

Promotion and tenure at the University of Virginia School of Medicine



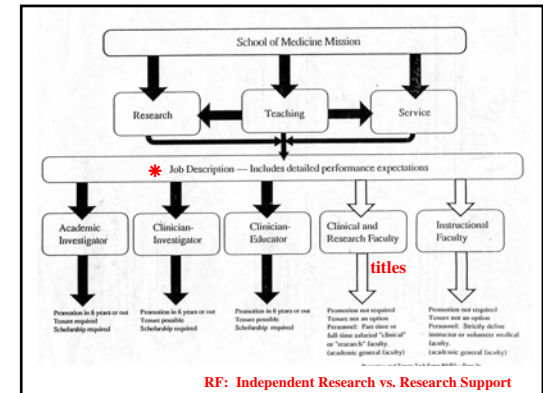
April 20, 2004

Howard Kutchai, Chair,
UVa SOM Promotion and
Tenure Committee

- What are the different faculty tracks?
- Am I in the appropriate track?
- What are the criteria for promotion or tenure on my track?
- How can I find out where I stand *vis-à-vis* promotion or tenure?

Where can I read about the guidelines for promotion or tenure?

- 1) **Out of date: Print version of the Faculty Handbook (1997)—not recommended**
- 2) **P and T Guidelines on the Web (updated):**
From Health System Homepage (med.virginia.edu): click on “School of Medicine”, then click “Administration”, then click “Faculty Handbook”
- 3) **Coming soon: Short form of P and T Guidelines**



The Timing of Promotion and Tenure

- Assistant Professors on tenure-bearing tracks **must** be promoted to Associate Professor by the end of their 6th year on our faculty
 - This means the promotions portfolio must be prepared after only 5 years on the faculty
 - It is most common for the first promotion is to Associate Professor with Term
 - However a candidate who meets criteria for both promotion and tenure, may be nominated for both
- Tenure eligibility continues for 4 years from the time of promotion to Associate Professor
- **A faculty member hired as as Associate Professor has only 4 years of tenure eligibility**

“Time Off-the-Clock”

- Must be requested from the Dean by your chair
- Granted in one year increments
- Granted for (e.g.)
 - personal illness
 - childbirth-childcare
 - illness of a child or parent
- Should be requested when needed, not after the absence from duties has occurred
- **Should not be requested after faculty member is nominated for promotion or tenure**

Faculty Tracks: Typical Effort Allocation

- **Academic Investigator:** majority of effort (80%) devoted to research; variable amount of teaching
- **Clinician Investigator:** **At least 50%** of effort devoted to research; variable amounts of clinical service and teaching
- **Clinician Educator:** Major effort devoted to clinical service and teaching; variable amount of research; scholarship required. **At least 20% non-clinical time**
- **Clinical Faculty:** Major effort devoted to clinical service and teaching; scholarship optional and variable
- **Research Faculty-Independent Research:** majority of effort in PI research; teaching optional
- **Research Faculty-Research Support:** Majority of effort in research (co-investigator); teaching optional
- **Instructional Faculty:** Majority of effort in teaching and/or service (clinical or otherwise)

Criteria for promotion and tenure Academic Investigator

- Promotion to Associate Professor: Documented excellence in research; NIH funding; scholarship; nascent national reputation
- Award of tenure: Documented excellence in research **plus another area**; maintained NIH funding; additional scholarship; national reputation
- Promotion to Professor: more of the above; sustained NIH funding; national and international reputation

Criteria for promotion and tenure Clinician Investigator

- Promotion to Associate Professor: Documented excellence in research; funding (NIH K Award or equivalent); scholarship; nascent national reputation
- Award of tenure: Documented excellence in research **plus another area**; NIH PI funding; additional scholarship; national reputation
- Promotion to Professor: more of the above; sustained NIH funding and scholarship; national and international reputation

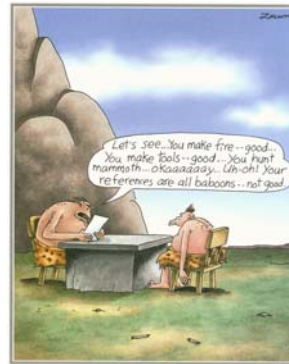
Criteria for promotion and tenure Clinician Educator

- Promotion to Associate Professor: Documented excellence in one area; scholarship; local/regional reputation
- Award of tenure: Documented excellence in two areas; additional scholarship; regional/national reputation
- Promotion to Professor: all the above plus **significant scholarship**; **national reputation**
- Professor is a big jump from Associate Professor in that more scholarship and national reputation are required

Criteria for promotion Clinical Faculty

- Promotion to Associate Professor: Documented excellence in one area*; scholarship optional; local/regional reputation
 - Promotion to Professor: Documented excellence in one area; **substantial scholarship**; **national reputation**
 - Professor is a big jump from Associate Professor in scholarship and in national reputation required
- *CF's may do clinical care, teaching, research, institutional service, etc. CFs are evaluated according to their job descriptions, but credit is given for all their accomplishments

Promotion to
Professor on
any of the
faculty
tracks
requires
national
reputation



Criteria for promotion Research Faculty-Independent Research

- Promotion to Associate Professor: Documented excellence in independent research (as PI)*; NIH funding; scholarship; significant national reputation
- Promotion to Professor: all the above; sustained NIH funding; national and international reputation

*Accomplishments in other areas (e.g. teaching or clinical) are taken into account

Criteria for promotion Research Faculty-Research Support

- **Promotion to Associate Professor:** Documented excellence in research (as co-investigator); scholarship; evidence of significantly enhancing the research programs of other UVa faculty members*
- **Promotion to Professor:** all the above; sustained funding as co-investigator; national reputation

*A Research Faculty-Research Support faculty member may transform into a RF-Independent Research. We try to judge them on their total record of achievements

Criteria for promotion Instructional Faculty

- Promotion to Associate Professor: Documented excellence in the area of the job description
- Promotion to Professor: the the above plus substantial scholarship and regional/national reputation

Institutional Service (e.g. Committees)

- In general, service on departmental or SOM committees is NOT highly weighted!
- There are exceptions: such as being chair of important departmental or SOM Committees
- Committees do vital work, but no one was ever denied promotion for refusing assignment to internal committees
- Don't be afraid to refuse to serve on a committee that doesn't interest you
- **Do serve on committees that do interest you and whose work will affect your functions, but they may not help you get promoted**

Your Promotions Portfolio

- I. Job description and/or offer letter. Faculty nomination form. Nomination letter from chair. Curriculum Vitae. **Personal Statement (1 page).**
- II. Documentation of excellence in primary area
- III. Documentation of excellence in secondary areas
- IV. Documentation of scholarship, including 3 publications
- V. Service (local, regional, national)
- VI. Letters from internal and external* referees (***at least 3 from individuals at proposed rank or higher, who have not been formally associated with the candidate, some referees should be suggested by the chair, independently of the candidate**)

*Recommended: Ask for at least twice as many as the bare minimum

How we evaluate your publications

- We do not have a formula for evaluating a candidate's publication record. The factors we consider for papers in refereed journals include:
- The number of refereed publications. Much more weight is given to first and senior-authored publications. There is no set number While the total number of publications is relevant, we pay special attention to the recent publication record (e.g. since the current appointment, since the last promotion, since award of tenure).
- The quality of the journals in which the candidate publishes. We use the Journal Rankings and Impact Factors published by the Institute for Scientific Information. We don't consider just the impact factors of the journals, but also where the journals rank relative to other journals in the candidate's field or discipline.
- Citations to the candidate's published papers are compiled. This helps to tell us the impact that the candidate's publications are having on his/her field. The number of citations to recent publications may not be very meaningful. We try to take into account that research in certain areas garners more citations than work in other areas.
- We also consider un-referred publications, such as chapters and invited articles, but less weight is put on them than on refereed publications.

How to list journal articles on your CV: Citation Analysis and Journal Rankings

- **You can help the P and T Committee by providing this information in your CV for your papers published in the past 5 to 7 years.**
- Here is an example of what we would like to see in the Publications section of your CV (you are T.B. Johnson). Everything but the impact factors (IF) and rankings of the journals is made up. The order of the authors should be exactly as it is in the journal (for example):
- Schmalzcroft, C., Schniklefritz, PE, and **Johnson, T.B.** A new class of dopamine receptors in the median eminence. *Neurosci* 51:1234-1246, 2000.
- Cited 23 times, IF = 6.096, Rank 17 of 194 Neurosci journals
- **Johnson, T.B.**, Schmalzcroft, C., and Schniklefritz, PE. Dopamine inhibits firing of pyramidal cells in neocortex. *J. Neurosci.* 67:234-245, 2001.
- Cited 13 times, IF = 8.045, Rank 12 of 194 Neurosc journals
- The ISI "Web of Science" website, from HSC Library Homepage, can be used to get the citations to any of your published papers papers and the journal impact factors and rankings. Phone Howard Kutchai (4-2195) if you need help with this

Corresponding author and middle author information

- * Indicates the corresponding author
- When the candidate is neither the first, nor the corresponding author, briefly state the candidate's contribution to the paper

- Schmaltzcroft* C., Schniklefriz, PE, and Johnson, T.B. A new class of dopamine receptors in the median eminence. *Neurosci* 51:1234-1246, 2000.
- *Cited 23 times, IF = 6.096, Rank 17 of 194 Neuroscience journals
- Over half the experiments were done in Dr. Johnson's lab by his technician.
- Johnson, T.B., Schmaltzcroft, C., and Schniklefriz, PE*. Dopamine inhibits firing of pyramidal cells in neocortex. *J. Neurosci.* 67:234-245, 2001. Cited 13 times, IF = 8.045, Rank 12 of 194 Neuroscience journals
- *Schmaltzcroft, C, Johnson T.B., and Schniklefriz, P.E. Quantification of dopamine receptor density in the cerebellum. *J. Neurobiol.* 56:123-456, 2003.
- Cited 5 times, IF = 3.145, Rank 54 of 194 Neuroscience journal
- Dr. Johnson provided the antibodies used to estimate dopamine receptor density and the experiments demonstrating antibody specificities were done in his laboratory.

The promotions portfolio will be online

- This is being implemented this year; *we hope*
- The entire promotions portfolio will be on a website
- The candidate or the department will upload the CV and other elements of the portfolio, except letters
- Non-electronic documents will be converted to PDF (Copiers exist that convert any document to PDF)
- The Dean's Office will provide support for this, at least for the first year, in the form of a person to help with document conversion and uploading
- Candidates will have continuous access to their CV and most other sections of the portfolio
- Referees will upload their letters of support
- Dept and SOM P and T Committees will have access to the entire portfolio during appropriate time windows

The Timetable for Review (2004-5)

- July 1: Dean requests letters from inside and outside referees
- (3 independent outside letters are required; you should submit at least 6 names of outside reviewers; some suggested by candidate, some from the Chair)
- September: Departmental review
- October 15: Dept submits completed portfolios to the Dean
- November and December: P and T Committee meets to consider candidates and make recommendations to Dean
- About January 1 : Dean sends P and T summaries to chairs
- January: SOM appeals process
- Late January: P and T Committee considers appeals and submits final recommendations to the Dean
- About February 5: Dean submits recommendations to Provost
- Spring: Provost's P and T Committee considers selected candidates

The Review Process

- A candidate is assigned to a primary and a secondary reviewer from among the P & T Committee members
- The entire Committee evaluates each promotions portfolio and votes on each candidate; makes recommendation to Dean
- Any Committee member with a conflict is excluded from review and discussion of a candidate
- Dean notifies chairs of the Committee's recommendations
- An appeal is possible based on new information or modified action (promotion only or expedited track change)
- P & T Committee makes its recommendations to the Dean
- The Dean makes his recommendations to the Provost
- The Provost's P and T Committee may review the Dean's Recommendations
- Appeals to the Provost's Committee can be based only on procedural improprieties
- The Provost makes recommendations to the BOV

The SOM Promotions & Tenure Committee

- Members: 11 tenured full professors; roughly equal numbers of clinicians and scientists; few department chairs
 - Task: to evaluate faculty nominated for promotion or tenure by applying the written promotion guidelines as consistently as possible
 - Values: broad perspective, consistency, confidentiality, low level of mystery in the process, constructive interactions with chairs, chiefs, and candidates
 - Results from last year:
 - 62 candidates: 50 approved in initial round (81%)
 - 12 disapproved
 - 11 Appeals: *8 approved, 3 disapproved
 - Overall "success" rate = 58/62 = 93.5%
- *Some candidates for promotion and tenure together appealed for promotion alone; some candidates appealed for an expedited track change

Before you submit your portfolio, you are encouraged to consult P and T Committee members

- We want you to understand the P and T Guidelines and to know how you stand with respect to the criteria for promotion and to construct your portfolio in the best possible way

P and T Committee Members-2004-5

Howard Kutchai, Physiology
Ann Beyer, Microbiology
Margaret Shupnik, Internal Medicine
Jim Sutphen, Pediatrics
Mark Conaway, Health Evaluation Sciences
Tom Daniels, Surgery
Eduard de Lange, Radiology
George Rich, Anesthesiology
*Emilie Rismann, Biochemistry
*George Beller, Internal Medicine
*Larry Phillips, Neurology
*Jeremy Tuttle, Neuroscience
* New member

Other able consultants

- Veterans of P and T Committee
 - Sim Galazka, Family Medicine
 - Jim Bennett, Neurology
 - Kevin Lynch, Pharmacology
 - Peggy Shupnik, Internal Medicine
 - Stacey Mills, Pathology
 - Ed Laws, Neurosurgery
 - Bob Bloodgood, Cell Biology
 - Peyton Taylor, OB/Gyn
 - Dick Santen, Internal Medicine
- Sharon Hostler, Associate Dean for Faculty Development

I am happy to consult with individual candidates and groups

- You can set up a meeting via email. Send me the CV as email attachment before we meet
- I will meet with a department or a division or other groups of faculty
- I will meet with departmental support staff who help to put the promotions portfolios together
- I will respond to questions as they arise
- email is preferred: hck4p@ or kutchai@

How a consultation might be helpful

- Am I on the right faculty track?
- Am I a reasonable candidate for promotion or tenure at this time?
- What are my strengths and weaknesses *vis-à-vis* promotion/tenure?
- How can I better document my accomplishments?

Documentation of excellence in research, teaching, and service

- What do we mean by “documentation of excellence”?
- The way the P and T Committee evaluates excellence is not generally well-understood by faculty members (and their chairs)
- It is useful for a candidate to understand the criteria the P and T Committee uses and how it weights different factors
- When you are uncertain, it may be useful to consult a current or recent member of the Committee

Documentation of Excellence in Research

- **Judgments of your peers:** funding from nationally-competitive sources, esp. NIH; external letters
- **Research Productivity:** Papers in peer-reviewed journals: quantity is considered, **quality is weighted more heavily than quantity**
- **Impact of Research:** journal rankings, citations, invitations to speak at national meetings and other institutions, **letters from leaders in the field that specify your contributions to your field**
- Ability to attract students and fellows; evidence of productive interactions with other investigators

Documentation of Excellence in Education

- **Didactic Teaching:** quantity and quality; quantitative evaluations by students, residents, or fellows (compared to other instructors); evaluations by peers; teaching awards in the department or SOM; development of new courses; leadership of courses; responsibility for innovations
- **Training in Laboratory and Clinical Research:** attracting students, residents, and fellows to collaborate in your activities; evaluations by them; posters and papers presented by them at national meetings; papers co-authored by them; awards won by students, residents, or fellows
- **Clinical Training:** directing residency or fellowship program; innovations in training; initiating a new fellowship; papers, posters, presentations co-authored with students, residents, or fellows; awards won by residents or fellows; evaluations by students, residents, or fellows

Documentation of Clinical Excellence

- “Objective evaluation of patient care by medical faculty is at best **difficult** and in many ways unquantifiable. This is largely because the physician-patient relationship is central in patient care. Any objective evaluation, therefore, would have to contain an assessment of the excellence of the physician within that relationship.”
- The Promotion and Tenure Document (Faculty Handbook and Web) has an extended discussion of criteria that distinguish an excellent academic physician

Documentation of Clinical Excellence

- The outstanding physician provides extraordinary care, including excellence in required technical skills.
- The physician is known as a clinical scholar with current knowledge of the literature which is broad and deep and [who] pursues meaningful questions in areas in which information is incomplete.
- The excellent academic physician contributes to the realm of clinical knowledge by engaging in scholarly activity by publishing articles in peer-reviewed journals, invited chapters, or other educational documents

Documentation of Clinical Excellence

- As an alternative to traditional research, the physician may establish a new field or a new school of thinking in clinical medicine, adapt a major application of new knowledge to the clinical setting, develop or improve a diagnostic or therapeutic technique, design or implement a new program of patient care and/or education, develop patient education materials, pursue health services research, or create a new and innovative mode of health care delivery. (We call this “scholarship of application”.)
- **Scholarship of application ideally results in peer-reviewed publications and presentations at regional or national meetings and other institutions.**

Documentation of Clinical Excellence

- The physician is recognized as a clinical leader who is a recognized authority in a clinical specialty. He/she is repeatedly requested to instruct other physicians by such means as consultations, lectures, seminars, visiting professorships, and invited writings. He or she is known across the clinical services as the person to talk to about patient problems.
- The physician is recognized as a superior consultant who is attentive to the needs of the patient and of the referring physician (evaluations and letters from referring physicians are useful for P and T)

How we evaluate scholarship

Peer-reviewed publications (highest weight)

- Quantity: especially since appointment or since last promotion
- Quality: Ranking of journals. Citation history
- First and senior-author publications weighted more heavily (also corresponding author)

Publications that may not be peer-reviewed

- Chapters (is it in a well-respected book?)
- Invited reviews and comments (quality of journal?)
- Electronic publications are currently hard to evaluate: Beware! (This is evolving.)

Scholarship that does not result in some sort of publication is more difficult to evaluate

Some indicators of regional/national/international reputation

- Service on a study section or grant review panel of a regional/national agency
- Membership on editorial boards of major journals
- Invited reviews and articles
- Invited talks at regional/national/international symposia and at other institutions; visiting professorships
- Officer or chair/member of a committee of regional/national professional or scientific society