramural funding
  - Other scholarly activities
- PATIENT CARE
  - Productivity/Patient Load/Scheduling
  - Quality of Care/Patient Satisfaction/Reputation as Clinician
  - Professional Recertification/Enhancement of Knowledge Base
- SERVICE/OUTREACH
  - Institutional Service
  - Professional Service
  - Community Service/Outreach

COMPOSITE TEACHING: check (✓) all those applicable

Faculty Candidate \_\_\_\_\_  
Department \_\_\_\_\_

**A. Teaching Director**

<p><b>1 (Below Expectations)</b>  <input type="checkbox"/> did a below average job as Director of Course, Clerkship, Residency or Fellowship training</p>	<p><b>2 (Meets Expectations)</b>  <input type="checkbox"/> did a good job as Director of Course, Clerkship, Residency or Fellowship training  <input type="checkbox"/> was Associate Director of Course, Clerkship, Residency or Fellowship</p>	<p><b>3 (Exceeds Expectations)</b>  <input type="checkbox"/> did an exceptional job as Director of Course, Clerkship, Residency or Fellowship training  <input type="checkbox"/> maintained more than 1 Directorships of Course, Clerkship, Residency or Fellowship training</p>
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**B. Other Teaching Duties**

<p><b>1 (Below Expectations)</b>  <input type="checkbox"/> refused to assume additional lecture hours or clerkship/GME responsibilities yet below the department/division average in lecture hours  <input type="checkbox"/> refused to accept mentoring responsibilities as is consistent with department/division averages  <input type="checkbox"/> failed to appear at scheduled teaching / mentoring obligations</p>	<p><b>2 (Meets Expectations)</b>  <input type="checkbox"/> number of lecture hours or clerkship/GME efforts were consistent with average of the same of comparable department/division  <input type="checkbox"/> consistently mentored trainees  <input type="checkbox"/> served on thesis or research oversight committees  <input type="checkbox"/> current or past trainees have done well / progressed appropriately</p>	<p><b>3 (Exceeds Expectations)</b>  <input type="checkbox"/> lecture hours or clerkship/GME efforts were &gt;25% above the average of the same or comparable department /division  <input type="checkbox"/> number of mentored trainees was significantly greater than the faculty average for the same of comparable department/division  <input type="checkbox"/> served on multiple thesis committees beyond that of a typical faculty member  <input type="checkbox"/> current/past students or trainees have excelled and/or received faculty positions or awards</p>
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**C. Acknowledged Excellence in Teaching**

<p><b>1 (Below Expectations)</b>  <input type="checkbox"/> consistently received poor reviews in evaluations  <input type="checkbox"/> consistently received poor reviews from Director of teaching/training program</p>	<p><b>2 (Meets Expectations)</b>  <input type="checkbox"/> student/trainee evaluations note a job well done  <input type="checkbox"/> consensus among Faculty and Director of teaching program of a job well done</p>	<p><b>3 (Exceeds Expectations)</b>  <input type="checkbox"/> received multiple teaching awards  <input type="checkbox"/> consistently received outstanding student/trainee evaluations  <input type="checkbox"/> consistently received outstanding review by Director of program</p>
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**D. Innovation in Teaching**

<p><b>1 (Below Expectations)</b>  <input type="checkbox"/> used out-of-date information  <input type="checkbox"/> material disorganized and presented in an uninteresting fashion  <input type="checkbox"/> lacked clear objectives in training/lectures  <input type="checkbox"/> ignored questions and requests for added help  <input type="checkbox"/> lectures were duplication of book or other single source  <input type="checkbox"/> exams were arbitrary in material tested  <input type="checkbox"/> (other, describe below)</p>	<p><b>2 (Meets Expectations)</b>  <input type="checkbox"/> well organized and interesting presentations  <input type="checkbox"/> used appropriate multi-media technology  <input type="checkbox"/> assessed and updated materials at reasonable intervals  <input type="checkbox"/> provided help / answered questions in a professional fashion  <input type="checkbox"/> objectives were stated and adhered to  <input type="checkbox"/> gave handouts and/or online access to materials from lectures, i.e. graphs, images, or bullet points  <input type="checkbox"/> exams tested the objectives and material presented</p>	<p><b>3 (Exceeds Expectations)</b>  <input type="checkbox"/> developed and implemented curriculum for new course or clinical rotation  <input type="checkbox"/> annually upgraded material based on board scores, standards set by professional organizations, emerging concepts  <input type="checkbox"/> created student, residency or fellowship manuals for standard practice in division or department  <input type="checkbox"/> introduced novel and useful teaching tool(s) that require significant effort by faculty, i.e. DVD or web based tutorial.  <input type="checkbox"/> developed simulations or standardized patients and/ or implemented their use  <input type="checkbox"/> consistently sought out trainees that were struggling and provided additional instruction  <input type="checkbox"/> published or presented at national meeting on innovative teaching  <input type="checkbox"/> (other, describe below)</p>
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Scholarly Activity: check (✓) all those applicable

Faculty Candidate \_\_\_\_\_

Department \_\_\_\_\_

**A. Publications**

1 (Below Expectations)	2 (Meets Expectations)	3 (Exceeds Expectations)
<input type="checkbox"/> fell short of the minimum number of peer-reviewed publications for promotion (see Table 1) during time in current rank <input type="checkbox"/> typically published in lower quality journals <input type="checkbox"/> limited number of citations for published work greater than 3 years old (see Scopus)	<input type="checkbox"/> obtained the minimum number of peer-reviewed publications for promotion (see Table 1) during the time in current rank <input type="checkbox"/> typically published in mid- to high- level journals as evidenced by a journal Impact Factor greater than 1.0 or other measure of importance of the journal to the field <input type="checkbox"/> had $\geq 2$ citations for the majority of publications greater than 3 years old (see Scopus database) <input type="checkbox"/> authored at least 2 unique chapters or review articles <input type="checkbox"/> edited a textbook	<input type="checkbox"/> has double the minimum number of peer-reviewed publications for promotion (see Table 1) during time in current rank <input type="checkbox"/> published, more than once, in extremely high impact journals, i.e. >8 <input type="checkbox"/> publications were cited with an impressive level of frequency (see Scopus) <input type="checkbox"/> authored greater than 5 chapters or reviews <input type="checkbox"/> edited textbooks

**B. Extramural Funding**

1 (Below Expectations)	2 (Meets Expectations)	3 (Exceeds Expectations)
<input type="checkbox"/> did not obtain funding consistent with %effort. For example, a faculty with >50% research effort not having extramural grant(s) <input type="checkbox"/> ignored grant deadlines and comments in past reviews for faculty with >50% research effort, did not obtain principal investigator (PI) or co-PI status <input type="checkbox"/> unable to sustain extramural funding <input type="checkbox"/> did not submit grant application	<input type="checkbox"/> maintained funding consistent with designated % effort. Typically, faculty with >50% effort in research should have a R01-like funding (~200K/yr direct) while a faculty member with 10% research effort might collaborate on a grant or have limited industry support <input type="checkbox"/> responded in a timely and appropriate manner to grant reviews <input type="checkbox"/> for faculty with > 50% research effort, principal investigator status in extramural funding and/or consistently is designating 50% time on extramural grants <input type="checkbox"/> co-investigator or collaborator on multiple grants with different investigators <input type="checkbox"/> demonstrated ability to competitively renew extramural funding <input type="checkbox"/> co-investigator or collaborator on grants, or mentor/sponsor for K08 or similar training grants	<input type="checkbox"/> consistently maintained multiple R01-like grant funding as principal investigator <input type="checkbox"/> program project/center director <input type="checkbox"/> received awards for excellence in funding (Davits award) <input type="checkbox"/> consistently designating >75% time on extramural grants <input type="checkbox"/> consistently maintained R01-like grant funding and PI/Director on a training, core, or major equipment grant

**C. Other Scholarly Activities**

1 (Below Expectations)	2 (Meets Expectations)	3 (Exceeds Expectations)
<input type="checkbox"/> limited other scholarly activity or quality of those activities	<input type="checkbox"/> developed local practice guidelines <input type="checkbox"/> authored articles for the lay press or patient brochures <input type="checkbox"/> submitted abstracts or articles <input type="checkbox"/> obtained patent <input type="checkbox"/> gave at least 2 invited lectures over the time in current rank <input type="checkbox"/> gave at least 2 presentations at regional / national / international meetings <input type="checkbox"/> featured presentation at grand rounds for another UT department or outside UT <input type="checkbox"/> collaborated/published with faculty from UTHSC and other institutions <input type="checkbox"/> organized and contributed to journal clubs or noon conferences	<input type="checkbox"/> participated in national guideline setting panels <input type="checkbox"/> frequently invited to comment in national press on area of expertise <input type="checkbox"/> successfully took patent to production / application stage <input type="checkbox"/> gave plenary lecture at national or international meeting in area of expertise <input type="checkbox"/> collaborated/published with outstanding nationally or internationally recognized investigators <input type="checkbox"/> gave >5 invited lectures or presentation outside UT

Patient Care: check (✓) all those applicable

Faculty Candidate \_\_\_\_\_

Department \_\_\_\_\_

**A. Productivity/Patient Load/Scheduling:**

<p><b>1 (Below Expectations)</b></p> <p><input type="checkbox"/> fell short by 25% or more of the department/division set goal or AAMC average for RVU / FTE</p> <p><input type="checkbox"/> fell short by 25% or more of the department/division set goal or MGMA average for charges / FTE</p> <p><input type="checkbox"/> fell short by 25% or more of the department/division set goal for numbers of procedures</p> <p><input type="checkbox"/> fell short by 25% or more of the department/division set goal for numbers of clinics / week</p> <p><input type="checkbox"/> fell short by 25% or more of the department/division set goal for numbers of patients seen</p> <p><input type="checkbox"/> consistently late in completion of reports / medical records</p>	<p><b>2 (Meets Expectations)</b></p> <p><input type="checkbox"/> met the department/division set goal for RVU / FTE or, if not set, the AAMC University Hospital based average RVU / FTE value for that discipline</p> <p><input type="checkbox"/> met the department/division set goal for charges / FTE or, if not set, the MGMA (Medical Group Management Assoc) private practice median for physicians in that discipline</p> <p><input type="checkbox"/> met the department/division set goal for numbers of procedures</p> <p><input type="checkbox"/> met the department/division set goal for numbers of clinics / week</p> <p><input type="checkbox"/> met the department/division set goal for numbers of patients seen</p> <p><input type="checkbox"/> completed reports / medical records in a timely fashion</p>	<p><b>3 (Exceeds Expectations)</b></p> <p><input type="checkbox"/> exceeded by 25% or more the department/division set goal or AAMC average in RVU / FTE</p> <p><input type="checkbox"/> exceeded by 25% or more the department/division set goal or MGMA average in charges / FTE</p> <p><input type="checkbox"/> exceeded by 25% or more the department/division set goal for numbers of procedures</p> <p><input type="checkbox"/> exceeded by 25% or more the department/division set goal for numbers of clinics / week</p> <p><input type="checkbox"/> exceeded by 25% or more the department/division set goal for numbers of patients seen</p>
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**B. Quality of Care/Patient Satisfaction/ Reputation as Clinician**

<p><b>1 (Below Expectations)</b></p> <p><input type="checkbox"/> received consistent negative reviews on standardized evaluations carried out in the practice setting</p> <p><input type="checkbox"/> receive frequent complaints from patients or parents of patients</p> <p><input type="checkbox"/> received negative evaluations from local peers and other health care providers</p> <p><input type="checkbox"/> received minimum number of referrals</p>	<p><b>2 (Meets Expectations)</b></p> <p><input type="checkbox"/> met expectations on standardized evaluations carried out in the practice setting</p> <p><input type="checkbox"/> received positive evaluations from local peers and other health care providers</p> <p><input type="checkbox"/> received referrals both locally and regionally that are consistent in number with average for department / division</p> <p><input type="checkbox"/> played a role in development and local implementation of practice guidelines for care or to prevent medical errors</p> <p><input type="checkbox"/> used and disseminated new surgical procedure, cutting edge diagnosis, treatment or prevention approach</p>	<p><b>3 (Exceeds Expectations)</b></p> <p><input type="checkbox"/> exceeded expectations on standardized evaluations carried out in the practice setting</p> <p><input type="checkbox"/> received frequent compliments from patients</p> <p><input type="checkbox"/> received outstanding evaluations from peers and other health care providers</p> <p><input type="checkbox"/> received referrals from across a large, multi-state region</p> <p><input type="checkbox"/> participated in clinical national guideline setting panels or protocol writing panels</p> <p><input type="checkbox"/> key role in development of innovative approach to diagnosis, treatment or prevention of disease, applications of technologies and/or models of care delivery that influence care regionally or nationally</p> <p><input type="checkbox"/> gave plenary lectures at national and international meetings</p> <p><input type="checkbox"/> participated in national boards</p>
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**C. Professional Recertification/Enhancement of Knowledge Base**

<p><b>1 (Below Expectations)</b></p> <p><input type="checkbox"/> was unable to obtain or allowed lapse in board certification / licensure</p> <p><input type="checkbox"/> disciplined by state board, local medical society or hospital</p>	<p><b>2 (Meets Expectations)</b></p> <p><input type="checkbox"/> acquired and maintained board certification / licensure</p> <p><input type="checkbox"/> consistently participated in continuing education and special training programs</p>	<p><b>3 (Exceeds Expectations)</b></p> <p><input type="checkbox"/> demonstrated ability to translate continuing education and special training programs into working knowledge and usable procedures</p> <p><input type="checkbox"/> received physician recognition award from AMA or other medical society for quantity/quality of completed CME</p>
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Service/Outreach: check (✓) all those applicable

Faculty Candidate \_\_\_\_\_

Department \_\_\_\_\_

**A. Institutional Service**

<p><b>1 (Below Expectations)</b>          _____ provided limited service to UTHSC beyond assigned patient care, teaching, or research duties          _____ other (please list)</p>	<p><b>2 (Meets Expectations)</b>          _____ was a member on more than 1 UTHSC (depart, college, or campus-wide) or hospital committees          _____ provided unique service to faculty at UTHSC (i.e. pathology lab, or transgenic or molecular core facility)          _____ organized education or seminar series          _____ played a role in trainee or faculty recruitment          _____ mentored junior faculty          _____ other (please list)</p>	<p><b>3 (Exceeds Expectations)</b>          _____ chaired UTHSC committee, or had above average commitment on UTHSC or hospital committee(s)          _____ provided outstanding service as Head/Director of a service core at UTHSC          _____ chaired multiple faculty recruitment / searches          _____ other (please list)</p>
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**B. Professional Service**

<p><b>1 (Below Expectations)</b>          _____ provided limited service to local, state or national organizations, granting institutions, or journals          _____ other (please list)</p>	<p><b>2 (Meets Expectations)</b>          _____ participated in local, state or national organizations or societies          _____ reviewed for professional journals          _____ ad hoc reviewed for extramural granting institutions          _____ other (please list)</p>	<p><b>3 (Exceeds Expectations)</b>          _____ organized or held an appointed position in local, state or national organization or society          _____ editorial board member          _____ standing member or chair of review panel for extramural grants (i.e. NIH study section)          _____ organized meeting or symposia          _____ served on Editorial Boards          _____ reviewed greater than 8 articles / yr for journals          _____ role as medical or scientific expert for local, state or federal government needs          _____ other (please list)</p>
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**C. Community Service/Outreach**

<p><b>1 (Below Expectations)</b>          _____ provided limited profession-related community service or outreach</p>	<p><b>2 (Meets Expectations)</b>          _____ participated in community health initiatives          _____ gave health-related presentations to local groups          _____ participated in K-12 activities in area schools (i.e. health fairs, science fair)          _____ provided research/training/teaching opportunities to community high school or undergraduate students/teachers or other local groups          _____ other (please list)</p>	<p><b>3 (Exceeds Expectations)</b>          _____ organized community health initiatives          _____ provided clinical service in community settings (i.e. Church Health Center)          _____ established K-12 program on health or science issues          _____ established programs providing research/training/teaching opportunities to community high school or undergraduate students/teachers or other local groups          _____ other (please list)</p>
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# Patient Care: A. Productivity/Patient Load/Scheduling:

## 1 (Below Expectations)

- fell short by 25% or more of the department/division set goal or AAMC average for RVU / FTE
- fell short by 25% or more of the department/division set goal or MGMA average for charges / FTE
- fell short by 25% or more of the department/division set goal for numbers of procedures
- fell short by 25% or more of the department/division set goal for numbers of clinics / week
- fell short by 25% or more of the department/division set goal for numbers of patients seen
- consistently late in completion of reports / medical records

## 2 (Meets Expectations)

- met the department/division set goal for RVU / FTE or, if not set, the AAMC University Hospital based average RVU / FTE value for that discipline
- met the department/division set goal for charges / FTE or, if not set, the MGMA (Medical Group Management Assoc) private practice median for physicians in that discipline
- met the department/division set goal for numbers of procedures
- met the department/division set goal for numbers of clinics / week
- met the department/division set goal for numbers of patients seen
- completed reports / medical records in a timely fashion

## 3 (Exceeds Expectations)

- exceeded by 25% or more the department/division set goal or AAMC average in RVU / FTE
- exceeded by 25% or more the department/division set goal or MGMA average in charges / FTE
- exceeded by 25% or more the department/division set goal for numbers of procedures
- exceeded by 25% or more the department/division set goal for numbers of clinics / week
- exceeded by 25% or more the department/division set goal for numbers of patients seen

Patient Care: check (✓) all those applicable

Faculty Candidate \_\_\_\_\_

Department \_\_\_\_\_

**A. Productivity/Patient Load/Scheduling:**

1 (Below Expectations)	2 (Meets Expectations)	3 (Exceeds Expectations)
<input type="checkbox"/> fell short by 25% or more of the department/division set goal or AAMC average for RVU / FTE	<input type="checkbox"/> met the department/division set goal for RVU / FTE or, if not set, the AAMC University Hospital based average RVU / FTE value for that discipline	<input type="checkbox"/> exceeded by 25% or more the department/division set goal or AAMC average in RVU / FTE
<input type="checkbox"/> fell short by 25% or more of the department/division set goal or MGMA average for charges / FTE	<input type="checkbox"/> met the department/division set goal for charges / FTE or, if not set, the MGMA (Medical Group Management Assoc) private practice median for physicians in that discipline	<input type="checkbox"/> exceeded by 25% or more the department/division set goal or MGMA average in charges / FTE
<input type="checkbox"/> fell short by 25% or more of the department/division set goal for numbers of procedures	<input type="checkbox"/> met the department/division set goal for numbers of procedures	<input type="checkbox"/> exceeded by 25% or more the department/division set goal for numbers of procedures
<input type="checkbox"/> fell short by 25% or more of the department/division set goal for numbers of clinics / week	<input type="checkbox"/> met the department/division set goal for numbers of clinics / week	<input type="checkbox"/> exceeded by 25% or more the department/division set goal for numbers of clinics / week
<input type="checkbox"/> fell short by 25% or more of the department/division set goal for numbers of patients seen	<input type="checkbox"/> met the department/division set goal for numbers of patients seen	<input type="checkbox"/> exceeded by 25% or more the department/division set goal for numbers of patients seen
<input type="checkbox"/> consistently late in completion of reports / medical records	<input type="checkbox"/> completed reports / medical records in a timely fashion	

**B. Quality of Care/Patient Satisfaction/ Reputation as Clinician**

1 (Below Expectations)	2 (Meets Expectations)	3 (Exceeds Expectations)
<input type="checkbox"/> received consistent negative reviews on standardized evaluations carried out in the practice setting	<input type="checkbox"/> met expectations on standardized evaluations carried out in the practice setting	<input type="checkbox"/> exceeded expectations on standardized evaluations carried out in the practice setting
<input type="checkbox"/> receive frequent complaints from patients or relatives of patients	<input type="checkbox"/> received positive evaluations from local peers and other health care providers	<input type="checkbox"/> received frequent compliments from patients
<input type="checkbox"/> received negative evaluations from local peers and other health care providers	<input type="checkbox"/> received referrals both locally and regionally that are consistent in number with average for department / division	<input type="checkbox"/> received outstanding evaluations from peers and other health care providers
<input type="checkbox"/> received minimum number of referrals	<input type="checkbox"/> played a role in development and local implementation of practice guidelines for care or to prevent medical errors	<input type="checkbox"/> received referrals from across a large, multi-state region
	<input type="checkbox"/> used and disseminated new surgical procedure, cutting edge diagnosis, treatment or prevention approach	<input type="checkbox"/> participated in clinical national guideline setting panels or protocol writing panels
		<input type="checkbox"/> key role in development of innovative approach to diagnosis, treatment or prevention of disease, applications of technologies and/or models of care delivery that influence care regionally or nationally
		<input type="checkbox"/> gave plenary lectures at national and international meetings
		<input type="checkbox"/> participated in national boards

Scholarly Activity: check (✓) all those applicable

Faculty Candidate \_\_\_\_\_

Department \_\_\_\_\_

**A. Publications**

1 (Below Expectations)	2 (Meets Expectations)	3 (Exceeds Expectations)
<p>_____ fell short of the minimum number of peer-reviewed publications for promotion (see Table 1) during time in current rank</p> <p>_____ typically published in lower quality journals</p> <p>_____ limited number of citations for published work greater than 3 years old (see Scopus)</p>	<p>_____ obtained the minimum number of peer-reviewed publications for promotion (see Table 1) during the time in current rank</p> <p>_____ typically published in mid- to high- level journals as evidenced by a Journal Impact Factor greater than 1.0 or other measure of importance of the journal to the field</p> <p>_____ had &gt; 2 citations for the majority of publications greater than 3 years old (see Scopus database)</p> <p>_____ authored at least 2 unique chapters or review articles</p> <p>_____ edited a textbook</p>	<p>_____ has double the minimum number of peer-reviewed publications for promotion (see Table 1) during time in current rank</p> <p>_____ published, more than once, in extremely high impact journals, i.e. &gt;8</p> <p>_____ publications were cited with an impressive level of frequency (see Scopus)</p> <p>_____ authored greater than 5 chapters or reviews edited textbooks</p>

**B. Extramural Funding**

1 (Below Expectations)	2 (Meets Expectations)	3 (Exceeds Expectations)
<p>_____ did not obtain funding consistent with %effort. For example, a faculty with &gt;50% research effort not having extramural grant(s)</p> <p>_____ ignored grant deadlines and comments in past reviews</p> <p>_____ for faculty with &gt;50% research effort, did not obtain principal investigator (PI) or co-PI status</p> <p>_____ unable to sustain extramural funding</p> <p>_____ did not submit grant application</p>	<p>_____ maintained funding consistent with designated % effort. Typically, faculty with &gt;50% effort in research should have a R01-like funding (~200K/yr direct) while a faculty member with 10% research effort might collaborate on a grant or have limited industry support</p> <p>_____ responded in a timely and appropriate manner to grant reviews</p> <p>_____ for faculty with &gt; 50% research effort, principal investigator status in extramural funding and/or consistently is designating 50% time on extramural grants</p> <p>_____ co-investigator or collaborator on multiple grants with different investigators</p> <p>_____ demonstrated ability to competitively renew extramural funding</p> <p>_____ co-investigator or collaborator on grants, or mentor/sponsor for K08 or similar training grants</p>	<p>_____ consistently maintained multiple R01-like grant funding as principal investigator</p> <p>_____ program project/center director</p> <p>_____ received awards for excellence in funding (Davits award)</p> <p>_____ consistently designating &gt;75% time on extramural grants</p> <p>_____ consistently maintained R01-like grant funding and PI/Director on a training, core, or major equipment grant</p>

COMPOSITE TEACHING: check (✓) all those applicable

Faculty Candidate \_\_\_\_\_

Department \_\_\_\_\_

**A. Teaching Director**

1 (Below Expectations)	2 (Meets Expectations)	3 (Exceeds Expectations)
<input type="checkbox"/> did a below average job as Director of Course, Clerkship, Residency or Fellowship training	<input type="checkbox"/> did a good job as Director of Course, Clerkship, Residency or Fellowship training <input type="checkbox"/> was Associate Director of Course, Clerkship, Residency or Fellowship	<input type="checkbox"/> did an exceptional job as Director of Course, Clerkship, Residency or Fellowship training <input type="checkbox"/> maintained more than 1 Directorships of Course, Clerkship, Residency or Fellowship training

**B. Other Teaching Duties**

1 (Below Expectations)	2 (Meets Expectations)	3 (Exceeds Expectations)
<input type="checkbox"/> refused to assume additional lecture hours or clerkship/GME responsibilities yet below the department/division average in lecture hours <input type="checkbox"/> refused to accept mentoring responsibilities as is consistent with department/division averages <input type="checkbox"/> failed to appear at scheduled teaching / mentoring obligations	<input type="checkbox"/> number of lecture hours or clerkship/GME efforts were consistent with average of the same of comparable department/division <input type="checkbox"/> consistently mentored trainees <input type="checkbox"/> served on thesis or research oversight committees <input type="checkbox"/> current or past trainees have done well / progressed appropriately	<input type="checkbox"/> lecture hours or clerkship/GME efforts were >25% above the average of the same or comparable department /division <input type="checkbox"/> number of mentored trainees was significantly greater than the faculty average for the same or comparable department/division <input type="checkbox"/> served on multiple thesis committees beyond that of a typical faculty member <input type="checkbox"/> current/past students or trainees have excelled and/or received faculty positions or awards

### Point System Calculation

1. Check off all appropriate items/characteristics with respect to the 4 missions on previous pages.
2. Identify for a given mission category (a given boxed area on previous pages) if the majority of checked items fall in the 1<sup>st</sup>, 2<sup>nd</sup>, or 3<sup>rd</sup> column. If the majority of checks are, for example, in the 2<sup>nd</sup> column, then record a 2 on this sheet for that category. A majority of checks in the 1<sup>st</sup> column on the previous pages should be recorded as a 1 on this page for that category, while a majority of checks in the 3<sup>rd</sup> column are recorded as a 3 for that category on this page. Please note, it is necessary to make sure the portfolio clearly documents evidence for score assignments, especially for those in the 1 and 3 categories.
3. Enter relative effort for each mission, i.e. 50% effort is recorded as a relative value of 0.50. Relative efforts should add up to 1, i.e. [line 1 + line 3 + line 5 + line 7] should equal 1.00.
4. Complete calculation in 2<sup>nd</sup> box on this page.

#### Gathering the Numbers:

Relative Effort in Composite Teaching = \_\_\_\_\_ ←line 1

- A. Teaching Director .....Score = \_\_\_\_\_
- B. Other Teaching Duties .....Score = \_\_\_\_\_
- C. Acknowledged Excellence in Teaching .....Score = \_\_\_\_\_
- D. Innovation in Teaching.....Score = \_\_\_\_\_

Sum of 3 of the 4 Categories (not to exceed 9) = \_\_\_\_\_ ←line 2

Relative Effort in Scholarly Activity= \_\_\_\_\_ ←line 3

- A. Publications .....Score = \_\_\_\_\_
- B. Extramural Funding.....Score = \_\_\_\_\_
- C. Other Scholarly Activity.....Score = \_\_\_\_\_

Sum of 3 Categories (not to exceed 9) = \_\_\_\_\_ ←line 4

Relative Effort in Patient Care= \_\_\_\_\_ ←line 5

- A. Productivity/Patient Load/Scheduling.....Score = \_\_\_\_\_
- B. Quality of Care/Patient Satisfaction/ Reputation as Clinician.....Score = \_\_\_\_\_
- C. Professional Recertification/Enhancement of Knowledge Base...Score = \_\_\_\_\_

Sum of 3 Categories (not to exceed 9)= \_\_\_\_\_ ←line 6

Relative Effort in Service/Outreach= \_\_\_\_\_ ←line 7

- A. Institutional Service.....Score = \_\_\_\_\_
- B. Professional Service.....Score = \_\_\_\_\_
- C. Community Service/Outreach.....Score = \_\_\_\_\_

Sum of 3 Categories (not to exceed 9)= \_\_\_\_\_ ←line 8

#### Calculation:

Relative Effort in Teaching x Sum of Teaching Categories..... = \_\_\_\_\_ X \_\_\_\_\_ = \_\_\_\_\_ ←line 9

line 1                      line 2

Relative Effort in Scholarly Activity x Sum of Scholarly Activity Categories ..... = \_\_\_\_\_ X \_\_\_\_\_ = \_\_\_\_\_ ←line 10

line 3                      line 4

Relative Effort in Patient Care x Sum of Patient Care Categories..... = \_\_\_\_\_ X \_\_\_\_\_ = \_\_\_\_\_ ←line 11

line 5                      line 6

Relative Effort in Service/Outreach x Sum of Service/Outreach Categories ..... = \_\_\_\_\_ X \_\_\_\_\_ = \_\_\_\_\_ ←line 12

line 7                      line 8

Total (lines 9+10+11+12) = \_\_\_\_\_

# Metric Point requirements for Promotion

Rank	Points
Assistant Professor	
Non-clinical	3.5
Clinical	4.0
Associate Professor	6.0
Professor	7.5

# Metrics

- Point system based on meeting/not meeting benchmarks
- Distribution of % effort important to calculation. Four missions: Teaching, Clinical Care, Scholarly Activity/Research, Service
- Benchmarks listed in survey tool or checklist
- No one person will hit all benchmarks
- Metrics and benchmarks are guidelines not absolute standards

# Guidance for Assessment of Publication Productivity

- Requirements from the UTHSC establish a minimal level of publication productivity for consideration of academic advancement.
- Recommendations for an appropriate measure of the quality and quantity of publications needed.
- Publication Review Committee guidelines
- H-Index of articles determined by higher of Scopus or Web of Science indices.
- Total publications considered.
- 5 – year Power score for measure of recent activity.



## THE UNIVERSITY OF TENNESSEE GRADUATE SCHOOL OF MEDICINE

### **Guidance for the Assessment of Publication Productivity by GSM Academic Appointment, Promotion and Tenure Committee**

A major component of the review of faculty seeking promotion and tenure is academic productivity reflected in the quality, quantity and relevance of peer-reviewed publications.

The aim of this Guidance is to provide assistance for determining whether the applicant has achieved appropriate levels of academic productivity, evidenced in the overall quantity and quality of peer reviewed publications. This document provides guidelines for “acceptable” progress in this area for faculty at the UTHSC, the College of Medicine – Knoxville.

The new guidelines focus upon evaluation of the following metrics of productivity, which will be requested from the faculty member at the time of application:

1. The h-index of the applicant (which can be obtained from staff at the Preston Medical Library) will be determined by the higher of the Scopus and Web of Science indices.
2. Total number of peer-reviewed publications.
3. The applicant’s position in the author list and journal impact factor for each peer-reviewed publication over the last 5 years (the “5-y Power” score).

Only publications cited in PubMed with an impact factor of 1.00 or greater will be used in the calculations.

For promotion of tenured and research faculty, a recommendation for the required value for each metric is provided in the table below.

<b>Metric</b>	<b>Assistant Prof</b>	<b>Associate Prof</b>	<b>Professor</b>
h-index	2	8	15
Total publications	5	18	35
5-y Power score	10	20	50

For promotion of non-tenure clinician and clinician educators, a recommendation for the required value for each metric is provided in the table below.

<b>Metric</b>	<b>Assistant Prof</b>	<b>Associate Prof</b>	<b>Professor</b>
h-index	N/A	6	10
Total publications	3	10	20
5-y Power score	5	10	25

These numbers serve as guidelines for the assessment of faculty and do not represent the absolute score required for promotion. It will be necessary for the applicant to provide, in addition to the metrics, a narrative describing the publication history and strategy that has impacted the value of each metric.

# Recommended Metric Values for Promotion of Tenured and Research Faculty

Metric	Assistant Professor	Associate Professor	Professor
H-index	2	8	15
Total Publications	5	18	35
5-Year Power Score	10	20	50

# Recommended Metric Values for Promotion of Non-Tenure and Clinical-Educators

Metric	Assistant Professor	Associate Professor	Professor
H-index	DNA	6	10
Total Publications	3	10	20
5-Year Power Score	5	10	25

# Formal Peer Review of Teaching

- Faculty considered for promotion or award of tenure
- Two observations of teaching activity required; single or separate reviewers.
- Reviewer selected by Chair and faculty member.
- Specific instructions: “Tips for Peer Reviewers of Teaching”
- Confidential post-review meeting required with reviewer and faculty member.
- Completed form: “Peer Reviewer Documentation of Observation for Classroom, Lab or Clinical Setting”
- Form sent to Chair, faculty member and becomes part of next annual review.

**Appendix B: Peer Reviewer Documentation of Observation**  
**Class Room Teaching – Small Group, TBL, and Lecture Hall**

**Instructors Name:**

**Date:**

**Peer Reviewer's Name:**

**Short Description of Session Observed:**

**Instructions:** circle one rating/criteria, use added blank pages for notes, majority of ratings should be "B" or "C".

**Ratings:** A. Truly Exceptional      B. Very Good      C. Satisfactory      D. Significant Concerns

<b>Pre-Class</b>					
1. PowerPoint, handout, objectives provided > 48 hrs in advance to learners	A	B	C	D	NA
2. Any assigned reading or prerecorded lecture was relevant, appropriate level, and of appropriate length	A	B	C	D	NA
<b>Body of Presentation</b>					
3. Presented main points in organized fashion	A	B	C	D	NA
4. Taught at appropriate level for learners	A	B	C	D	NA
5. Effectively used technology, visuals, handouts, demonstrations; used pointer, set stage, etc	A	B	C	D	NA
6. Provided clear transitions between topics	A	B	C	D	NA
7. Utilized examples to explain, for clarity, and make subject matter more meaningful	A	B	C	D	NA
8. Emphasized key points during presentation	A	B	C	D	NA
9. Summarized major principles at end	A	B	C	D	NA
<b>Instructor Qualities</b>					
10. Presented professional appearance	A	B	C	D	NA
11. Projected poise, confidence, enthusiasm for material/teaching	A	B	C	D	NA
12. Provided adequate enunciation, volume, gestures, eye contact	A	B	C	D	NA
13. Paced the presentation appropriately and to allow note taking	A	B	C	D	NA
14. Encouraged active participation and/or stimulated thought	A	B	C	D	NA
15. Responded to learner's questions clearly and concisely	A	B	C	D	NA
16. Maintained control of session and managed time appropriately	A	B	C	D	NA
17. Demonstrated respect for learners	A	B	C	D	NA
18. Used notes and class materials effectively	A	B	C	D	NA
19. Overall was well prepared for session	A	B	C	D	NA
<b>In Class Teaching Materials</b>					
20. Slides were clear, legible, and uncluttered	A	B	C	D	NA
21. Overall usefulness of teaching materials; inclusive of pre-class materials	A	B	C	D	NA

**Appendix B: Peer Reviewer Documentation of Observation**  
**Clinical, Unstructured Teaching – Examples: Teaching Rounds or Teaching in Clinic**

**Instructors Name:**

**Date:**

**Peer Reviewer's Name:**

**Short Description of Session Observed:**

**Instructions:** circle one rating/criteria, use added blank pages for notes, majority of ratings should be "B" or "C".

**Ratings:** A. Truly Exceptional      B. Very Good      C. Satisfactory      D. Significant Concern

<b>Organizational</b>					
1. Makes expectations clear for learner participation in patient care as well as in role as member of team (if on teaching rounds)	A	B	C	D	NA
2. Uses time effectively	A	B	C	D	NA
3. Controlled discussion sufficiently to keep focused on points of discussion	A	B	C	D	NA
<b>Interaction with Learners</b>					
4. Establishes rapport	A	B	C	D	NA
5. Encourages all learners to participate, gives learners opportunity to display knowledge	A	B	C	D	NA
6. Accommodates for different educational level of learners	A	B	C	D	NA
7. Encourages learners to defend opinions	A	B	C	D	NA
8. Elicits opinions before offering diagnosis	A	B	C	D	NA
9. Asks "what if" questions or asks questions to test problem-solving skills	A	B	C	D	NA
10. Provides appropriate/constructive/real-time feedback	A	B	C	D	NA
11. If time not available, identified where/when learner could get needed information	A	B	C	D	NA
12. Encourages self-reflection in learners for performance, progress, patient care	A	B	C	D	NA
13. Ensures pertinent clinical questions were framed, and concepts were clearly and succinctly explained	A	B	C	D	NA
<b>Instructor Qualities and Professionalism</b>					
14. Demonstrates respect for patients, co-workers, learners	A	B	C	D	NA
15. Poised, confident, enthusiastic for teaching/clinical care	A	B	C	D	NA
16. Adequate volume, gestures, enunciation, eye contact	A	B	C	D	NA
17. Demonstrates ethical conduct, and discusses ethical issues or areas of controversy in medicine with learners	A	B	C	D	NA
18. Effectively demonstrate clinical skills, modeling effective interviewing/listening, proper physical diagnostic techniques	A	B	C	D	NA
19. Displays up-to-date knowledge of medical care	A	B	C	D	NA
20. Promoted and modeled use of medical literature	A	B	C	D	NA
21. Fostered a cost effective approach to diagnosis and therapy	A	B	C	D	NA
22. Demonstrated effect use of consultants, data, interpretation of lab data	A	B	C	D	NA
23. Maintains and models rapport with patient, includes patient in discussion, clearly communications with patient, sits down when talking to patient	A	B	C	D	NA

# Candidate's Role in P & T

- Faculty member prepares dossier
- Updated curriculum vitae in UT College of Medicine format
- Annual Accomplishments and Goals written by the candidate
- Summaries of Annual Performance and Reviews written by the Chair
- Request up to 6 Letters of Recommendation
- Other supporting documentation
- Play an active role and work with Department Chair

# Documentation beyond CV:

- Table Defining Clinical Activities – with details
- Table Defining Educational Activities – with details
- Student Evaluations – summary with sample comments
- Statement Identifying Innovation
- Table with Scores and History on Recently Applied for Grants
- Table to Quantify Mentoring Ability – with details
- Annual Evaluations
- Table of Invited Talks – with details
- Table of Collaborations



# Preparation of Curriculum Vitae

- Responsibility of individual with assistance from Department
- Precise format
- Account for all of your time starting with undergraduate school
- Citations complete in proper format
- Can attach addendum to CV to clarify time or other issues
- Separate statement to document performance not covered in CV
- Remember a lot of individuals must review your CV

# PROMOTION PACKET CONTENTS

## Promotion:

- CV in UT format
- Other documents the faculty wishes to include
- Letters of Evaluation, a.k.a. reference letters
- Letters of Evaluation Summary Sheet; administrative form
- Annual Evaluations for last 5 years if candidate is already tenured or tenure track
- Department P&T Committee letter with vote
- Department Promotion Metric Sheet
- Chair Letter
- Department-Generated Form 5; UTHSC administrative form
- College P&T Committee letter with vote
- College Promotion Metric Sheet
- Dean letter

## Early Promotion: All documents above for regular "Promotion", plus

- "Early Promotion" designation on Form 5
- Annual Evaluations since last promotion /hire date if candidate is nontenure
- Offer and Appointment Letters at time of hire
- Reappointment letters since appointment if on tenure-track
- Solicitation letters used by UT to obtain letters of evaluations for candidate
- Student evaluation of teaching documentation
- Department P&T Committee letter must address "why early"/evidence of exceptional performance
- Chair letter must address "why early" /evidence of exceptional performance
- Early Promotion Checklist; UT administrative form
- College P&T Committee letter must address "why early"/evidence of exceptional performance

# TENURE PACKET CONTENTS

## Tenure:

- CV in UT format
- Other documents the faculty wishes to include
- Letters of Evaluation, a.k.a. reference letters
- Department Letters of Evaluation Summary Sheet; administrative form
- Annual Evaluations for all years while on tenure track
- Offer and Appointment Letters at time of hire
- Reappointment letters since appointment on tenure-track
- Interim (mid-tenure) probationary review
- Peer-Review of Teaching – 2 reviews required
- Department P&T Committee letter with vote
- Chair Letter
- Department-Generated Form 5; UTHSC administrative form
- College P&T Committee letter with vote
- Dean letter

## Early Tenure: All documents above for regular “Tenure”, plus

- “Early Tenure” designation on Form 5
- Solicitation letters used by UT to obtain letters of evaluations for candidate
- Student evaluation of teaching documentation
- Department P&T Committee letter must address “why early” /evidence of exceptional performance
- Chair letter must address “why early” /evidence of exceptional performance
- Early Tenure Checklist; UT administrative form
- College P&T Committee letter must address “why early”/evidence of exceptional performance
- Dean letter must address “why early” /evidence of exceptional performance

# Chair/Division Chief Role in P&T: with varying levels of input from faculty

- identify faculty to be put forward for P & T
- review CV for completeness
- select faculty to be asked for internal/external letters of reference
- draft letter of recommendation
- receive recommendation from departmental P&T committee
- finalize letter of recommendation
- complete metric survey

# Academic Appointment, Promotion and Tenure Committee Organization

- Chairman and 11 members
- Appointed by Dean, GSM
- Diverse membership
- Selected from various departments
- Rules require an adequate number of senior and tenured faculty
- Discussion and voting confidential
- Chair informs Dean, and for negative result, the Department Chair of recommendations

# Academic Appointment, Promotion and Tenure Committee Responsibilities

- Review and make recommendations to the Dean on nominations for appointment, promotion and award of tenure
- Review and recommend policies and procedures in the area of appointments, promotions and tenure of faculty
- Implement procedures in the above areas
- Review of appeals of negative recommendations as requested by the Dean

# Planning for Promotion

- Plan ahead and develop a strategy
- Work with Department and/or Division Chair
- Knowledge of your accomplishments
- Review faculty % of effort
- Use annual review to present clear picture
- Document teaching, clinical activities, student evaluations, grant requests and success, and annual evaluations

# Planning for Promotion Research and Scholarly Activity

- Be a top-notch M.D. /Ph.D. laboratory researcher with an outstanding mentor
- Participate in Departmental ongoing projects
- Look for non-departmental potential or ongoing projects for collaborative projects
- Watch for potential case reports
- Consider opportunities for reviews and book chapters
- Find a mentor
- Establish an area of expertise



# Planning for Promotion

## Regional, National and International Reputation

- Join and volunteer for committee work in regional and national organizations
- Section co-chairs at meetings
- Develop local area of speaking expertise
- Transition to presentations at sister medical centers and universities
- Grand rounds
- Resident or fellow teaching lectures
- Regional conferences

# Promotion and Tenure Schedule

- Oct: AAPTC publishes schedule and detailed instructions
- Sep/Oct: Department Chair informs faculty member of their consideration for promotion and/or award of tenure
- Sep/Oct: Candidate prepares dossier ( C.V., letters of recommendation, additional supporting documents)
- Oct/Nov: Department P and T/ peer review meetings
- Nov: Chair of Department reviews metric worksheet, dossier, record of P and T committee and makes recommendation (positive or negative)
- Dec 1 – 11: All P and T paperwork due in Faculty and Staff Office, Graduate School of Medicine
- Jan/Feb: AAPTC meets weekly making recommendations to Dean, GSM

# Promotion and Tenure Schedule

- Feb: Appeal of non-recommendations
- Feb 22: All records to Dean, GSM. Dean reviews and makes recommendations
- Mar 15: All recommendations to Vice Chancellor for Academic Affairs. Preparation of consolidate report
- Apr: Recommendations to Chancellor
- Apr: Consolidated recommendations approved by the Chancellor forwarded to U. of Tenn. Knoxville
- May: President reviews and prepares recommendation for U.T. Board of Trustees
- Jun: Board of Trustees decides on these recommendations
- Jul: Chancellor notifies faculty member of action taken

- Cheung AK, Levin NW, Greene T, Agodoa L, Bailey J, Beck G, Clark W, Levey AS, Leypoldt JK, Ornt DB, Rocco MV, Schulman G, Schwab S, Teehan B, Eknoyan G.(2003). Effects of high-flux hemodialysis on clinical outcomes: Results of the HEMO study. *Journal of the American Society of Nephrology*, 14(12), 3251-3263. Citation number 49, Impact Factor 6.5
- Reddan DN, Szczech LA, Tuttle RH, Shaw LK, Jones RH, Schwab SJ, Smith MS, Califf RM, Mark DB, Owen WF Jr. (2003). Chronic kidney disease, mortality, and treatment strategies among patients with clinically significant coronary artery disease. *Journal of the American Society of Nephrology*, 14(9), 2373-2380. Citation number 38, Impact Factor 6.5
- Allon M, Depner TA, Radeva M, Bailey J, Beddhu S, Butterly D, Coyne DW, Gassman JJ, Kaufman AM, Kaysen GA, Lewis JA, Schwab SJ; HEMO Study Group.(2003). Impact of dialysis dose and membrane on infection-related hospitalization and death: Results of the HEMO study. *Journal of the American Society of Nephrology*, 14(7), 1863-1870. Citation number 44, Impact Factor 6.5
- Ross, J. J., Narayan, G., Worthington, M. G., Strom, J. A., & Schwab, S. J. (2003). Infection rates of the LifeSite hemodialysis access system. *Kidney International*, 63(5), 1963. Citation number 0, Impact Factor 4
- G, Beck GJ, Cheung AK, Daugirdas JT, Greene T, Kusek JW, Allon M, Bailey J, Delmez JA, Depner TA, Dwyer JT, Levey AS, Levin NW, Milford E, Ornt DB, Rocco MV, Schulman G, Schwab SJ, Teehan BP, Toto R; Hemodialysis (HEMO) Study Group.(2002). Effect of dialysis dose and membrane flux in maintenance hemodialysis. *New England Journal of Medicine*, 347(25), 2010-2019. Citation number 415, Impact Factor 22.4

# Example Clinician % Effort on: Reappointment letter Versus Promotion Letter

Reappointment letter:

to insure fair clinical  
compensation

---

- 10% formal education -  
classroom and small group  
teaching only
- 70% composite clinical care -  
clinical care including bedside  
teaching of students and GME

Promotion letter:

to insure fair consideration  
of teaching

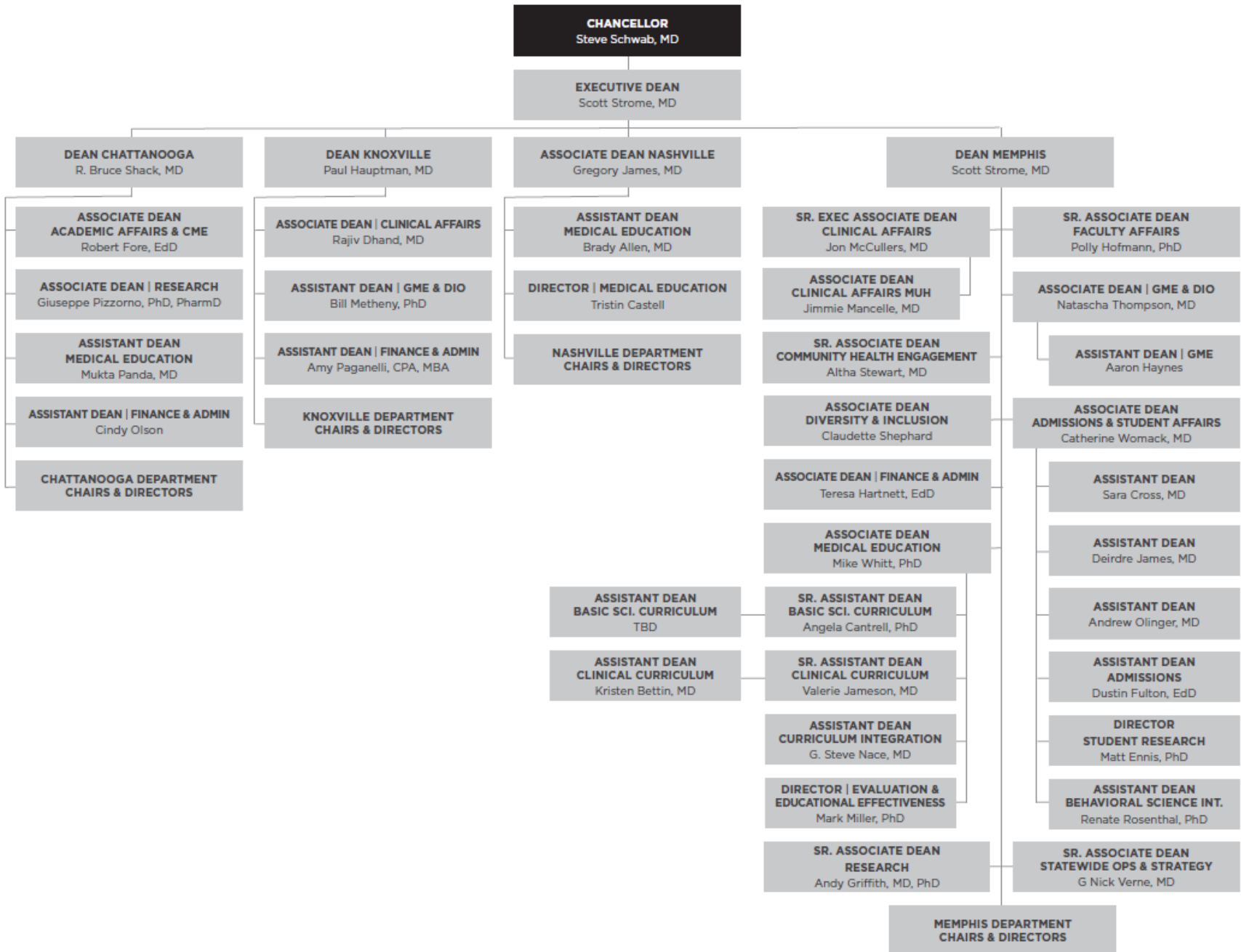
---

- 40% composite education -  
classroom and bedside  
teaching
- 40% isolated clinical care -  
clinical care without trainees

**Table 2: Tenure Track / Tenured Faculty** – You must fulfill 3 of 4 missions, and 2 missions must be Education and Scholarly Activity with a minimum of 10% effort in each.

Focus	Typical % Effort	Descriptive Information
<b>A.</b> Clinician – Patient Care	<ul style="list-style-type: none"> <li>• 80% patient</li> <li>• 10% scholarly activity</li> <li>• 10% composite education</li> <li>• 0% service</li> </ul>	<ul style="list-style-type: none"> <li>• focus of promotion is on clinical volume, productivity and reputation</li> <li>• physicians at the forefront of a unique procedure and/or those who work at one of our “east” clinics fall into this group</li> </ul>
<b>B.</b> Clinician – Educator (tenure track)	<ul style="list-style-type: none"> <li>• 48% patient</li> <li>• 10% scholarly activity</li> <li>• 40% composite education</li> <li>• 2% service</li> </ul>	<ul style="list-style-type: none"> <li>• focus of promotion is on clinical productivity and reputation, and fulfilling the educational mission</li> <li>• scholarly activity relates to improvements in education process/curriculum</li> <li>• physicians working at the MED are typically in this group</li> </ul>
<b>C.</b> Clinician – Investigator	<ul style="list-style-type: none"> <li>• 40% patient</li> <li>• 40% scholarly activity</li> <li>• 10% composite education</li> <li>• 10% service</li> </ul>	<ul style="list-style-type: none"> <li>• focus of promotion is balanced between patient care and research</li> <li>• included are those engaged in clinical trials/team based clinical and translational research</li> </ul>
<b>D.</b> Researcher	-M.D.- <ul style="list-style-type: none"> <li>• 20% patient</li> <li>• 65% scholarly activity</li> <li>• 10% composite education</li> <li>• 5% service</li> </ul> -Ph.D.- <ul style="list-style-type: none"> <li>• 0% patient</li> <li>• 75% scholarly activity</li> <li>• 20% teaching</li> <li>• 5% service</li> </ul>	<ul style="list-style-type: none"> <li>• focus of promotion is on typical measures of research such as grants and publications</li> </ul>

UTHSC College of Medicine  
**ORGANIZATIONAL CHART**



### C. Acknowledged Excellence in Teaching

1 (Below Expectations)	2 (Meets Expectations)	3 (Exceeds Expectations)
<input type="checkbox"/> consistently received poor reviews in evaluations <input type="checkbox"/> consistently received poor reviews from Director of teaching/training program	<input type="checkbox"/> student/trainee evaluations note a job well done <input type="checkbox"/> consensus among Faculty and Director of teaching program of a job well done	<input type="checkbox"/> received multiple teaching awards <input type="checkbox"/> consistently received outstanding student/trainee evaluations <input type="checkbox"/> consistently received outstanding review by Director of program

### D. Innovation in Teaching

1 (Below Expectations)	2 (Meets Expectations)	3 (Exceeds Expectations)
<input type="checkbox"/> used out-of-date information <input type="checkbox"/> material disorganized and presented in an uninteresting fashion <input type="checkbox"/> lacked clear objectives in training/lectures <input type="checkbox"/> ignored questions and requests for added help <input type="checkbox"/> lectures were duplication of book or other single source <input type="checkbox"/> exams were arbitrary in material tested <input type="checkbox"/> (other, describe below)	<input type="checkbox"/> well organized and interesting presentations <input type="checkbox"/> used appropriate multi-media technology <input type="checkbox"/> assessed and updated materials at reasonable intervals <input type="checkbox"/> provided help / answered questions in a professional fashion <input type="checkbox"/> objectives were stated and adhered to <input type="checkbox"/> gave handouts and/or online access to materials from lectures, i.e. graphs, images, or bullet points <input type="checkbox"/> exams tested the objectives and material presented	<input type="checkbox"/> developed and implemented curriculum for new course or clinical rotation <input type="checkbox"/> annually upgraded material based on board scores, standards set by professional organizations, emerging concepts <input type="checkbox"/> created student, residency or fellowship manuals for standard practice in division or department <input type="checkbox"/> introduced novel and useful teaching tool(s) that require significant effort by faculty, i.e. DVD or web based tutorial. <input type="checkbox"/> developed simulations or standardized patients and/ or implemented their use <input type="checkbox"/> consistently sought out trainees that were struggling and provided additional instruction <input type="checkbox"/> published or presented at national meeting on innovative teaching <input type="checkbox"/> (other, describe below)



### C. Other Scholarly Activities

1 (Below Expectations)	2 (Meets Expectations)	3 (Exceeds Expectations)
<p>_____ limited other scholarly activity or quality of those activities</p>	<p>_____ developed local practice guidelines</p> <p>_____ authored articles for the lay press or patient brochures</p> <p>_____ submitted abstracts or articles</p> <p>_____ obtained patent</p> <p>_____ gave at least 2 invited lectures over the time in current rank</p> <p>_____ gave at least 2 presentations at regional / national / International meetings</p> <p>_____ featured presentation at grand rounds for another UT department or outside UT</p> <p>_____ collaborated/published with faculty from UTHSC and other institutions</p> <p>_____ organized and contributed to journal clubs or noon conferences</p>	<p>_____ participated in national guideline setting panels</p> <p>_____ frequently invited to comment in national press on area of expertise</p> <p>_____ successfully took patent to production / application stage</p> <p>_____ gave plenary lecture at national or international meeting in area of expertise</p> <p>_____ collaborated/published with outstanding nationally or internationally recognized investigators</p> <p>_____ gave &gt;5 invited lectures or presentations outside UT</p>

### C. Professional Recertification/Enhancement of Knowledge Base

1 (Below Expectations)	2 (Meets Expectations)	3 (Exceeds Expectations)
<p>___ was unable to obtain or allowed lapse in board certification / licensure</p> <p>___ disciplined by state board, local medical society or hospital</p>	<p>___ acquired and maintained board certification / licensure</p> <p>___ consistently participated in continuing education and special training programs</p>	<p>___ demonstrated ability to translate continuing education and special training programs into working knowledge and usable procedures</p> <p>___ received physician recognition award from AMA or other medical society for quantity/quality of completed CME</p>

Service/Outreach: check (✓) all those applicable

Faculty Candidate \_\_\_\_\_

Department \_\_\_\_\_

**A. Institutional Service**

1 (Below Expectations)	2 (Meets Expectations)	3 (Exceeds Expectations)
<p>_____ provided limited service to UTHSC beyond assigned patient care, teaching, or research duties</p> <p>_____ other (please list)</p>	<p>_____ was a member on more than 1 UTHSC (department, college, or campus-wide) or hospital committees</p> <p>_____ provided unique service to faculty at UTHSC (e.g. pathology lab, or transgenic or molecular core facility)</p> <p>_____ organized education or seminar series</p> <p>_____ played a role in trainee or faculty recruitment</p> <p>_____ mentored junior faculty</p> <p>_____ other (please list)</p>	<p>_____ chaired UTHSC committee, or had above average commitment on UTHSC or hospital committee(s)</p> <p>_____ provided outstanding service as Head/Director of a service core at UTHSC</p> <p>_____ chaired multiple faculty recruitment / searches</p> <p>_____ other (please list)</p>

**B. Professional Service**

1 (Below Expectations)	2 (Meets Expectations)	3 (Exceeds Expectations)
<p>_____ provided limited service to local, state or national organizations, granting institutions, or journals</p> <p>_____ other (please list)</p>	<p>_____ participated in local, state or national organizations or societies</p> <p>_____ reviewed for professional journals</p> <p>_____ ad hoc reviewed for extramural granting institutions</p> <p>_____ other (please list)</p>	<p>_____ organized or held an appointed position in local, state or national organization or society</p> <p>_____ editorial board member</p> <p>_____ standing member or chair of review panel for extramural grants (i.e. NIH study section)</p> <p>_____ organized meeting or symposia</p> <p>_____ served on Editorial Boards</p> <p>_____ reviewed greater than 6 articles / yr for journals</p> <p>_____ role as medical or scientific expert for local, state or federal government needs</p> <p>_____ other (please list)</p>

### C. Community Service/Outreach

1 (Below Expectations)	2 (Meets Expectations)	3 (Exceeds Expectations)
<p>_____ provided limited profession-related community service or outreach</p>	<p>_____ participated in community health initiatives</p> <p>_____ gave health-related presentations to local groups</p> <p>_____ participated in K-12 activities in area schools (i.e. health fairs, science fair)</p> <p>_____ provided research/training/teaching opportunities to community high school or undergraduate students/teachers or other local groups</p> <p>_____ other (please list)</p>	<p>_____ organized community health initiatives</p> <p>_____ provided clinical service in community settings (i.e. Church Health Center)</p> <p>_____ established K-12 program on health or science issues</p> <p>_____ established programs providing research/training/teaching opportunities to community high school or undergraduate students/teachers or other local groups</p> <p>_____ other (please list)</p>

# Mission – Teaching:

- Courses Taught: name of course, hours, number of students
- Mentoring of Trainees: names and current positions
- Course or Clerkship Director?
- Evaluations: student and Course Director
- Good Teaching Techniques / Innovation in Teaching
  - organized
  - appropriate technical media
  - course objectives: given and adhered to
  - handouts
  - handling student questions
- Beyond “Meets Expectations”: teaching awards, developed new curriculum , established novel and effective teaching technique

# Teaching: D. Innovation in Teaching

## 1 (Below Expectations)

- used out-of-date information
- material disorganized and presented in an uninteresting fashion
- lacked clear objectives in training/lectures
- ignored questions and requests for added help
- lectures were duplication of book or other single source
- exams were arbitrary in material tested
- (other, describe below)

## 2 (Meets Expectations)

- well organized and interesting presentations
- used appropriate multi-media technology
- assessed and updated materials at reasonable intervals
- provided help / answered questions in a professional fashion
- objectives were stated and adhered to
- gave handouts and/or online access to materials from lectures, i.e. graphs, images, or bullet points
- exams tested the objectives and material presented

## 3 (Exceeds Expectations)

- developed and implemented curriculum for new course or clinical rotation
- annually upgraded material based on board scores, standards set by professional organizations, emerging concepts
- created student, residency or fellowship manuals for standard practice in division or department
- introduced novel and useful teaching tool(s) that require significant effort by faculty, i.e. DVD or web based tutorial.
- developed simulations or standardized patients and/ or implemented their use
- consistently sought out trainees that were struggling and provided additional instruction
- published or presented at national meeting on innovative teaching
- (other, describe below)

# Mission – Scholarly Activity: Financial Expectations of Extramural Funding

If  $> 50\%$  scholarly activity, then:

- support  $\geq$  yearly NIH R01 grant: direct cost  $\sim 150\text{-}200\text{K/yr}$ 
  - single grant or the sum of multiple grants
  - any extramural source acceptable
- demonstrated ability to renew extramural grants or consistently secure research funds
- principal investigator (PI) or co-PI or a Project Director for a Program Project
- alternate to PI: collaborator on a number of grants with sum of the total effort designated on grants  $\geq$  agreed upon % effort for scholarly activity/research
- If critical role with no designated % effort on grant, then Chair/Division Chief letter should note

# Mission – Service:

- **Institutional:** as participant, chair, organizer, level of commitment?
  - Department, College, UTHSC Committees/Service
- **Professional:** role?
  - local or national organizations
  - review for journals
  - grant review: ad hoc versus regular member
  - role as medical or scientific expert for government or board
- **Community:** participated or organized?
  - community health initiatives
  - health-related presentations to local groups
  - K-12 activities in area schools (i.e. health fairs, science fair)
  - research/training/teaching opportunities to local students/teachers



# Mission – Scholarly Activity:

## Quantity and quality of publications

**Table 1.** Minimum expectations for publications.

Track	Assistant to Associate Prof	Associate Prof to Full Prof
Non-tenure (clinicians, teachers)	2	5
Non-tenure (researchers)	5	10
Tenure	5	10

# Mission – Clinical Service: Quantity and Quality of Patient Care

## ■ Quantity:

- achieving greater than 75% of depart/division set RVU
- Chair / Division Chief letter of recommendation must address if RVU target was met

## ■ Quality: examples

- extent of referrals
- reputation of clinical abilities - faculty is said to be the “go-to” physician