Pearls and Pitfalls of the A&P Process

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Professor and Nelson Chair in Urology
A&P Council Chair, 2012-2017*
A&P Council

> Composed of Professors including 4 Chairs
> Trained reviewers*
  – Ensure consistency of application of criteria across entire School of Medicine
  – Protect faculty from unfair treatment by own Departments
> Advocates for the faculty member!

* they find stuff that your own Dept A&P Committee will miss!
Heterogeneity: A Challenge to SOM A&P

- 32 Departments
- 32Δ Criteria
- 32Δ Packets
- 32Δ Chair Letters

1 SOM A&P Guidelines
1 SOM A&P Review Template
1 SOM A&P Chair Letter Template

UNIVERSITY of WASHINGTON
The Tension

The Faculty Code

✓ “Excellence in Scholarship and Teaching”
✓ Quality v. Quantity
✓ Overall impact

The Criteria

✓ Variation across units and departments
✓ Tendency to focus on counting instead of assessment

Harmonization effort: The SOM A&P Guide.
Basic Statistics

> Council reviews 120 promotions annually
> Vast majority of portfolios are **strong**
  – 26% “Slam Dunks”
  – 66% ”Routine”
  – 7% Challenge
> The best can be summed up in 3-4 words!
  - Wraparound Man
  - Chief Nephron
  - “Decision Making in Flying Insects”
“Where are you? Where is the goal line? How fast are you moving towards it?”

Robert Stacey
Dean of the College of Arts and Science
Mandatory vs. Non Mandatory

“The bar is the bar”

(The bar is continually moving)
SOM A&P Reviewer Template

Candidate name: 
Department: 
Division: 
Appointment or promotion to: 

Criteria: 

Faculty vote: 
(Comment only if there were a large number [such as >10%] of negative votes.)

Educational and professional background: 
(Comment only if there something in the CV that needs clarification.)

Research: 
(Brief comment on research productivity, grant funding or other research activity)

Teaching: 
(Brief comment on teaching activities, evaluations and teaching leadership positions)

Clinical: 
(Brief comment on clinical activities, clinical leadership positions)

Service: 
(Brief comment on institutional, regional and national service activities)

Letters of Evaluation: 
(Comment only on any evaluations that are not strongly supportive.)

Professionalism: 
(Brief comment on professionalism)

Assessment and recommendation: 
(Does the candidate meet departmental criteria for appointment/promotion? Do you recommend appointment/promotion?)

“Memorable phrase”: 

School of Medicine
Appointments & Promotions Council

UW Medicine
UW SCHOOL OF MEDICINE

Faculty Vote - IMPORTANT

Forms of Scholarship ***

Teaching excellence

Clinical - professionalism

REFEREE LETTERS

UNIVERSITY of WASHINGTON
Do you have to be equally excellent in all domains?

No!

> It depends on your track, activity profile and where you are spending time

> If you spend 90% of time in research, substantial productivity will be looked for

> If you spend 90% of time teaching fellows, and almost no time with residents ...

> Activity profile can be explained in SA, Chair’s letter
Scholarship

- Scholarship of Discovery
- Scholarship of Integration
- Scholarship of Teaching
- Scholarship of Application

IMPEDANCE MATCHING
PITFALLS

> “Tenure Surge” before promotion
> *More than one* unfavorable referee letter
> “No” votes in the Department*
> Insufficient teaching contact/evaluations
> Mistreatment of students/trainees/staff
> Unexplained variation in ... anything
> *(Unconventional forms of scholarship/teaching)*
> Failure to demonstrate independence

* understand voting dynamics/blocks in your own Department!
Respect Scores

Important potential signal regarding professionalism

> Not normally distributed
> (Not validated)

Observations of Professional Conduct (Required by GME)

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>N/A</th>
<th>Avg:</th>
<th>Std:</th>
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</thead>
<tbody>
<tr>
<td>I was treated with respect by this</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>100.00%</td>
<td></td>
<td>5.00</td>
<td>0.0</td>
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<tr>
<td>individual.*</td>
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<tr>
<td>I observed others (students, residents,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>11.11%</td>
<td></td>
<td>4.78</td>
<td>0.6</td>
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<tr>
<td>staff, patients) being treated with</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>88.89%</td>
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<td>respect by this individual.*</td>
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</table>
Wider than expected variation in annual assessment of teaching by residents

Insert Departmental Mean Scores for Comparison

<table>
<thead>
<tr>
<th></th>
<th>Below Expectations</th>
<th>Meets Expectations</th>
<th>Exceeds Expectations</th>
<th>Insufficient contact to Judge</th>
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</thead>
<tbody>
<tr>
<td>1. Receptivity to questions*</td>
<td></td>
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<td>2. Value to conferences*</td>
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<td>3. Ability to teach judgement*</td>
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<td>4. Ability to teach surgical or research technique*</td>
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<tr>
<td>5. Delegates responsibility appropriately for the following:*</td>
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<tr>
<td>a. Medical management*</td>
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<tr>
<td>b. Delegates surgical management responsibility appropriately*</td>
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<tr>
<td>6. Ability to motivate*</td>
<td></td>
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<tr>
<td>7. Interest in teaching*</td>
<td></td>
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<tr>
<td>8. Overall value to residency program*</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | Avg | Std |
|-------------------------------|-----------------|-----------------|---------------------|-----------------------------|
| Below Expectations            | 14.29%          |                 | 14.29%              | 14.29%                      |
| Meets Expectations            |                 | 85.71%          |                     | 85.71%                      |
| Exceeds Expectations          |                 | 28.57%          | 71.43%              |                             |
| Insufficient contact to Judge |                 | 85.71%          |                     |                             |

<table>
<thead>
<tr>
<th>Avg</th>
<th>Std</th>
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<tbody>
<tr>
<td>8.71</td>
<td>0.7</td>
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<tr>
<td>8.71</td>
<td>0.7</td>
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<tr>
<td>8.71</td>
<td>0.5</td>
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<tr>
<td>8.43</td>
<td>0.7</td>
</tr>
<tr>
<td>8.57</td>
<td>0.7</td>
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<tr>
<td>8.71</td>
<td>0.7</td>
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<tr>
<td>8.57</td>
<td>0.7</td>
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<td>0.7</td>
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<tr>
<td>8.86</td>
<td>0.3</td>
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Use the self assessment to explain ...

> *Unexplained* poor teaching evaluations

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<th>AY15</th>
<th>AY16</th>
<th>AY17</th>
<th>AY18</th>
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<tbody>
<tr>
<td>Interest in teaching</td>
<td>6.18</td>
<td>7.46</td>
<td>7.42</td>
<td>7.4</td>
<td>7.64</td>
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<tr>
<td>Ability to motivate</td>
<td>5.09</td>
<td>7.38</td>
<td>7.92</td>
<td>7.69</td>
<td>7.93</td>
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<tr>
<td>Overall Value to Program</td>
<td>5.36</td>
<td>7.69</td>
<td>7.83</td>
<td>7.92</td>
<td>8.07</td>
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</table>
Forms of Scholarship

“Some research articles included in the candidate’s c.v. do not fall in customary categories (Conference Proceedings (BIME), Technical Documents (GH))”

> A&P Council recognizes these alternative types of publication but must be informed in the Chair’s letter (or Self Assessment) if these materials are considered equivalent to peer reviewed manuscripts.
Demonstrating Independence

- Required in some but not all pathways/tracks
- Tension between “independence” and “value to the program/laboratory/collaboration”
- Changing paradigm of interdisciplinary work and “team science” make attribution of effort and the assignment of an individual’s contribution more difficult
- Clear enunciation of the candidate’s contribution and impact on a scientific program is essential
- This should take place in the Self Assessment
PERSPECTIVES

> Vast majority of candidates “sail through”
> Spend time on the self assessment
  – Be clear about your strengths
  – Acknowledge (major) weaknesses
  – Include something about your future plans
> Promotion is institution’s affirmation of your long term value and potential
Assistant Professor
Sneeches

Associate Professor
Sneeches

Bruce Ransom M.D., Ph.D.
Chair Emeritus, Neurology
Assistant Professor Sneathes

Associate Professor Sneathes

Bruce Ransom M.D., Ph.D. Chair Emeritus, Neurology