# Procedures and Guidelines for Faculty Peer Review Process

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UNE COM consists of faculty with diverse backgrounds and varied job responsibilities. The purpose of this site is to provide the COM faculty, across all disciplines, specific information about the Review, Promotion, and Tenure process within the College.

# **UNE COM Ranks and Classifications**

## **COM Ranks**

The faculty ranks are set by the University of New England Faculty Handbook and can be found in the Faculty Handbook, Section Two. Please refer to <a href="http://www.une.edu/provost/resources">http://www.une.edu/provost/resources</a> for the most current UNE Faculty Handbook as well as other resources and guidelines for faculty review, promotion, and tenure.

# **COM Faculty Classifications**

Tenure Track UNE COM Faculty

Tenure positions within the UNE COM adhere to all RPT policies as presented in the UNE Faculty Handbook [Section Two. II] with specific criteria for each area listed in the REVIEW CRITERIA for COM section of this UNE COM RPT document. Tenure track is determined at the time of hire. The criteria for teaching, scholarship and service will be reviewed in accordance with the Personal Responsibility Agreements (PRAs) over the course of the review period. The PRA is an annual agreement between the faculty member and the College which delineates the faculty member's percentage effort in teaching, scholarship and service, as well as clinical and administrative if appropriate. It also indicates teaching and committee responsibilities. Tenure-track faculty must be evaluated in all three areas.

## Non-Tenure Track UNE COM Faculty

Non-tenure track positions within the UNE COM adhere to RPT policies as presented in
the UNE Faculty Handbook. Faculty members in these categories are covered by the
UNE COM's and the university's formal reappointment and promotion guidelines.
Faculty members with regular half- and regular full-time non-tenure lecturer track,
clinical track, or research track appointments will be evaluated for reappointment and
promotion using procedures as for tenure track faculty members with specific criteria
for each area listed in REVIEW CRITERIA FOR COM section of this UNE COM RPT chapter.

## Criteria

- Non-tenure track clinical or lecturer faculty are not required to engage in research or scholarship. In these cases, teaching and service will be considered in decisions for reappointment or promotion based on the percent effort as stated in the Personal Responsibility Agreement (PRA).
- Non-tenure track research faculty should negotiate effort through the chair/section head and dean to include any requirements applying to Review and Promotion. In these cases, productivity in scholarship/research will be considered in decisions for reappointment or promotion. The percent effort will be identified on the Personal Responsibility Agreement (PRA).

# **Review Criteria for UNE COM**

The following are the criteria for reappointment, promotion, and tenure that apply equally to faculty members in UNE COM:

# **Teaching**

Faculty carry out the educational mission of the College of Osteopathic Medicine, using a variety of teaching strategies that foster student learning and result in professional knowledge, attitudes, and skills. Teaching excellence is the keystone for review of faculty in academic medicine; however, the teaching load is not universal across all faculty members. Evidence through multiple data sets will determine successful teaching.

Teaching in academic medicine comprises activities from three primary areas: 1. Didactic teaching of students or peers (e.g. lectures, small group facilitation, laboratory instruction, continuing education courses, grand rounds, professional development programs); 2. Clinical teaching and mentorship (e.g. teaching in the clinic or hospital including clinical precepting, bedside teaching, bedside simulations); and 3. Teaching leadership role (e.g. residency or fellowship director, course, or seminar). Process for teaching may include lead 'teacher' role, giving and receiving instructional feedback, staff development, educational research project, capstone course, thesis and/or dissertation direction, role modeling, mentoring, interdisciplinary collaboration, staying current in focused area of teaching expertise, or participating in continuing education offerings.

- <u>Criteria</u>: Faculty member engages in teaching activities that benefit the College, University, profession, or society. The faculty member should examine the quality, breadth, and quantity of the teaching endeavor:
  - Evidence of Quality: (e.g., success of teaching) include: evidence of excellence through student evaluations; peer observation/review; course director ratings; peer letters of support; outcome indicators (student performance).

- o **Dimensions of Breadth:** (e.g., diversity of teaching) might include: different levels or types of learners; different courses; different styles/formats of teaching or evaluation; old versus new curriculum; internal versus external teaching.
- Evidence of Quantity: (e.g., amount of teaching) include: number of hours teaching (duration and frequency of lectures); number of years teaching; number of learners and/or groups taught.
- <u>Teaching Products or Exhibits</u>: Teaching products exemplify transmission, transformation and extension of medical competencies:
  - Examples of objectives, teaching, and examination materials
  - Evaluations student evaluations; peer evaluations and letters of support;
     honors or recognitions for teaching contributions
  - Case vignettes development
  - Local awards for teaching or mentoring
  - Senior local leadership role in education
  - Invited presentation in the field of educational expertise
  - Invitations to speak and teach locally about education, including outside the candidate's department
  - Contributions to local professional educational organizations
  - Selection for participation in limited enrollment training programs for educators
  - Leadership role in regional, and most often national, courses related to education
  - Awards for teaching or mentoring from sources other than the candidate's department/institution
  - Visiting professorships and invitations to speak nationally, and in some cases internationally, on issues related to education
  - Leadership of national, and in some cases international, courses related to education
  - Serving as a consultant nationally, and in some cases internationally, on issues related to development of educational programs or on educational methods, policy or assessment
  - National and/or international awards related to education or educational scholarship
- Examples of Teaching Expertise Across Ranks
  - Assistant Professor: The Assistant Professor should provide evidence that s/he is performing at a competent level and is working towards excellence in view of future promotions. The assistant professor may be involved in the development and local adoption of educational material in print or other media including items such as syllabi, curricula, web-based training modules or courses, and/or technologies (e.g., simulation); s/he may also include development of educational methods, policy statements, and/or assessment tools.
  - Associate Professor: The candidate for promotion to Associate Professor should provide evidence of excellence in teaching. They should have strong teaching evaluations from students and faculty, with colleagues who request assistance in peer observations and improving instructional effectiveness. The candidate may

begin tracking the number and stature of trainees upon whom s/he had a major influence, including feedback from trainees and publications with trainees. A candidate for promotion to associate professor develops sound teaching methods, curricula, educational policy or assessment tools. These curricular materials could have the opportunity for regional or national adoption. The candidate will examine the success of programs developed or innovations to existing programs.

Full Professor: The candidate for Full Professor must show continued excellence in teaching as reflected in student and peer evaluations. A candidate for full professor is teaching/lecturing nationally and/or internationally. Innovation in classroom teaching methods may be adopted nationally and/or internationally. The candidate should show increasing and sustained national and/or international leadership roles in their profession.

# **Scholarship**

Faculty carry out the mission of the College of Osteopathic Medicine to create new knowledge. In recognition of diverse faculty in the COM, the RPT process must take a broad view of scholarship while still demanding excellence in scholarship. The COM recognizes an expanded view of scholarship originally codified by Boyer in 1997. This includes four types of scholarship: discovery, integration, application and the scholarship of teaching.

Evidence of a program of inquiry constituting a credible body of work that is peer-reviewed and disseminated will determine successful scholarship. When considering a faculty member for reappointment, promotion, or tenure, acceptable evidence of scholarship can include but is not limited to the publication of books and articles in peer reviewed journals. However, to qualify as excellence in scholarship, the product of one's professional efforts must be disseminated and must satisfy standards of peer review common to the discipline. Ordinarily, this will entail some form of independent critical scholarly evaluation. Although evaluators will consider submitted documentation of unpublished scholarship (e.g., theses, dissertations, or summaries of work in progress), it is incumbent upon candidates to demonstrate that their endeavors constitute scholarship as defined above.

## Examples of may include, but are not limited to:

- o Basic science research
- Clinical research involving patients, e.g., case reports, case series and clinical trials
- Quantitative and qualitative social science research such as epidemiology, outcomes and health services research, and biostatistics as well as research in social sciences, ethics, bioinformatics and health economics, among others;
- Development/implementation, conduct of studies, data collection and/or analysis of new or existing data; may make intellectual contributions to multicenter studies

- Development of new methods/technologies and/or novel applications of existing methods/technologies in basic science, clinical research, education, and social sciences and humanities
- Evidence of meaningful scholarship might come in the form of:
  - o Invited or competitive scholarly presentations
  - Honors or recognitions for scholarly contributions
  - Publication in refereed journals or proceedings
  - o Publication of books or chapters in edited volumes
  - Citation of candidate's published work
  - Grant/contract awards
  - Ongoing research leading toward dissemination and peer review
- Examples of Scholarship Across Ranks
  - Assistant Professor: The Assistant Professor begins the development of a research program. The Assistant Professor should provide evidence of scholarly work that has or will be disseminated and peer reviewed in view of future promotions. The junior faculty should have protected time for the development of a research program. Work should begin to be disseminated through scholarly presentations to the college and at local and national conferences. The faculty member should be beginning the process of publication in peer reviewed journals. The faculty member should be seeking initial funding through small grants from foundations and national agencies.
  - Associate Professor: The candidate for Associate Professor should have a program of scholarship that is focused and shows sustained productivity. The candidate should be publishing in peer reviewed journals on a regular basis. They should have regular presentations at national and international meetings within the discipline. The candidate for Associate Professor continues to apply for funding from granting agencies. The research program should begin to broaden and may include collaborations with colleagues.
  - Full Professor: The candidate for Full Professor must show excellence and leadership in a scholarly program that has shown an increase in depth and breadth relative to the Associate Professor. The scholarship should show a continued strong focus with an increase in the complexity of the research. The candidate will have a national and international reputation as evidenced by presentation at national and international conferences. The candidate is committed to training futures scholars through undergraduate and graduate research programs. The candidate will also be serving as a mentor to junior faculty. These accomplishments are clear from evaluations from peers within the UNE COM faculty as well as from the peers in the faculty's discipline outside of UNE.

#### Service

Faculty carry out the mission of the College of Osteopathic Medicine through excellence in service to the College, University, the community and the profession. Participation in

governance and other civic activities is expected of everyone within the percent time employed. It should be noted that scholarly community service may be captured under teaching, application, integration and discovery scholarship within the educator, researcher, and practitioner roles.

Evidence of the work performed and time spent on conducting committee (or other service) business should be provided. Evaluation should include the academic importance of service roles the faculty member has filled, the effectiveness of the faculty member's work in those roles, and the appropriateness of the service record given the faculty member's career stage. As faculty members advance through the professional ranks, they are expected to exhibit an increasing record of service in their professional area of performance. In summary, significant service need not be continuous, but it should appear in a balanced record over time, generally extending beyond a single review period. Meritorious service on the part of faculty members should include frequent periods of active engagement at all levels, and the score of such service is expected to increase as faculty member proceeds up the academic ladder of the professorate.

## • Examples of Service to the College/University and Profession Include:

- Serves on standing committee or academic council, either by election or appointment, in order to conduct School/University business
- Serves on college/university ad hoc committee
- Participates on a clinical agency committee or task force to develop solutions to patient care problems
- Maintains membership or holds office in local, state, national, regional, international professional organization
- o Serves on community task force or committee to address health policy concerns
- Serves as board member for health related local, state, regional, or national organization
- o Attends business meeting of national professional organization
- Attends community meetings of organizations whose purpose is to promote health
- Attends COM Faculty Assembly and UNE Faculty Assembly meetings
- Review of grant proposals or books

## • Evidence of Service Might Include:

- Descriptions of duties and responsibilities on committees
- Program and thank you note from a community function where you were leader or speaker
- Community, College, or University Presentation/paper on an issue
- Testifying (oral or written) regarding a policy change
- Organizing a community event
- Serving on a community or association Board of Directors (letter, webpage, photo)
- Starting a new department (report)
- o Response to presentation to community organization

- Op-Ed piece in community newspaper
- Testimony on a specific issue to city council, legislative committee, e.g., health policy change k. A creative work illustrating diversity
- Honor or recognition for service
- Participation and/or Leadership role in community or professional organization

## Examples of Service across Ranks

- Assistant Professor: The college and the university benefits from the involvement of its junior level faculty member. An assistant professor is normally expected to provide service at the *local level* of the department or college, for example, by serving as a student advisor, as a member of the admissions committee, or as a member of a faculty search committee. Service at the Faculty Assembly or university level is relatively rare for Assistant Professor, but when it occurs, it is most appropriate for the service to be on university committees that do not have intensive and prolonged time demands.
- Associate Professor: Candidates for Associate Professor are expected to serve their department, the college and the university, for example, as chairs and directors as well as through membership on standing committees and ad hoc committees. It is also expected that candidates for Associate Professor ranks give time to their profession through service on editorial boards, grant review committees, program and conference program committees. Candidates also serve as elected or appointed officers of professional societies or associations.
- Full Professor: At the level of Full Professor, the expectations for candidates increase to include all of the categories initiated in the lower ranks of the professorate, including leadership at all levels of service. Service on certain high impact committees requiring senior faculty (e.g. RPT and Faculty Assembly committees) is expected. In addition, a candidate for Full Professor level is expected to serve on university-wide committees when appointed or invited. Candidates are expected to offer frequent and broadly distributed service to multiple constituencies within the academic community.

## **Clinical Expertise and Innovation**

The College of Osteopathic Medicine also recognizes the activities of the clinical faculty as a separate category from the traditional categories of teaching, scholarship and service. Clinical Expertise and Innovation comprises activities related to health care expertise and innovation. Clinicians carry out the clinical and administrative missions of the College of Osteopathic Medicine, using professional knowledge, attitudes, and skills to provide direct care or to advance clinical and organizational systems. Clinical Expertise and innovation occurs when a faculty member (educator, researcher practitioner) builds a reputation as a practitioner, innovator, and mentor in the health care field.

Criteria

Faculty engages in clinical care and innovation that benefit the health care facility, the community, the college, the University, and the profession. The faculty member plays a key role in activities that influence the practice and the health care system. As a *Clinician* one might see movement from caring for simple cases and well-persons' health management to management of more complex health problems, from managing individual cases to managing larger client groups, and from influencing one's individual clients to influence on clinical practice policies in specific agencies and social health practice policies.

## Process or Strategy Examples/Evidence/Products of Clinical Expertise and Innovation

- o Colleague Review
- Quality Service ribbons
- o CIR (Clinical Improvement Ratings)
- OPPE (Ongoing Professional Performance reviews)
- o FPPE (Focused Professional Performance Reviews)
- Lifelong learning
- Recognition for expertise -- serving as clinically-oriented task force, consultant
- Obtaining certification in area of specialty, receipt of honors/awards/recognition for excellence in specialty (Diplomat/Fellow)
- Invitations to speak locally, and in many cases regionally & nationally, on issues related to area of clinical expertise
- Role in local professional organizations related to clinical expertise, including participation as a speaker in courses and program development
- Invitations to participate locally in the development of guidelines/protocols for quality improvement or management in area of clinical expertise; Service on regional, and most often national, committees developing guidelines and policies for management in area of clinical expertise
- Service as peer reviewer for clinical journals; Membership on editorial boards in area of clinical expertise
- Peer-reviewed funding to support innovations that influence clinical practice locally; Peer-reviewed funding to support innovations that influence clinical practice regionally, and most often nationally
- Local, regional or national awards for contributions and/or innovation in the area of clinical expertise

## • Scholarship in the clinical arena may take varied forms:

- Publication of first or second authorship of original research, reviews and/or chapters related to area of clinical expertise; may include publication of research that assesses the effectiveness of innovative approaches to clinical care
- Development of guidelines and/or protocols for patient treatment or delivery of care that are adopted locally
- o Commentary written about the health care field
- Examples of Clinical Expertise and Innovation across Ranks

- Assistant Professor: An assistant professor is normally expected to provide diagnosis, treatment or prevention of disease and may be recognized as a clinical expert who influences the clinical practice. For example, the clinician plays a key role in the development of development or local adoption of innovative health care approaches, applications of technology to clinical care and/or in developing models of care delivery. The individual has a strong local reputation as a clinical expert, may hold local clinical leadership roles. The assistant professor may assist with the creation of a novel interdisciplinary clinical service and play a key role in development and local implementation of practice guidelines for care or to prevent medical errors.
- Associate Professor: Candidates for Associate Professor are expected to provide continued clinical care. The individual builds strong regional, and most often national, reputation as an independent expert who has influenced a clinical field and should be actively teaching in the clinical field. The candidate participates in the development of innovative approaches to diagnosis, treatment or prevention of disease, applications of technologies and/or models of care delivery that influence care at a regional, and most often national, level. Examples of activities (many others are possible) include the development of: a clinical care model, practice guidelines, or an innovative application of an existing technology.
- Full Professor: After sustained practice at the associate professor level, an experienced clinician may apply to be promoted to Full Professor. The candidate should have a sustained national, and in many cases international, reputation as a leader and innovator in a clinical field; expertise must be demonstrated through scholarship that impacts the health care profession; must have a significant influence on practice in the clinical field as a result of his/her teaching, scholarship and innovation.

# **UNE COM Specific RPT Considerations**

## **UNE COM Levels of Review for Promotion and/or Tenure**

Note: Each Level of Review states UNE COM specific policies, see the UNE Faculty Handbook RPT Section for more information.

- <u>Level I Review</u>: UNE COM Sub-College RPT committee (RPTC)
  - The candidate submits the names of three UNE COM faculty to their department chair for Sub-College RPTC consideration.
    - The Department Chair will pick two of the three names submitted by the candidate and will pick one additional member to make a Sub-College RPTC of three UNE COM faculty.
    - The Department Chair will inform the candidate of the final composition of the Sub-College RPTC.

- All Sub-College RPTC members must be at the rank of Associate Professor or Professor.
- All Sub-College RPTC members for tenure track faculty must be tenured faculty member.
- All Sub-College RPTC members for candidates in Clinical Departments must be from clinical departments.
- If the Department Chair is unable to meet the criteria for the Team, then the Committee may include faculty from other departments within COM. The committee will follow the procedure outline in SECTION THREE (Reappointment, Promotion, and Tenure Guidelines) and Attachment 2 of the Faculty Handbook.
- Level II Review: UNE COM Department Chair

As outlined in SECTION THREE and Attachment 2 of the Faculty Handbook

• Level III Review: UNE COM RPT Committee

As outlined in SECTION THREE and Attachment 2 of the Faculty Handbook

• <u>Level IV Review</u>: UNE COM Dean

As outlined in SECTION THREE and Attachment 2 of the Faculty Handbook

# **Early Considerations for RPT Process**

Petition for early consideration for Promotion and/or Tenure must be approved by the department/program chair and the dean.

## Considerations for Promotion in Rank to Associate Professor or Professor

The criteria for promotion to Associate Professor and the granting of tenure are outlined in Section 3, III, A of the UNE Faculty Handbook. The criteria for promotion to Professor are outlined in Section 2, III, B of the UNE Faculty Handbook. Promotion to Professor is the ultimate promotion for faculty at UNE. This rank requires excellence in all areas of teaching, scholarship, and service. There is an expectation that there is an increase in the level and complexity of a faculty member's scholarship and service at the rank of Professor. Thus, faculty in the non-tenure tracks must show accomplishment in all areas to receive this honor.

## **COM Peer Letters of Recommendation**

Each candidate will solicit two letters of recommendation from COM faculty. Faculty on tenure track will ask for letters from tenured faculty; nontenure track faculty will ask for letters from faculty at an associate professor or professor rank.

# **External Reviews for Scholarship and Professional Standing**

The quality of scholarship for the consideration of promotion and tenure is an important aspect of the review. Given the diverse nature of scholarship within the College it is valuable to seek outside review within the scholar's field. If the candidate's portfolio offers evidence of scholarship, then an external review is required. By June 1, the candidate will submit the names of at least three professionals with the same or higher academic ranks from outside the UNE who would be capable of critically reviewing their scholarship and professional recognition (if applying for the rank of Professor). The candidate should provide a brief description of the reviewers' qualifications and standing in their field. Names of collaborators (including coauthors) within the last three years should not be submitted. The Department Chair will select two of the three and will determine a third reviewer who is qualified to review the candidate's work. By July 1, the dean's Office will be responsible for contacting the reviewers, sending out the appropriate review materials, i.e. candidate's curriculum vitae, the UNE COM RPT protocol. The letters will be sent to the UNE COM dean, who will be responsible for placing the letters confidentially into the candidate's portfolio at the appropriate time.

# **COM Affiliated Clinical Faculty**

# Appointment, Review and Promotion Process for Affiliated Clinical Faculty:

- Faculty appointments for affiliated clinical faculty are made by the Dean of the College of Osteopathic Medicine upon the recommendation of the Associate Dean of Clinical Education.
- The rank conferred at the time of initial appointment will depend on the criteria established in this document and/or the rank achieved at another institution. If a faculty member receives a change in designation from the other institution while holding an appointment at UNE COM, the dean may grant this change automatically as well.
- Nominations for faculty appointment may originate from a current UNE COM faculty member, a Regional Assistant Dean, the ODME of a NEOMEN residency, a COM Department Chair, a COM Associate Dean, or the Dean.
  - The nomination letter should include the nominee's teaching role for UNE COM, teaching experience and statement of teaching quality.
- Each nominee's appointment application should include:
  - o A letter of nomination addressed to the Office of Clinical Education
  - o A completed and signed faculty appointment application
  - o A current CV that includes a specific teaching section
  - A copy of a current medical license in the state in which the faculty member is providing a teaching role for UNE COM
- The nomination and review of a completed appointment application will be processed through the UNE COM Office of Clinical Education.
- Reappointments are conducted every three (3) years.

- Affiliate clinical faculty members are not required to engage in research or scholarship, except for those seeking appointment or promotion to Affiliate Clinical Professor. Teaching, service, and patient care criteria (section III) will be considered in decisions for reappointment or promotion.
- The faculty member may initiate a review for promotion by submitting:
  - A cover request letter addressed to the Office of Clinical Education. Letter should include information supporting request for promotion
  - o A current CV
  - A professional portfolio
- Promotion requests and review will be processed through the Office of Clinical Education.
- Promotion to Affiliated Clinical Professor (full professor) is reserved for faculty members
  who have demonstrated their potential for excellence and long-term contributions to
  the local institution, their profession nationally, and the College of Osteopathic
  Medicine. This status is not granted automatically for time served or satisfactory
  performance.
- For promotion to Affiliated Clinical Professor, the Associate Dean for Clinical Education
  will initiate a review committee appropriate to the field of the candidate. Each
  candidate will solicit three or more letters of recommendation from local, college,
  and/or national faculty. Each candidate will submit a current academic curriculum vitae
  as well as a professional portfolio in evidence of achievement in teaching, service,
  patient care, and scholarship. The committee may seek outside review within the
  scholar's field.

# Affiliated Clinical Faculty Rank (not eligible for tenure track)

- Affiliate Clinical Instructor: A faculty member with a doctorate or other appropriate
  professional degree and/or graduate training that have less than three (3) years of
  teaching experience in the appropriate field. There is no possibility for promotion to
  Assistant Clinical Professor in absence of a graduate degree. This rank level shall be
  given to physicians who are not board certified. A resident PGY-II or greater may hold
  this position.
- Affiliate Assistant Clinical Professor: a faculty member with a doctorate or other
  appropriate professional degree engaged in teaching and/or providing a practice or
  service activity and/or supervising learners in academic, clinical or field settings, and/or
  providing service with usually more than three (3) years of teaching experience.
- Affiliate Associate Clinical Professor: a faculty member with a doctorate or other
  appropriate professional degree engaged in teaching; and/or providing a practice or
  service activity; and/or supervising learners in academic, clinical or field settings; and/or
  providing service with usually more than nine (9) years of teaching experience. First
  consideration for promotion to this level ordinarily will occur during the sixth (6th) full
  year of service as Affiliate Assistant Clinical Professor.
- **Affiliate Clinical Professor:** a faculty member with a doctorate or other appropriate professional degree engaged in teaching; and/or providing a practice or service activity;

and/or supervising students in academic, clinical or field settings; and/or providing service with usually more than twelve (12) years of teaching experience. First opportunity for promotion to this level ordinarily will be in the sixth (6th) full year in rank as Associate Clinical Professor.

# **Review Criteria for UNE COM Affiliated Clinical Faculty**

The following are the criteria for appointment, reappointment, and promotion that apply equally to affiliated faculty members in UNE COM. The criteria areas are Teaching, Service, Patient Care, and Scholarship/Research (needed for full Professor).

# **Teaching**

Affiliated clinical faculty carry out the educational mission of the College of Osteopathic Medicine using a variety of teaching strategies that foster learning and result in professional knowledge, attitudes, and skills. Teaching is the keystone for review of faculty in academic medicine; however, the teaching load is not universal across all faculty members. Teaching excellence should be the hallmark of affiliated clinical faculty engaged in the academic mission.

Teaching in academic medicine comprises activities from three primary areas: 1. Didactic teaching of learners (e.g., lectures, small group facilitation, laboratory instruction, continuing education courses, grand rounds, professional development programs); 2. Clinical teaching and mentorship (e.g., teaching in the clinic or hospital including clinical precepting, bedside teaching, bedside simulations); 3. Teaching leadership role (e.g. residency or fellowship director, course or seminar). The role of teaching may include lead teacher role, giving and receiving instructional feedback, staff development, educational research project, capstone course, role modeling, mentoring, interdisciplinary collaboration, staying current in focused area of teaching expertise, participating in continuing education offerings.

- <u>Criteria:</u> Faculty members engage in teaching activities that benefit the College, University, profession, and/or society. The faculty member should examine the quantity and quality of the teaching endeavor:
  - Evidence of Quality: (e.g., success of teaching) include summarized learner ratings; peer observation/review; course director ratings; peer letters of support; outcome indicators (learner performance); awards for teaching.
  - Dimensions of Breadth: (e.g., diversity of teaching) include different levels or types of learners; different courses; different styles/formats of teaching or evaluation; old versus new curriculum; internal versus external teaching.
  - Evidence of Quantity: (e.g., amount of teaching) include number of hours teaching (duration and frequency of lectures); number of years teaching; number of learners and/or groups taught.

- <u>Teaching Products or Exhibits:</u> Teaching products or exhibits exemplify the quality, breadth and quantity of teaching experience.
  - Examples of syllabi, modules, and lesson plans including objectives/learning outcomes
  - Teaching and Examination materials
  - Evaluations: Student evaluations summaries; Peer evaluations and letters of support; Honors or recognitions for teaching contributions
  - Case vignettes development
  - Local and national awards for teaching or mentoring
  - Local, national and/or international awards related to medical education or educational scholarship
  - Local leadership role in education
  - Invited or peer-reviewed presentation in the field of clinical or educational expertise
  - Invitations to speak and teach locally about education, including outside the candidate's department
  - o Contributions to local professional educational organizations
  - o Selection for participation in limited enrollment training programs for educators
  - Leadership role in regional and national courses related to education
  - Invitations to speak nationally or internationally on issues related to educational expertise
  - Serving as a consultant nationally or internationally on issues related to development of medical educational programs or on educational methods, policy or assessment
- Examples of Teaching Expertise Across Ranks
  - o **Affiliate Clinical Instructor**: The Affiliate Clinical Instructor is an entry-level appointment for those who do not meet the criteria of higher ranks.
  - Affiliate Assistant Clinical Professor: The Affiliated Assistant Professor, who is a physician, must be board certified in the appropriate specialty and have at least three (3) years of experience in teaching. The assistant professor should provide evidence that s/he is performing at a competent level and is working towards excellence in teaching. The assistant professor may be involved in the development and local adoption of educational material in print or other media including items such as syllabi, curricula, web-based training modules or courses, and/or technologies (e.g., simulation); s/he may also participate in the development of educational methods, policy statements, and/or assessment tools.
  - Affiliate Associate Clinical Professor: The candidate for appointment or promotion to Associate Professor should provide evidence of excellence in teaching and usually has more than nine (9) years of teaching experience. They should have strong teaching evaluations from students and faculty, with colleagues who request assistance in peer observations and improving instructional effectiveness. The candidate may begin tracking the number and stature of trainees upon whom s/he had a major influence, including feedback

- from trainees and publications with trainees. An associate professor with primary responsibility in teaching develops sound teaching methods, curricula, educational policy or assessment tools. These curricular materials could have the opportunity for regional or national adoption. The associate professor will examine the success of programs developed or innovations to existing programs.
- Affiliate Clinical Professor: The candidate for appointment or promotion to full Affiliated Clinical Professor must show continued excellence in teaching as reflected in student and peer evaluations teaching and usually has more than twelve (12) years of teaching experience. S/he should show capabilities in curriculum development in addition to excellence in teaching. A full professor with primary responsibility in teaching is teaching/lecturing nationally and/or internationally, about issues related to education. Innovation in classroom teaching methods may be adopted nationally, and in some cases, internationally. The Full Professor shows increasing and sustained national and, in some cases, international, leadership role related to education in a professional society.

## Service

Affiliated Clinical Faculty members participate in the mission of the College of Osteopathic Medicine through service to the College, University, the community and the profession.

- <u>Criteria:</u> As faculty members advance through the professional ranks, they are expected
  to exhibit an increasing record of service in their professional area of performance.
  Meritorious service on the part of faculty members should include frequent periods of
  active engagement at all levels, and the impact of such service is expected to increase as
  faculty member moves up in rank.
  - Evidence of Quality: (e.g., success of service) The effectiveness of the faculty member's work in those roles, the impact of such service and the appropriateness of the service record given the faculty member's career stage
  - Dimensions of Breadth: (e.g., diversity of service) The service performed including the academic importance of service roles the faculty member has filled
  - Evidence of Quantity: (e.g., amount of service) The time spent on conducting committee (or other service) business. Significant service need not be continuous, but it should appear in a balanced record over time, generally extending beyond a single review period
- Examples of service to the college/University and Profession include:
  - Serves on standing committee or academic council, either by election or appointment, in order to conduct institutional business b. Serves on institutional ad hoc committee
  - Participates on a clinical agency committee or task force to develop solutions to patient care problems

- Maintains membership or holds office in local, state, national, regional, or international professional organizations
- Serves on community task force or committee to address health policy concerns
- Serves as board member for health related local, state, regional, or national organization
- Attends business meeting of national professional organization
- Attends community meetings of organizations whose purpose is to promote health
- Attends institutional faculty/staff meetings

## • Evidence of service might include:

- Descriptions of duties and responsibilities on committees
- Program and thank you note from a community function where you were leader or speaker
- o Testifying (oral or written) regarding a policy change
- Organizing a community event
- Serving on a community or association Board of Directors (letter, webpage, photo)
- New department proposal (report)
- o Response to presentation to community organization
- Testimony on a specific issue to city council, legislative committee, e.g., health policy change
- o Honor or recognition for service
- Participation and/or leadership role in community or professional organization

## • Examples of Service across Ranks:

- o **Affiliated Clinical Instructor:** The local institution benefits from the involvement of its affiliated clinical faculty members.
- Affiliated Assistant Clinical Professor: The college and the home institution benefits from the involvement of its affiliated clinical faculty. An affiliated clinical assistant professor is normally expected to provide service at the local level of the department, for example, by serving as an advisor or as a member of a search or admissions committee. Service at the institutional level is relatively rare for Assistant Professor, but when it occurs, it is most appropriate for the service to be on committees that do not have intensive and prolonged time demands.
- Affiliated Associate Clinical Professor: Affiliated Associate Clinical Professors are expected to serve their department, the institution and potentially, the college. For example, the affiliated associate professor may serve as chairs and directors as well as through membership on standing committees and ad hoc committees. It is also expected that faculty in the Associate Professor ranks give time to their profession through service at the state, region or national level. Associate Professors often serve as elected or appointed officers of professional societies or associations.
- Affiliated Clinical Professor: At the level of Affiliated Clinical Professor, the
  expectations increase to include all of the categories initiated in the lower ranks,
  including leadership at all levels of service. Full Professors are expected to offer

frequent and broadly distributed service to multiple constituencies within the academic community. Service on certain high impact committees requiring senior faculty is expected. In addition, a faculty member at the full Professor level is expected to serve on institutional committees when appointed or invited.

# **Patient Care: Clinical Expertise and Innovation**

Clinical Expertise and Innovation comprises activities related to health care expertise and innovation in patient care. Clinicians carry out the clinical and administrative missions of their institution and the College of Osteopathic Medicine, using professional knowledge, attitudes, and skills to provide direct care or to advance clinical and organizational systems. Clinical Expertise and innovation occurs when faculty (educator, researcher practitioner) builds a reputation as a practitioner, innovator, and mentor in the health care field.

- <u>Criteria:</u> Faculty engages in clinical care and innovation that benefit the health care facility, the community, the college, the University, and the profession. The faculty member plays a key role in activities that influence the practice and the health care system. As a Clinician, one might see movement from caring for simple cases and well-persons' health management to management of more complex health problems, from managing individual cases to managing larger client groups, and from influencing one's individual clients to influence on clinical practice policies in specific agencies and social health practice policies.
- <u>Examples/Evidence/Products of Clinical Expertise and Innovation:</u> Clinicians may be recognized through examples such as the following exhibits:
  - Colleague Review
  - Quality Service ribbons
  - Clinical Improvement Ratings (CIR)
  - Ongoing Professional Performance reviews (OPPE)
  - Focused Professional Performance Reviews (FPPE)
  - Recognition for expertise -- serving as clinically-oriented task force, consultant
  - Obtaining certification in area of specialty, receipt of honors/awards/recognition for excellence in specialty (Diplomat/Fellow)
  - Invitations to speak locally, regionally & nationally on issues related to area of clinical expertise
  - Role in local professional organizations related to clinical expertise, including participation as a speaker in courses and program development
  - Invitations to participate locally in the development of guidelines/protocols for quality improvement or management in area of clinical expertise
  - Service on regional and/or national committees developing guidelines and policies for management in area of clinical expertise
  - o Membership on editorial boards in area of clinical expertise

- Peer-reviewed funding to support innovations that influence clinical practice locally
- Peer-reviewed funding to support innovations that influence clinical practice regionally, and most often nationally
- Local, regional or national awards for contributions and/or innovation in the area of clinical expertise
- Examples of Clinical Expertise and Innovation across Ranks:
  - o **Affiliated Clinical Instructor:** Affiliated clinical instructor is expected to provide continued clinical care and should be actively teaching in the clinical field.
  - Affiliated Assistant Clinical Professor: Affiliated assistant clinical professor is expected to provide continued clinical care, may be recognized as a clinical expert who influences the clinical practice and should be actively teaching in the clinical field. For example, the clinician plays a key role in the development of development or local adoption of innovative health care approaches, applications of technology to clinical care and/or in developing models of care delivery. The individual has a strong local reputation as a clinical expert and may hold local clinical leadership roles. The assistant clinical professor may assist with the creation of a novel interdisciplinary clinical service and play a key role in development and local implementation of practice guidelines for care or to prevent medical errors.
  - Affiliated Associate Clinical Professor: Affiliated associate clinical professor is expected to provide continued clinical care, builds a strong regional and/or national reputation as an independent expert who has influenced a clinical field and should be actively teaching in the clinical field. The associate professor participates in the development of innovative approaches to diagnosis, treatment or prevention of disease, applications of technologies and/or models of care delivery that influence care at a regional, and most often national, level. Examples of activities (many others are possible) include the development of: a clinical care model, practice guidelines, or an innovative application of an existing technology.
  - o Affiliated Clinical Professor: After sustained practice at the associate clinical professor level in areas of teaching, service and patient care, an experienced clinician may be promoted to full Affiliated Clinical Professor. The full Affiliated Clinical professor should have a sustained national and/or international, reputation as a leader and innovator in a clinical field; expertise must be demonstrated through scholarship that impacts the health care profession; must have a significant influence on practice in the clinical field as a result of his/her teaching, scholarship, and innovation.

# **Scholarship**

Senior affiliated clinical faculty members contribute to the mission of the College of Osteopathic Medicine through their scholarly voice. In recognition of diverse faculty in medical education, COM takes a broad view of scholarship while still demanding excellence.

The COM recognizes an expanded view of scholarship originally codified by Boyer in 1997 including four types of scholarship: discovery, integration, application and the scholarship of teaching.

- <u>Criteria:</u> Evidence of a program of inquiry constituting a credible body of work that is peer-reviewed and disseminated will determine successful scholarship. When considering a faculty member for reappointment or promotion, the product of one's professional efforts must be disseminated and must satisfy standards of peer review common to the discipline. Ordinarily, this will entail some form of independent critical scholarly evaluation. Although evaluators will consider submitted documentation of unpublished scholarship (e.g., theses/applied project, dissertations, or summaries of work in progress), it is incumbent upon candidates to demonstrate that their endeavors constitute scholarship as defined above.
  - Evidence of Quality: (e.g., success of scholarship) include is diversity of peerreviewed and disseminated scholarly activities/endeavors; awards for scholarly contributions; publication of first or second authorship; citations of published work; and invited or competitive scholarly presentations
  - Dimensions of Breadth: (e.g., diversity of scholarship) include different levels or types of scholarly activities/endeavors.
  - Evidence of Quantity: (e.g., amount of scholarship) include number of scholarly activities and endeavors.
- Examples of scholarship may include, but are not limited to:
  - Scholarly writing including commentaries, editorials, review of literature, as well as medical literature such as clinical guidelines and summaries
  - Review of grant proposals, books, chapters, journal manuscripts, and conference proposals
  - Community, College, or University Presentation/paper on an issue
  - Basic science and translational research
  - Clinical research involving patients, e.g., case reports, case series and clinical trials.
  - Quantitative and qualitative social science research such as epidemiology, outcomes and health services research, and biostatistics as well as research in social sciences, ethics, bioinformatics and health economics, among others;
  - o Quantitative and qualitative research in medical education
  - Development/implementation, conduct of studies, data collection and/or analysis of new or existing data; may make intellectual contributions to multicenter studies
  - Development of new methods/technologies and/or novel applications of existing methods/technologies in basic science, clinical research, education, and social sciences and humanities
  - o Development of creative works such as poetry, prose, and original art
- Evidence of meaningful scholarship might come in the form of:
  - o Invited or competitive scholarly presentations
  - o Honors or recognitions for scholarly contributions

- o Publication in refereed journals or proceedings
- o Publication of books or chapters in edited volumes
- Citation of candidate's published work
- Grant/contract awards
- Ongoing research leading toward dissemination and peer review
- Op-Ed piece in community newspaper
- Published creative works such as poetry, prose, and original art
- Scholarship in the clinical arena may take varied forms:
  - Publication of first or second authorship of original research, reviews and/or chapters related to area of clinical expertise; may include publication of research that assesses the effectiveness of innovative approaches to clinical care
  - Development of guidelines and/or protocols for patient treatment or delivery of care that are adopted locally c. Commentary written about the health care field.

# • Examples of Scholarship Across Ranks:

- Affiliated Clinical Instructor: Individuals at this rank are not required to have a scholarly record. If the individual plans to seek rank of full professor the following guidelines apply.
- Affiliated Assistant Clinical Professor: The Affiliated Assistant Clinical Professor begins the development of a scholarly voice and should provide evidence of scholarly work that has or will be disseminated and peer reviewed. Work should begin to be disseminated through scholarly presentations to the college and at local and national conferences. The faculty member should be beginning the process of publication in peer-reviewed journals. The faculty member may seek initial funding through small grants from foundations and national agencies.
- Affiliated Associate Clinical Professor: The Affiliated Associate Clinical Professor may have a program of scholarship that is focused and shows sustained productivity. The faculty member should be publishing in peerreviewed journals. There should have regular presentations at national and international meetings within the discipline and/or in medical education. The Affiliated Associate Clinical Professor will continue to apply for funding from granting agencies. The scholarly program should begin to broaden and may include collaborations with colleagues.
- Affiliated Clinical Professor: The Affiliated Clinical Professor must show excellence and leadership in a scholarly program that has shown an increase in depth and breadth. The scholarship should show a continued strong focus with an increase in the complexity of the research. The Full Affiliated Clinical Professor will have a national and international reputation as evidenced by presentation at national and international conferences. This faculty member is committed to training futures scholars through undergraduate and graduate programs and will also be serving as a mentor to junior faculty. These

accomplishments are clear from evaluations from peers within the UNE COM faculty as well as from the peers in the faculty's discipline outside of UNE.

# **Faculty Evaluation**

UNE COM department chairs are required to conduct annual performance evaluations of faculty members. Annual performance evaluations should include discussion of the chair's expectations of faculty performance including expectations for the coming year and an assessment for the preceding year.

# **Faculty Recognition**

Faculty achievements are recognized through awards in which biomedical and clinical faculty are selected annually by the students in recognition of their excellence in teaching.

# **COM Phased Retirement Policy**

Phased retirement is a departmental issue and thus will be considered by the faculty member, his or her department chair and the dean.

Full-time, tenured faculty must submit a written request to begin a phased retirement no less than 1 year prior to the intended date on onset.

The faculty member will receive a contract for a defined period (maximum of three years), during which time the faculty member will work 50% or less time. The faculty member will give up tenure as of the start date of that contract. Contracts may be renegotiated at the department level at the end of contract period for an extension.

During the contracted time, annual review on the faculty member's performance will still be done. The faculty member's phased retirement contract will specify percent effort or actual time to be dedicated to teaching, service, scholarship, etc.

The process of phased retirement is coupled to a tenure-track replacement hire for the semi-vacated position. The salary "saved" from phased retirement faculty will stay within the department budget and defray costs of the tenure track replacement.

## **Peer Evaluation of Teaching**

#### Goal

The goal of this policy is to provide a routine process for the peer evaluation of teaching for use during the annual review and reappointment, promotion and tenure.

The establishment of this policy mainly aims at creating a community of learners that nurtures collaboration, teamwork, self-improvement and reflection.

## **Policy**

Nota bene: Reviewers are not eligible to review the same faculty member twice in the same academic year or in two consecutive academic years.

For the <u>faculty observer/evaluator</u>, it is important to:

- Review a list of representative range of lectures/class activities taught by a faculty member (provided by the faculty member)
- Review the different modalities used (small group, large group)
- Review the peer evaluation rubric with the faculty member prior to observation and let them know about the time of their attendance.
- Provide a post-observation discussion, as soon as practical after the observation to review the peer evaluation rubric and comments with the faculty member.
- Sign the observation form (together with faculty under peer evaluation).
- Enter the observation form in his/her portfolio as proof of providing the evaluation. This will be part of the PRA to discuss with the department chair during the annual review.

For the faculty under peer evaluation, it is important to:

- Provide the chair with the list of lectures/class activities and whether they are in a large or small group format.
- Recommend one or more lecture/class activity that they believe would be suitable for observation and peer evaluation at the start of each academic year, and these recommendations will be considered when making review assignments.
- At the start of each academic year, faculty members may provide a list of three eligible reviewers (Eligibility criteria specific to each rank are described below).
  - If such a list is provided, the department chair will select one reviewer from that list to provide the peer evaluations. If no list is provided, the department chair will select from among the full set of eligible reviewers.
- Review the peer evaluation rubric and comments with the faculty evaluator after the observation.
- Sign the observation form (together with faculty observer).
- Enter the observation form in his/her portfolio for RPT and discuss it with the chair during the annual review.
- Candidates for promotion or tenure will make sure they have their signed peer evaluation forms in their portfolios.
- The department chair will balance these criteria when making reviewing assignments.

## **Eligibility Criteria for Evaluation**

## **Assistant Professors**

- Assistant professors will be peer reviewed once each academic year. The first review
  will be scheduled in the faculty member's second semester of teaching (Fall or Spring).
- Eligible reviewers are Associate Professors or Professors.
- Sub-College RPT Committees should find at least 2 signed observation forms in the portfolio for candidates for promotion to Associate.

## **Associate Professors**

- Associate Professors will be peer reviewed in the first year at that rank and in every second academic year following.
- Eligible reviewers are Professors.
- Sub-College RPT Committees should find at least 3 signed observation forms in the portfolio for candidates for promotion to Professor.

## **Professors**

- Professors will be evaluated in their first year at that rank and in every fourth subsequent year.
- Eligible reviewers are other Professors.

# **Communication Regarding Peer Evaluation Process**

- Based on the eligibility criteria and the list of reviewers provided by the faculty, at the
  beginning of the fall semester, the Department Chair will assign to each faculty his/her
  faculty observer/evaluator. The chair will email the peer evaluation schedule to the
  faculty.
- In this email, the chair will remind the faculty that they need to communicate regarding the best time to conduct peer evaluation.
- The email should also include a link to the departmental Peer Evaluation Policy document (link) for the guidelines on what to consider in peer evaluations.
- Email reminders to faculty from the Department Chair regarding the peer evaluation due date (mid-March).
- Faculty being reviewed and reviewers are asked to submit a signed copy of the peer evaluation to the Department Chair.

## **Procedures Pre-Observation Preparation**

All faculty will attend the workshop: "How to give and receive peer evaluation of teaching". This will include reviewing the rubric or observation form outlining issues that merit consideration during a review.