THE TEACHING PORTFOLIO

A GUIDE FOR FACULTY AND STAFF

All faculty on the Clinician/Scholar and Physician/Scientist pathways (regular track) are required to submit a Teaching Portfolio (Portfolio) as part of their promotional materials. While the Portfolio is specific to the individual faculty member; there are certain requirements for the structure and content of the Portfolio documentation, which have been established by the Department of Medicine, the School of Medicine and the Provost. The purpose of this Guide is to inform faculty and staff how to create an outstanding Portfolio.

What is a Teaching Portfolio?

A Teaching Portfolio is a collection of documents that describe the teaching credentials and experiences of a faculty member as well as the scope and quality of their teaching proficiency. The Portfolio provides evidence of teaching ability and describes major strengths and teaching achievements. The Portfolio may also offer a look at development and improvement over time, which is often a consideration of the Appointment & Promotion Committees.

A Teaching Portfolio for School of Medicine faculty is comprised of 5 sections:

Section A: The Portfolio Outline provides information on the faculty member's teaching philosophy, proficiency and achievements. A list of suggested items for this Outline has been developed to assist faculty with the presentation of their teaching credentials. The outline (template) for Clinician/Scholars and Physician/Scientists may be found here: https://medicine.uw.edu/faculty/academic-human-resources/teaching-portfolio

Section B: Trainee evaluations – medical students, residents, fellows and graduate students.

Section C: Peer teaching evaluations.

Section D: Peer clinical evaluations.

Section E: Letters and other teaching materials selected by the faculty member. (Optional)

Review and Evaluation of the Portfolio: When a faculty member is proposed for promotion by their Division, certain promotional materials are required for submission to the Chair of the Department, including a Basic Packet (letters of support, self-assessment, CV), a Teaching Portfolio, and Reprints.

The Basic Packet is prepared by the Division on behalf of the faculty member; the Portfolio is created by the faculty member with the assistance of the Division. Upon receipt of the Portfolio in the Chair's office, a *review* of the Portfolio is conducted to ensure that all of the required documentation is included and that the Portfolio is structured appropriately. The Portfolio is then used (along with the Basic Packet) by the Department of Medicine Appointments & Promotions Committee to *evaluate* whether the faculty member meets the criteria for promotion. If the Department votes to send the faculty member forward for promotion, the Portfolio is then forwarded to the School of Medicine where it undergoes further *review* by the School and then *evaluation* by the School Appointments & Promotions Council.

During the *review* and *evaluation* processes, additional information may be requested from the faculty member and/or the Division. These requests may impact decision-making so responding to the requests as soon as possible is recommended.

General Guidelines

Start now. A faculty member should be provided with this Guide at the time of their appointment as Assistant Professor or Associate Professor so that no time is lost in gathering documentation for the

Portfolio. Many of the possible components of the Portfolio are difficult, if not impossible, to obtain after time has passed. Collecting as you go will make assembling the final Portfolio much easier. While student and resident evaluations should be obtained at the time the Portfolio is being prepared, Peer (Faculty) Teaching Evaluations should be gathered at the time of a presentation or course and held in a file until they are needed. Divisions can assist the faculty with obtaining Peer Teaching Evaluations by providing evaluations to hand out or establishing a system such as Catalyst for requesting evaluations. Peer Teaching evaluations are required for every year in rank at the Assistant Professor level and every three years in rank for Associate Professors and must include evaluations for the year promotion is being proposed. A minimum of two per year is preferred by the School. Ideally, Clinician/Scholars will have greater than two per year.

Documentation – quantity vs quality. How much documentation should be in a Portfolio? "More is better" is true for the evaluation sections. However, more is NOT better when selecting documents for the Other Materials Section. Be mindful as to whether a document actually adds value to the Portfolio. A relatively small set of well-chosen documents is more effective than a large, unfiltered collection of miscellaneous documents. For example, generally speaking, thank you emails for attending meetings, or letters from patients, etc. would likely not provide members of the A&P Committee/A&P Council with meaningful information regarding your teaching and therefore perhaps should not be included. These should be reviewed carefully before including in the Portfolio.

It is preferable not to include items such as entire slide presentations, course syllabi, books, etc. Because of limited time of the committee members who must evaluate a huge number of packets, it is unlikely time will be spent reading these materials. Further, including these very large documents make the Portfolio too large.

Do not duplicate CV in the Portfolio. While certain elements of the CV may appear again in the Portfolio, a general rule of thumb is not to cut and paste portions of the CV into the Portfolio. Certain items in the Portfolio Outline do ask for lists, but make sure any duplicated information is relevant to the question and reflects **teaching** activities. For example, the Portfolio Outline requests information on Honors and Awards. Rather than cutting and pasting the entire list from your CV, select only those that are related to teaching.

The following statement should NEVER appear in the Portfolio: "Please Refer to my CV." It is awkward and time consuming for the committee members to go back and forth between documents and, in fact, the likelihood that they would take the time to do that is small given the number of packets they have to review.

Follow Current Instructions/Guidelines: The guidelines and requirements for creating a Teaching Portfolio often change from year to year. Therefore, it is good practice for faculty (and staff) to review the guidelines periodically so they remain on track for collecting documentation. When a faculty member learns they are being proposed for promotion, they should ALWAYS ensure that they have the most current guidelines. Note: Borrowing a recently promoted faculty member's Portfolio to look at may be somewhat helpful, but be aware that the guidelines will most likely have changed since that other Portfolio was submitted.

Step-by-Step Guidelines. Please see Sample Portfolios (below) for specific guidelines on how to create a Teaching Portfolio.

SAMPLE PORTFOLIO – C/S

Faculty members may design their Cover Sheet(s) to suit their individual style, i.e. type and size of font, layout, etc. but the Cover Sheet(s) should include the following information: Name, rank, division/department, pathway, and current year. Below is an example of an Overall Cover Sheet.:

TEACHING PORTFOLIO

Mary Jo Pasternak, M.D.

Assistant Professor

Department of Medicine/Division of Cardiology

Clinician/Scholar Pathway

2016

Section A: Teaching Portfolio Outline

I. Executive Summary - Required

A one page "executive summary" should be placed in the front of the portfolio (easily readable by a review committee). The executive summary should highlight what you view as key or major teaching contributions in your portfolio. The executive summary is an excellent venue for describing your educational contributions that might not be evident in your curriculum vitae (e.g., your role in developing an educational program over time).

Include a table of contents for your Teaching Portfolio Outline (Section A – Items I through X).

Include all sections in the Table of Contents but do not number the pages of Sections B through E (Evaluations and Other Materials). Materials are rearranged, removed or added often during the review of the Portfolio by the Chair's office, so having page numbers becomes problematic. A sample Table of Contents follows.

TABLE OF CONTENTS

Page No.

SECTION E: Other Materials (if applicable)

II. Personal Information – Required
- Name and contact information
- Current position held (academic rank)
- Subject area, specialties
- Institutional affiliation
- Time course (years) of activities included
    - *(Start date of timeline should be appointment date as Assistant or Associate Professor or date of promotion to Associate Professor)*
- Short work-history

III. Teaching Philosophy - Required (maximum one page)
- Express your personal theory or philosophy of teaching and learning
- Include reflections about teacher – learner interactions
- Delineate clearly your educational goals and your role as a teacher
- Consider connecting your personal statements with your portfolio contents

IV. Teaching activities and your role as an educator – Required

For <u>Clinical Teaching Activities</u>: Include number of weeks per year on clinical service, i.e., weeks per year of inpatient attending, number of half-day clinics (include sites of practice). List by level (fellows, residents, medical students: and other students, such as allied health professionals).

For <u>Lecture Activities</u>: List each lecture including date/topic/course title, and level of audience (housestaff, CME, etc.)

Direct teaching: lectures, small group teaching, Problem Based Learning, grand rounds, laboratory and research based teaching, supervision of clinical activities of students, residents, fellows, procedural skills teaching, preceptorships, etc. List by level (fellows, residents, medical students: and other students, such as allied health professionals).

Evidence to support teaching excellence:
- Instructional materials: List and describe handouts, media, interactive material used.
- Quality: who do you teach, how much, and what do you teach?
- Quality: Teaching rating with comparison data for all educational activities cited
- Documentation (evaluations should be placed at the end of section A – in sections B, C and D)

Curriculum Development: describe innovative educational activities you created or implemented. **(Optional, but helpful)**

- Examples: courses, clerkships, faculty development, lab manuals, web-based materials, clinical cases, community education, etc.
- Evidence to support excellence:
    - Instructional materials: Chronological vs. topic-focused list of activities for each section
    - List materials and products developed
- Documentation

- - Specifics of activities: goals of the curriculum; targeted audience; duration; design
  - Evaluation
  - Quality: evidence of effectiveness and improvement in quality of teaching:
    - Learner ratings
    - Impact on learning: examinations, scores, direct observation of learner performance
    - If possible: graphic display of improvement over time (e.g., evaluations of a course or your teaching)

Educational Scholarship: didactic materials you produced and published to disseminate your medical education experience and expertise.
- Documentation:
  - Peer-reviewed educational publications (e.g., MedEdPORTAL, AAMC)
  - List of presentations given at local/national/international meetings
  - List peer-reviewed educational materials you developed, such as course syllabi, book chapters, study guides, etc. and state the distribution of these materials (used locally, regionally, and nationally
  - Website addresses for web-based materials
- Invitations to present your educational material in another department or medical school and evidence of how the material was used by these institutions

V. Professional Development in Education - Required
- Describe your participation as an educator or facilitator in programs related to medical education: workshops, seminars, CME, Teaching Scholars
- Describe the impact of these activities on your professional development
- Describe activities that demonstrate your connection to a community of educators

VI. Regional/National/International Recognition - Required
Describe your participation in regional, national or international meetings or committees: workshops, seminars, oral or written board examiner, reviewer of other training programs or training grants

VII. Mentoring (# 1 required if your work involved mentoring, # 2-7 optional)
- Provide a list of mentees with description and duration of mentoring activities, using the NIH Training Grant Template below to report them

Past / Current Trainee	Trainee Name (Where Training Occurred)	Pre / Post Level	Training Period	Prior Academic Degree(s)	Prior Academic Degree Year(s)	Prior Academic Degree Institution (s)	Title of Research Project	Current Position of Past Trainees / Source of Support of Current Trainees
Past	Schwartz, A. (Cornell)	Pre	94-99	BA	94	U. of WI	Role of Transcription Factor X in Synaptic Plasticity	Asst. Scientist, Scripps Research Foundation

Mentoring Table Instructions: *List all past and current predoctoral and postdoctoral trainees for whom you are/were the mentor. Indicate in parentheses under the trainee name where the pre- or postdoctoral training occurred, if at a different institution. Exclude medical interns and residents unless they are heavily engaged in laboratory research. For each trainee indicate: whether at the predoctoral or postdoctoral level; the training period; previous institution, degree, and year awarded prior to entry into training; title*

of the research project; and for past students, their current positions or for current students, their source of support.

- Describe the interaction with the mentees including career planning, mentoring and coaching through personal or academic difficulties or counseling to change attitudes/behaviors which impacted their professional development.
- Provide information about outcomes (letters from mentees summarizing the mentoring experience and the impact it had on their professional development)
- Description of mentees current medical careers (i.e., academic positions, clinical research, clinical practice in remote or underserved populations, volunteering for medical groups abroad, etc.)
- Discuss projects you conducted with advisees and students
- List your advisees' presentations and publications, awards or grants received
- Letters; minutes from Residency Training Committee meetings; newsletters

VIII. Educational Administration and Leadership - Optional (Include only if relevant to your curriculum vitae)
- Specify and describe relevant leadership positions held: course director, residency or fellowship program director, committee participation or chairmanship, etc
- List each area in terms of Graduate School, School of Medicine or Department
- List committee memberships, tasks and goals
- Educational grants: include source, amount and number of years of funding
- For Program Director: include achievements in accreditation, training

IX. Honors and Awards - Optional
List recognition as an educator, describe where necessary. (*Nominations* for teaching awards may be included if formally acknowledged by award committee.)

X. Long-Term Goals - Optional
"Reflection-in-action" including future projects, new teaching method to be learned, ideas to be investigated, plans for publication and dissemination.

SECTION B:

STUDENT, RESIDENT AND FELLOW EVALUATIONS

This section should include the following:

> *Medical Student Evaluations from eValue*

> *Resident Evaluations from Med-Hub*

> *Fellow Evaluations (if applicable) from Med-Hub or specific Division forms*

> *Research Mentor Evaluations from trainees (non-faculty)*

> > *EValue reports should be included for each year in rank and the reports should include the period of evaluation*

> > *Med-Hub reports should be included for each year in rank (not cumulative). The current year's reports should be included but must be requested by Division only. For example, if the Portfolio is being prepared in the Spring of 2017, the Division (not the faculty member) should request the evaluations for the 2016-2017 period.*

> > *If individual fellow evaluations are obtained other than from Med-Hub, they should be summarized by academic year. Individual evaluations should not be included in the Portfolio.*

> > *Only evaluations or letters with evaluative scores should be included in this section. If the faculty member wishes to include thank you letters for presentations to housestaff, etc. that do not include scores, those letters should be placed in the Other Materials Section.*

Arrange all evaluations in this section in chronological order (oldest to most recent) regardless of the type of report, i.e. eValue, Med-Hub, HuBio/MedSci for 2017 would appear, then eValue, Med-Hub, HuBio/MedSci for 2018, etc. Evaluations are tracked by the reviewers for each year in rank so keeping each year's evaluations together assists the reviewers, especially at the School and Provost level.

SECTION C

PEER TEACHING EVALUATIONS

Peer Teaching Evaluations are the most difficult component of the Teaching Portfolio. The School and the Provost require evaluations from peers (other faculty) for every year in rank for Assistant Professors (promoting to Associate Professor) and every 3 years in rank for Associate Professors (promoting to full Professor). Clinician/Scholars should strive for multiple evaluations each year while Physician/Scientists should have at least 2 for each year being reported.

A faculty member must be proactive on their own behalf for a) ensuring that they schedule teaching situations that will meet this requirement, and b) that they gather appropriate evaluations at the time of a talk or presentation. Gathering peer teaching evaluations should begin at the time of appointment to Assistant or Associate Professor and continue until promotion to Professor.*

Note: Even though evidence of peer teaching is required only every 3 years while in rank as an Associate Professor, the Department of Medicine recommends collecting evaluations during each year in rank. It is difficult to track when only gathering evaluations every two years and since they must be included for the year one is proposed for promotion, the potential for not having them for that year is eliminated. Further, if two years are skipped and then there are no situations for gathering evaluations the next year; that would be problematic. There is no maximum number of peer teaching evaluations one can include in the Portfolio, so just get them for every year.

SECTION D

PEER CLINICAL EVALUATIONS

*Faculty who are clinically active must be evaluated by their peers (other faculty), at a minimum, in Years 2 and 5 of their appointment and every 5 years thereafter. These evaluations will be coordinated by Division staff. **Additionally**, there should be evaluations for the year the faculty is put forward for promotion. For example, an assistant professor appointed in 2013 might have had evaluations in 2014 and not be scheduled for further evaluations until 2018. However, if they are going forward in 2017 (for promotion effective 2018), they must have evaluations for 2017. Further, if a faculty member is not successful in being promoted and will go forward again the following year, new peer clinical evaluations will need to be done for that year.*

Evaluations should be summarized each time they are collected using the Department's standard forms and only the summary is included in the Teaching Portfolio.

Teaching Peer Evaluations Cover Sheet

Name:

Appointment date:

YEAR	DATES	# of evaluations	# of talks

Total # of evaluations:

Average Overall Teaching Effectiveness:

SECTION E

OTHER MATERIALS

This section includes documents that say something special about the faculty member but do not fit into the previous 3 categories. Examples of items that might be included here are:

- Community education – thank you letters for your participation
- Allied health professional evaluations, in summary form. For example, evaluations from a course for nurses would be placed here rather than Section B. Summarize the evaluations and do not include individual evaluations.
- Letters critically evaluating teaching effectiveness that don't provide actual scores
- Slide presentations, handouts, media and interactive material. Note previous guideline regarding inclusion of bulky documents that are unlikely to get read due to time constraints of the Committee members. These types of documents should be held to a minimum.

Arrange all documents in chronological order within the Section.

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TEACHING PORTFOLIO

Alan Smythe, M.D.

Assistant Professor

Department of Medicine/Division of Cardiology

Physician/Scientist Pathway

2016

Revised April 2017

Section A: Teaching Portfolio Outline

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A faculty member must be proactive on their own behalf for a) ensuring that they schedule teaching situations that will meet this requirement, and b) that they gather appropriate evaluations at the time of a talk or presentation. Gathering peer teaching evaluations should begin at the time of appointment to Assistant or Associate Professor and continue until promotion to Professor.

It can be helpful to include an overall summary of the Peer Teaching Evaluations to follow immediately after this cover sheet. This summary will show each year in rank and the number of evaluations for each year. If there are none, that should be indicated. This helps the School to know that there were none for that year.

Note: Even though evidence of peer teaching is required only every 3 years while in rank as an Associate Professor, the Department of Medicine recommends collecting evaluations during each year in rank. It is difficult to track when only gathering evaluations every two years and since they must be included for the year one is proposed for promotion, the potential for not having them for that year is eliminated. Further, if two years are skipped and then there are no situations for gathering evaluations the next year; that would be problematic. There is no maximum number of peer teaching evaluations one can include in the Portfolio, so just get them for every year.

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If the faculty member does not see patients, please include this cover sheet and make that note on the cover sheet.

Teaching Peer Evaluations Cover Sheet

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Appointment date:

YEAR	DATES	# of evaluations	# of talks

Total # of evaluations:

Average Overall Teaching Effectiveness:

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