

Faculty Appointments and Promotions Guide

University of Washington
School of Medicine



UW Medicine

Revised August 2022

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Introduction

The mission of UW Medicine is to improve the health of the public, and we seek to advance that mission through excellence in our academic activities of teaching, scholarship, and professional service. The School of Medicine at the University of Washington is strongly committed to excellence in all components of our academic activities and to creating a transparent process for promotion of meritorious faculty members. This online document is intended as a resource for regular, research and professorial teaching faculty to enhance their understanding of their School of Medicine appointments and the promotion processes. Familiarity with and understanding of promotion criteria specific to each department are important for all faculty members, including leaders responsible for the promotion process. Faculty are strongly encouraged also to review relevant sections of the [Faculty Code](#), which forms the basis for departmental appointment and promotion criteria.

The UW School of Medicine comprises 31 basic science and clinical departments, representing a wide array of disciplines and academic responsibilities. For this reason, evaluation of excellence and accomplishment is expected to vary somewhat among departments. To foster innovation and creativity, flexibility is encouraged in how contributions to scholarship, teaching, and service are evaluated and weighted. This document will provide examples of a range of criteria by which academic excellence can be demonstrated. Each department has developed specific appointment and promotion criteria that describe how its faculty will be evaluated. These criteria have been approved by the School of Medicine and serve as the basis for the School of Medicine's Council on Appointments and Promotions' review of the appropriateness of academic appointments and advancement. Department-specific criteria are provided to faculty at the time of

appointment and should guide individuals as they assess their progress toward reappointment and promotion.

Recognizing that each faculty member has a unique professional activity profile and assigned responsibilities in scholarship, teaching and/or professional service, the relative importance of these activities as criteria for appointment and promotion should be aligned with the relative time commitment to each of these activities. Expectations regarding faculty effort and criteria for promotion should be aligned. These expectations should be articulated clearly in the letter of appointment. Letters documenting academic assessments (completed annually for assistant professors) should indicate any change in professional activities and indicate if the faculty member is appropriately advancing toward promotion in each area of responsibility. While successful promotion is ultimately the responsibility of the individual faculty member, departments should consider various ways to provide mentorship to assist faculty in reaching their full potential.

UW Medicine is committed to excellence in professional conduct, including integrity, respect, compassion, accountability, collegiality, and altruism. Faculty members in the School of Medicine are expected to demonstrate professionalism in all aspects of their work. Evaluation of professional conduct will be a component of departmental academic assessments and will be considered in the promotion process. At the University of Washington, diversity is integral to excellence. We value and honor diverse experiences and perspectives, strive to create welcoming and respectful learning environments, and promote access, opportunity and justice for all. Accordingly, the University of Washington and the School of Medicine are committed to supporting activities that enhance diversity, equity, and inclusion. As stated in the UW faculty code ([Chapter 24, Section 24-32](#)), "In accord with the University's expressed commitment to excellence and equity, any contributions in scholarship and research, teaching, and service that address diversity and equal opportunity shall be included and considered among the professional and scholarly qualifications for appointment and promotion outlined below." While not all faculty need to make concrete and demonstrable contributions in this regard in order to be appointed and promoted, those faculty who do so should be recognized for these contributions, and such contributions should be included in their portfolio

Regular, Research and Professorial Teaching Faculty Academic Appointments

The University of Washington has well-defined academic tracks, ranks, and titles. A description of the ranks, titles, duties and duration of the appointments for regular, research, and professorial teaching faculty can be viewed [here](#).

The appointment process and definition of academic ranks and titles can also be found in the Faculty Code, [Chapter 24 Appointment and Promotion of Faculty Members, Section 24-34 Qualifications for Appointment at Specific Ranks and Titles](#).

Both basic science and clinical departments recruit individuals through a national search as regular, research or professorial teaching faculty. Research faculty do not have clinical responsibilities and, unlike regular or professorial teaching faculty, may or may not have formal teaching responsibilities.

Secondary Faculty Appointments

A. Adjunct Appointments

An adjunct appointment is made to a regular, research or professorial teaching faculty member already holding a primary appointment in another UW unit (e.g., another department, school or college). This is an annual appointment that recognizes the contributions of a member of the faculty to the secondary unit.

B. Joint Appointments

A joint appointment recognizes a faculty member's long-term commitment to, and participation in, two or more UW departments. A primary department is designated at the time of the appointment. A faculty member who has the privilege of participation in governance and voting in the primary department may choose to participate or not to participate in governance and voting in the secondary department. A joint appointment may be discontinued only with the concurrence of the faculty member and the appointing departments.

Departmental Assessment of Progress

A. Yearly Activity Report

The Faculty Code requires departments to establish a format for faculty members to write an annual report of their activities to the chair. More information can be found in [Section 24-57 Procedural Safeguards for Promotion, Merit-Based Salary, and Tenure Considerations, Part B](#), of the Faculty Code.

B. Regular Conference

The Faculty Code requires department chairs to meet on a regular basis with each regular research and professorial teaching faculty member. More information can be found in [Section 24-57 Procedural Safeguards for Promotion, Merit-Based Salary, and Tenure Considerations, Part C](#), of the Faculty Code.

In divisionalized departments, the general practice in the School of Medicine has been to allow the delegation of the department chairs' responsibility for the regular conference to the division heads.

Each year the chair (or division head, if appropriate) is expected to confer individually with assistant professors, research assistant professors, and teaching assistant professors. The chair (or division head) is expected to confer individually with the associate professors at least every two years and with the professors at least every three years, including those with research and professorial teaching titles. The purpose of the regular conference is to help individual faculty members plan and document their career goals. While the documentation of those goals will be part of the faculty member's record for subsequent determinations of merit, the regular conference should be distinct from the merit review.

At each such conference, the chair, or division head, and the faculty member are expected to discuss the following:

- The department's present needs and goals with respect to the department's academic activities (including teaching, scholarship, and professional service) and the faculty member's individual activity profile including active teaching, scholarship, and service responsibilities and accomplishments.
- Shared goals for the faculty member's teaching, scholarship and professional service in the forthcoming year (or years, as appropriate) in keeping with the department's needs and goals for the same period.
- A shared strategy for achieving those goals.

- Assessment of professionalism that may be informed by feedback from students, trainees, patients, peers, and colleagues

The chair or division head and the faculty member should discuss and identify any specific duties and responsibilities expected of, and resources available to, the faculty member during the coming year(s), taking into account the academic functions described in the Faculty Code [Section 24-32](#). The chair or division head should make specific suggestions, as necessary, to improve or aid the faculty member's work. A summary of this meeting should be written by the chair or division head to the individual faculty member.

Academic Calendar for Reappointment and Promotion

Appointments and reappointments follow timelines established in the faculty code. These timelines may be affected by what point in the academic calendar an individual joins the UW, leaves of absence, and part-time status. Assistant professors and research assistant professors are appointed on a mandatory promotion clock. Teaching assistant professors are not subject to a mandatory promotion clock.

A. Initial Appointment

The initial appointment term for full-time or part-time assistant professors and research assistant professors is three academic years. New appointees who have completed six months or more during the first academic year (appointed beginning July 1 through January 1), must count the full year towards the years allowed in the first three-year term. New appointees who have completed less than six months during the first academic year (appointed beginning January 2 through June 30) do not count the first academic year towards the years allowed in the initial three-year term.

B. Review for Appointment to a Second Term

Review for appointment to a second term takes place midway through the second academic year. The process and evaluations for reappointment are managed by the department, and departments are encouraged to guide individual faculty regarding department expectations. The length of the second term for full-time faculty is three academic years with mandatory review for promotion in the last year of the second appointment term (year six). The length of the second term for part-time faculty is based on appointment FTE and may range from three to six academic years with mandatory review for promotion in the last year of the second appointment term. Information on appointment terms for assistant professors and research assistant professors can be found in the Faculty Code, [Chapter 24 Appointment and Promotion of Faculty Members](#), [Section 24-41](#) and [Section 24-45](#).

C. Extensions of Time for Promotions

Extensions of the time required for promotion to associate professor or research associate professor may be considered on the basis of child-birth, adoption, foster parenting, or other exigencies. Information on related leave applications and extensions of time-in-rank can be found on the [Academic Human Resources website](#).

D. Postponement of Consideration for Promotion

Faculty members up for mandatory promotion should be reviewed by department eligible voting faculty for promotion **before** postponement is considered. Postponement should only be considered if the department voting faculty do not support mandatory promotion.

Postponement of consideration for promotion in the last year of the second appointment term may be considered under particular circumstances and follows the review process for mandatory promotions including the assembly of a package that is reviewed by the eligible voting faculty of the department, the School's Appointments and Promotions Council, the Dean, and the Provost. Mandatory review following postponement is a full review based on the faculty member's entire promotion package at that time.

E. Mandatory Promotions

Mandatory promotions are defined as those being considered for assistant professors (to associate professor) in the final year of the second appointment term (generally the sixth year at the assistant professor rank). If a negative decision is made for a mandatory promotion, the year of the negative decision must be followed by a terminal year of appointment.

F. Non-Mandatory Promotions

Non-mandatory promotions are those that take place prior to the sixth year at the assistant professor rank (promotion to associate professor rank), or involve promotion from an assistant teaching professor title (to associate teaching professor title), or promotion from associate professor rank (to professor rank) When considering when to put forth a faculty for consideration for non-mandatory promotion, the trajectory of the faculty member's accomplishments should be taken into consideration. Having adequate time to establish such a trajectory is particularly important for consideration for non-mandatory promotion from assistant to associate rank. It is helpful to reviewing bodies such as the School of Medicine's Faculty Council on Appointment and Promotions to see a description of the reason for the timing of non-mandatory promotion to associate professor or associate professor to professor, such as in the chair's letter and the candidate's self-assessment.

G. Non-Mandatory Promotions of Assistant Professors and Research Assistant Professors

- Non-Mandatory promotion of assistant professors occurs when an assistant professor comes up for promotion before the typical six-year mandatory promotion term
- As an equity issue for all School of Medicine faculty in the promotion process, department chairs and the Appointments and Promotions Council have a mutual understanding and agree on the following:
 - The most salient guiding principle for promotion is encapsulated in the [Faculty Code, section 24-54A](#) "promotion shall be based upon the attainment of the

qualifications and not upon length of service” and takes into account departmental criteria.

- As indicated above, “When considering when to put forth a faculty for consideration for non-mandatory promotion, the trajectory of the faculty member’s accomplishments should be taken into consideration. Having adequate time to establish such a trajectory is particularly important for consideration for non-mandatory promotion from assistant to associate rank.”
- Departments should have mechanisms in place to ensure that non-mandatory promotion of assistant professors is equitable and fair, so that qualified women and BIPOC faculty are as likely to be considered for non-mandatory promotion to associate professor as men and white faculty. Data gathering, periodic formal review, and feedback to the applicants are recommended.
- A number of assistant professors and research assistant professors come up for promotion before the six-year mark because they were approved for a clock stop but ended up not needing the additional time on their promotion clock. *We do not want faculty to be penalized for clock-stops. Rather, the spirit of the clock-stop should govern its relevance in non-mandatory promotions.*
 - If a faculty member has had at least six years in rank as an assistant professor or research assistant professor to prepare for promotion, their classification as non-mandatory is largely irrelevant to the A & P Council’s review. They should not have to demonstrate exceptional achievement if a clock-stop extended their time to mandatory promotion.
- ⊖ For faculty members who have been assistant professors at comparable academic institutions prior to joining University of Washington faculty, the candidate’s department and the School of Medicine A & P Council may consider total time in rank as assistant professor rather than only years in rank at UW.
- Chair’s promotion letters should include substantial detail about the rationale for non-mandatory promotion for assistant professors. As indicated above, “It is helpful to reviewing bodies such as the School of Medicine’s Faculty Council on Appointment and Promotions to see a description of the reason for the timing of non-mandatory promotion to associate professor or associate

professor to professor, such as in the Chair's letter and the candidate's self-assessment."

- Retention may be one but not the sole reason a department recommends non-mandatory promotion to associate professor. All reasons will be detailed in the Chair's letter

Tenure

A. Regular Faculty

Tenure at the University of Washington is defined as the right of a faculty member to hold his or her position without discriminatory reduction of salary, and not to suffer loss of such position, or discriminatory reduction of salary, except for the reasons and in the manner provided in the Faculty Code. Faculty appointed as assistant professor, tenure track, are proposed for tenure at the time of their proposed promotion to associate professor.

Individuals may also be appointed as associate professors with tenure or professors with tenure.

Granting of Tenure Policy and Procedure

- **Section 25-41 A.** Tenure should be granted to faculty members of such scholarly and professional character and qualifications that the University, so far as its resources permit, can justifiably undertake to employ them for the rest of their academic careers. Such a policy requires that the granting of tenure be considered carefully. It should be a specific act, even more significant than promotion in academic rank, which is exercised only after careful consideration of the candidate's scholarly and professional character and qualifications.

Most regular faculty in clinical departments in the School of Medicine are appointed Without Tenure By Reasons of Funding (WOT). Appointments WOT generally have the same rights and privileges as tenured faculty. Information about Tenure and appointments WOT can be found in the Faculty Code.

- [Tenure](#) (Faculty Code, Chapter 25 Tenure of the Faculty, Section 25-31. Definition of Tenure)
- [Appointments WOT](#) (Faculty Code, Chapter 24 Appointment and Promotion of Faculty Members, Section 24-40 Faculty Without Tenure By Reason of Funding (WOT))

WOT appointments are described in the Faculty Code, Chapter 24, Sections 24-40 and 24-41. Relevant sections are excerpted below:

- **Section 24-40. B.** Faculty appointed WOT do not hold tenure because all or part of his or her annual University-administered salary is derived from sources other than regularly appropriated state funds. Except for this distinction, WOT faculty members have the same rights, responsibilities, and obligations as tenure-track and tenured faculty members at those ranks. The description of their duties and qualifications for promotion and salary increases for reasons of merit are the same. Except for

termination of funding as defined in [Section 24-41, Subsection J](#), or for reasons of program elimination (see [Chapter 25, Section 25-52](#)), such faculty members are not subject to removal, or discriminatory reduction in salary, except for cause (see [Chapter 25, Section 25-51](#).)

- **Section 24-40. D.** Faculty members WOT have their salaries supported from a variety of department, school, and college resources, including, but not limited to, state funds, grant and contract funds, departmental, clinical and service funds. As defined in [Section 24-57](#), faculty member's WOT shall have a written understanding with the chair describing their duties to be performed to meet the department's goals and objectives. This understanding will specify the sources, distributions, and levels of funds supporting their salaries for these purposes. Salary funding shall be related to the faculty member's involvement in these departmental activities. Classroom instructional duties shall be supported from departmentally administered funds.
- **Section 24-41. K.** Termination of funding is defined as failure, for a continuous period of more than 12 months, to obtain funding sufficient to provide at least 50 percent of the faculty member's base annual salary. The University is not obligated to provide replacement funding during lapses of a faculty member's external support.

B. Research Faculty

Research titles designate appointments for faculty whose primary responsibility is research and whose salary is funded through grants, contracts or other applicable sources. These are term limited appointments that may be renewed by the department following faculty code requirements. Faculty members in the research track (research assistant professor, research associate professor, and research professor) are not eligible for tenure.

The sections of the Faculty Code relevant to termination of research faculty are Sections 24-41 G, H, and I:

- **Section 24-41. I.** Notwithstanding the provisions of this subsection, research assistant professors are subject to removal during the term of their appointment for cause (see [Chapter 25, Section 25-51](#)), for termination of funding, or for reasons of program elimination (see [Chapter 25, Section 25-52](#).)
- **Section 24-41. J.** Research professors and research associate professors are not subject to removal during the term of their appointment except by removal for cause (see [Chapter 25, Section 25-51](#)), for termination of funding as defined in Subsection I, or for reasons of program elimination (see [Chapter 25, Section 25-52](#).)

- **Section 24-41. K.** Termination of funding is defined as failure, for a continuous period of more than 12 months, to obtain funding sufficient to provide at least 50 percent of the faculty member's base annual salary. The University is not obligated to provide replacement funding during lapses of a faculty member's external support.

C. Professorial Teaching Faculty

Professorial teaching titles designate appointments for faculty whose primary responsibility is teaching, These are term limited appointments that may be renewed by the department following faculty code requirements. Faculty members in the professorial teaching track (assistant teaching professor, associate teaching professor, and teaching professor) are not eligible for tenure.

- Appointment Length: Varies based on rank. See [Faculty Code Section 24-41C](#)

Pathways for Regular Faculty

A. Overview

Basic Science departments have one pathway for regular faculty who are all expected to engage in teaching and scholarship. The expectations for faculty effort devoted to teaching and scholarship should be: (1) defined at the time of appointment for each individual faculty member; (2) reviewed and revised, as appropriate, on a regular basis; and (3) described in the chair's letter at the time of promotion. Promotion decisions should reflect the expectations regarding faculty effort devoted to teaching and scholarship.

Clinical departments may have one or two regular faculty pathways. The single regular faculty pathway is hereafter referred to as the traditional pathway for regular faculty. Clinical departments with two pathways have the traditional pathway (sometimes referred to as the "physician-scientist pathway") and a second pathway, called the "clinician-teacher pathway". Faculty appointed in either pathway are regular faculty and hold the same academic titles and adhere to the same promotion schedule in the School of Medicine. A clinician-teacher should devote the majority of his/her time to clinical practice/administration and clinical teaching at one of the University's owned, operated, or affiliated clinical sites with the remaining time devoted to scholarship. Both pathways in the clinical departments are essential to the mission of improving the health of the public and are equally valued. Regardless of whether a clinical department has one or two pathways, expectations regarding faculty effort devoted to teaching, scholarship, administration, and clinical practice should be: (1) defined at the time of appointment; (2) reviewed and revised, as appropriate, on a regular basis; and (3) described in the chair's letter at the time of promotion. Promotion decisions should reflect the expectations regarding faculty effort devoted to teaching, scholarship, and clinical service.

B. Changing Pathways for Faculty in Clinical Departments

Faculty members appointed in one of the two pathways in a clinical department – traditional or clinician-teacher -- may have the opportunity to switch into the other pathway under circumstances where their individual strengths and the department's needs and activities call for a change.

1. Assistant Professors

Assistant professors may be considered for this status change provided they have not yet completed four academic years as an assistant professor. Such a change in status requires approval by the department chair and the dean.

2. ***Associate Professors and Professors***

Associate professors and professors also may switch into the clinician-teacher pathway, but associate professors are required to serve a minimum of three years after switching pathways before being eligible for consideration for promotion to professor. Such a change in status requires approval by the department chair and the dean.

3. ***Clinician-teachers***

Clinician-teachers may switch into the traditional pathway, provided that the change in status is approved by the department chair and the dean.

Guidelines for Academic Advancement in the Regular, Research and Professorial Teaching Faculty Tracks

Please note: While the School of Medicine has adopted the below guidelines that supplement the Faculty Code, faculty are to refer to their departmental criteria when considering advancement in these tracks.

A. Scholarship

- *General Considerations*

Objective evidence for excellence in scholarship is required for faculty advancement for regular, research and professorial teaching faculty. Scholarship supports our mission of improving the health of the public by advancing knowledge in medicine. Peer-reviewed scholarly publications are an important benchmark and are evaluated on quality, focus, and impact of the contribution. Other forms of scholarship may be considered and included in department-specific criteria. Dissemination and peer review are both essential aspects of scholarship. Work that has not been disseminated or undergone peer review does not meet the definition of scholarship. An individual's role in scholarship is an important factor to consider, for example whether the individual has developed independence in an area of research, or contributed with some level of independence as a collaborator with a major role in a particular prong of a research endeavor. The quality of the work and the development of expertise and impact in an area of science or on a particular topic are more important than the quantity of the scholarship.

- Each department must judge the quality of the scholarship for faculty being considered for promotion. The general criteria that should be used are the quality of the scholarship, the degree of innovation, and the extent to which this information has been disseminated and adapted for use outside of the University of Washington. External validation of the quality of scholarship is primarily accomplished through peer review mechanisms, as manifested by publication of research in quality journals, presentations at scientific meetings, book chapters/books, success in attainment of patents and funding by extramural sources. These same criteria can be applied for some, but not all, of the scholarship of clinician-teachers in clinical departments. Other types of scholarship, such as curricular design, web information and videos, must be peer-reviewed by the department and by external reviewers selected by the department chair (or division head) and the faculty member.

- *Independence*

Changing paradigms of interdisciplinary work and “team science” can often make attribution of effort and the assignment of an individual’s contribution to scholarship and a research program difficult. Independence in research is a hallmark of a member of the regular faculty and some research faculty. Yet defining it by classic roles and responsibilities, such as senior authorship or PI status on a grant, may be difficult. This is especially true of faculty on the research track where team science and programmatic needs may limit time and resources for independent scholarship. Clear enunciation of the candidate’s contribution and impact on a scientific program is essential. This should be described in the self- assessment, the chair’s letter, and in internal referee letters.

- *Definition of Scholarship*

Many types of scholarship are valued within the School of Medicine. Although clinician-teachers are not expected to be independent investigators, they are expected to have performed at some level of independence beyond a support role and must demonstrate scholarship by the publication or dissemination of information meeting one of the definitions below.

a. Scholarship of Discovery

This type of scholarship includes the generation of new knowledge and publication in peer-reviewed publications. The areas of research include basic science, clinical, epidemiological, health services, social sciences, ethics, education, and health care delivery. Types of contributions might include:

- Publication in peer-reviewed journals
- Presentation of data in abstract form, oral presentation, or poster
- Participation in key elements of multi-center projects
- Other less customary types of contributions as noted below

b. Evaluation of Scholarship of Discovery

The quality of scholarship will be based on the quality and quantity of work published in peer reviewed publications, especially as first and senior author, and presentations at national meetings. Ability to obtain and sustain extramural funding to support the research program will be considered along with demonstration of independence in research activities. In addition, letters of support from principal investigators of collaborative projects are useful. Important criteria are the quality of and impact of

the study, and the specific contributions of investigators to its design, implementation, and analysis of the results.

In evaluating a faculty member's scholarship, reviewing bodies may consider the individual's overall research trajectory and evidence of growing and/or sustained activity. For example, early years with lower productivity combined with growth in productivity and impact, or lapses in productivity, may all be factors in evaluating overall scholarship of an individual.

Clinician-teachers often work as collaborators on research studies. Criteria for meaningful participation must be documented. Examples include: contributing to the generation of the research idea, recruiting patients, conducting chart reviews, participating in data collection and/or analysis, assessing program implementation and outcome, and preparing the results for publication.

When considering scholarly productivity, some additional considerations may be appropriate for faculty members whose translational research work involves complex clinical trials, longitudinal studies or similar multi-institutional studies. The time to initial publication of such studies may be greater, and hence the initial publication trajectory of these individuals may be somewhat slower than in other forms of scholarly endeavor. These differences can result from regulatory barriers, the extensive and lengthy investigational new drug application process to test new agents, the need to develop multi-institutional protocols to enroll adequate study participants, the long duration before many clinical trials reach meaningful study endpoints, and other factors inherent to these types of research. Moreover, the extent and nature of an individual's contributions to publications with large numbers of authors is often difficult to judge. In some fields, participants in a multi-center research group are considered "non-author contributors" and thus these entries should not be included in the CV of the candidate in the manner of a publication.

To this end, letters of support from senior mentors as well as internal and external collaborators should clearly describe the faculty member's individual contributions to study design, implementation, and analyses, so that these contributions can be properly considered during the promotion process.

Another responsibility of the candidate and department is to address specific forms of scholarly work that do not fall in customary categories. For example, in some disciplines conference proceedings (Biomedical Informatics and Medical Education)

and technical documents (Global Health and Health Metric Sciences) carry the same weight as traditional publications. The School's A & P council recognizes these alternative sources of publication but must be informed in the chair's letter or promotion criteria if these materials are considered equivalent to the peer-reviewed manuscript.

In addition to publications, presentations and external funding, other metrics of scholarship that may be particularly useful in the context of translational research include patents, investigational new drug applications and total number of clinical trial protocols (listed on clintrials.gov) for which the faculty member is the Principal Investigator (PI) or the site-specific PI.

c. Scholarship of Integration

The critical synthesis and integration of existing information on a particular question are considered valuable contributions, especially for clinician-teachers. This can consist of:

- Systematic reviews of the literature, including meta-analyses, Cochrane Collaboration reviews
- Book chapters
- Review articles in peer-reviewed journals
- Editorial board of peer-reviewed journals
- Authorship or editorship of books published by reputable publishers
- Editorship of a journal

d. Evaluation of Scholarship of Integration

Systematic reviews, review articles and editorials should be published in peer reviewed journals. Some articles or book chapters should be first authored or senior authored by the faculty member under consideration.

e. Scholarship of Teaching

Contribution to new knowledge related to teaching is an important type of scholarship. Types of contributions include:

- Curriculum development and improvement
- Materials for in-house use such as resident and evidence based clinical guidelines

- Educational software and videos and web-based materials including podcasts, instructional YouTube Videos, blogs, and Twitter feeds
- Systematic evaluation of educational programs for purposes of continuous quality improvement

f. Scholarship for Teaching Professorial Track

Per Faculty Code 24-34 B.4, Individuals appointed to the teaching professorial track may demonstrate their scholarship in a variety of ways, including but not limited to: introduction of new knowledge or methods into course content; creation or use of innovative pedagogical methods; development of new courses, curricula, or course materials; participation in professional conferences; evidence of student performance; receipt of grants or awards; contributions to interdisciplinary teaching; participation and leadership in professional associations; or significant outreach to professionals at other educational institutions. While they may choose to do so through publication, such publication shall not be required.

g. Evaluation of Scholarship of Teaching

Evaluation will be done by solicited evaluations from outside reviewers at the time of promotion. It may consist of peer review through MedEDPORTAL, other organized programs of review, or solicited evaluations from users of the information, such as faculty, fellows, residents, students, and other health care professionals. Traditional evaluative criteria such as publication in peer-reviewed journals and presentation at scientific meetings can also be used.

h. Scholarship of Application

Scholarly contributions to clinical quality improvement and patient safety are important to the mission of UW SoM and as such should be recognized for appointment and promotion. Types of contributions might include:

1. Development of new quality and patient safety metrics and evaluation of their impact on desired outcomes
2. Development of new analytic tools and methods for assessing quality and safety
3. Implementation of major clinical initiatives, care pathways and/or other models of care and evaluation of their impact on desired outcomes
4. Development of innovative approaches and/or guidelines to diagnose, treat, or prevent disease

i. Evaluation of Scholarship of Application

The scholarship of application is evaluated similarly to other forms of scholarship. Impact regionally, nationally and/or internationally is highly valued, particularly in the form of publications and grant support. However, impact within the institution is often the scope of application scholarship and is relevant to appointment and promotion considerations. Measurement of the local impact derived from the work might take the form of implementation metrics, sustainability, and outcome measures (patient, economic, worker satisfaction). Honors and awards in this domain are also important considerations.

B. Teaching

The evaluation of teaching is based upon the quality and value of teaching interactions with students, residents, fellows, graduate students, practicing physicians, and other health care professionals; an assessment of innovative education programs, projects, resources, materials, and methods; and, for some faculty, the ability to be an effective educational administrator or leader.

- *Teaching Portfolio*

Compilation of the teaching portfolio is required for the promotion dossier of all faculty with teaching duties. It allows for more formal assessment of contribution to teaching, providing documentation and evidence of the quality and value of educational activities. The extent of the teaching portfolio will vary with the amount of time the faculty member devotes to teaching. It is recommended that faculty members proactively request supporting materials for the teaching portfolio, such as course evaluations from both peers and students, at the time that the teaching activity is performed. Evaluations must include peer evaluations of teaching from a combination of other faculty who work with the individual in the teaching setting in addition to those obtained from students or learners. In general, teaching evaluations are expected annually, but the material should be summarized in addition to submitting the individual evaluations. Peer evaluations are also expected annually for assistant professors, and at least every three years for associate and full professors, and the year before promotion from associate professor to professor. Peer evaluators should be chosen by the faculty member and the department chair or their delegate. Evaluation scores of the candidate should be summarized for each year and shown in the context of the mean or median values for teaching and peer evaluations of the department or division

faculty overall for that year when available. An internal reference letter that contains a comprehensive section reflecting personal observation of teaching effectiveness may be appropriate as one element of peer evaluation (with a copy of the letter placed in the teaching portfolio). Refer to department specific guidelines on the format of the teaching portfolio and evaluation forms and materials.

- *Comprehensive Teaching Portfolio*

A [template](#) (PDF) for preparation of the teaching portfolio has been suggested by the Teaching Scholars Program at the University of Washington, School of Medicine. This comprehensive portfolio is appropriate for individuals who have major time commitments to teaching as part of their overall academic responsibilities. Elements of the comprehensive teaching portfolio may vary depending on the individual's activities and the department's guidelines and may especially vary between faculty in basic science departments and clinical departments. The comprehensive teaching portfolio template includes the following guidance.

- It is suggested that the faculty member store and collate his or her teaching materials as they are received, and select from these materials the documents that best represent activities and reflect expertise as an educator. It is not necessary to include everything that has been kept, but all evaluations (individual copies or computerized summaries) should be submitted. The submitted portfolio should not be so large as to overwhelm the reviewers and ideally be no more than 70-100 pages.
- An "executive summary" should be placed in the front of the portfolio; table of contents, then the main portfolio should be tabbed to include the following headings:
 - Personal Information
 - Teaching Philosophy (maximum one page)
 - Teaching Activities and role as an educator. Include summaries and teaching evaluations, instructional materials, and documentation in an appendix of the portfolio.

Direct Teaching: lectures, small group teaching, problem-based learning, grand rounds, supervision of clinical activities, etc.

Curriculum Development: describe innovative educational activities created or implemented. Examples: courses, clerkships, faculty development, lab manuals, web-based materials, clinical cases, etc.

Educational Scholarship: didactic materials produced and published by the individual faculty member for dissemination of medical education experience and expertise.

- Mentoring (typically more extensive for promotion to professor)

Provide a list of mentees with description and duration of mentoring activities, resulting output (publications, presentations, etc.) and their current career attainments and awards

Other materials the faculty member may wish to include: brief description of projects conducted with mentees, as well as letters from mentees summarizing the mentoring experience and the impact it had on their professional development

- Educational Administration

Describe relevant leadership positions held: course director, residency or fellowship program director, committee participation or chairmanship, etc.

Educational grants: include source, amount and number of years of funding

For Program Director: include achievements in accreditation, curriculum development, evaluation procedures, and innovations in training programs

- Professional Development in Education

Describe participation in programs related to medical and health profession education: workshops, seminars, CME, Teaching Scholars

Describe the impact of these activities on your professional development

- Regional/National/International Recognition

Describe participation in regional, national or international meetings or committees: workshops, seminars, oral or written board examiner, reviewer of other training programs or training grants

- Teaching and Education-related Honors and Awards

- Long-Term Goals

"Reflection-in-Action" including future projects, new teaching methods to be learned, ideas to be investigated, plans for publication and dissemination.

An individual faculty member may not have materials to support all of the categories of teaching listed above. The teaching portfolio is evaluated by internal reviewers. At the option of the department it may also be sent to outside reviewers for evaluation similar to the way publications are evaluated by outside reviewers at times of promotion.

C. Clinical Care

Faculty who provide clinical professional services as part of their expected academic responsibilities must have peer clinical evaluations as a component of academic advancement. The weight given to the quantity and quality of clinical service should be aligned with the time spent in clinical activities. Peer clinical performance evaluations should be conducted at a minimum in years two and five (or the promotional year) for assistant professors and at least every three years plus the promotional year for associate and full professors using a structured format. The evaluation should focus on two main areas: (1) medical knowledge, problem-solving skills, management of complex patients, psychomotor skills, and overall clinical skills; and, (2) humanistic qualities, responsibility, compassion, professionalism in interactions with both patients and colleagues, and management of the psychosocial aspects of illness.

Peer clinical evaluations should be obtained from faculty who work with the individual in the same clinical setting. At least some of the faculty should be outside of the individual's specific area of expertise. Peer evaluators should be chosen by the faculty member and the department chair (or division head). Evaluations from trainees may also be included in the overall clinical care evaluation packet. However, the majority of the evaluations should come from peer faculty.

At the time of the appointment of a clinician-teacher, guidelines should be established for the evaluation of the quality of clinical care and clinical productivity. Peer ratings may serve as a measure of the individual's clinical excellence and other measures (e.g., quality, safety, and outcome measures) may be employed as appropriate. Examples of methods to assess clinical productivity include the number and types of patients seen, clinical revenues, half days of clinical practice, work RVUs/ASAs, and types of service provided. Specific guidelines should be individualized for each clinician-teacher and should be developed by the department chair, division head, and service chief. Individualized metrics might include measures of clinical quality and safety, particularly those with institutional and/or national

benchmarks and those used in contracting and billing, and if available, patient reported outcomes.

D. Administrative Service

Effective administration of teaching, research, and clinical programs is crucial to departmental success. Administrative work is a distinct and important activity that should be evaluated at the time of promotion, along with teaching, clinical care, and scholarship activities, though it is not a substitute for teaching and/or scholarship. Those involved in the evaluation should include the individual's supervisor as well as his/her peers, supervisors and users of the service which he/she administers.

The administrative responsibilities of faculty members vary tremendously, from individuals who have no administrative responsibilities to those whose jobs are mainly administrative. These activities can include administration of a division, research unit, clinical unit, or teaching program. The basis for evaluation will be performance against prospectively set annual expectations and goals. These expectations and goals should be jointly set by the faculty member and the person(s) to whom the faculty member reports for these administrative activities. If that supervisory person is outside of the department, input from that person or body should be solicited during the promotion process.

The evaluation of administrative responsibilities should include a statement by the faculty member of the FTE devoted to the specific administrative responsibilities. It should specifically outline the different roles and responsibilities and whether these were assigned or whether the individual volunteered for these roles.

The administrative responsibilities should be separated into the following categories:

- Hospital or clinic
- Department (e.g., division or section head, clinic director) School of Medicine, University
- Other local
- Regional
- National
- International

Documentation should include annual expectations and goals and measures of performance in achieving these goals. Measurements for administrative activities may include some or all of the following:

- Financial performance: Meets pre-determined budget targets for revenue and expenses
- Operational performance for clinical programs: Total patient volumes, wait times, patient satisfaction scores, complaints, referral provider satisfaction, staff satisfaction, and other QI indicators
- Workforce management: Recruitment and retention efforts, turnover rate among faculty, trainee recruitments.
- Development and support of processes for enhancing diversity, equity and inclusion initiatives
- New program development: Specific deliverables such as completed planning, implementation, re-assessment following implementation
- Ongoing program oversight: Collaborative programmatic maintenance and improvement of existing programs. Collaborative timely review/revision of existing and creation of related policies and procedures. Establish review priorities
- Leadership: Individual programs, and hospital/University committees
- Role in new initiatives: Initiation, planning, and support of new initiatives
- Support and implementation of specific goals and initiatives

E. Professionalism

UW Medicine values professionalism among its members in carrying out UW Medicine's academic activities of teaching, scholarship, and professional service. Professionalism includes demonstrating honesty, integrity, respect, compassion, accountability, and a commitment to altruism in all our work interactions and responsibilities. It is the policy and expectation of UW Medicine that UW Medicine faculty, staff, trainees, and students will conduct themselves in a professional manner in all of their interactions with patients, members of the public and the University community, and each other. See [UW Medicine Policy on Professional Conduct](#).

Professional conduct is a requirement for promotion, and evaluation for promotion will include professional conduct as a factor. Because professionalism is expected in all areas of a faculty member's performance, deficiencies in professionalism may be seen as limiting a faculty member's ability to be successful in teaching, research, and professional service.

Professionalism may be addressed during the regular conferences between the faculty member and his/her department chair or division head (adapted from Am J Surgery 191:701-705, 2006) and topics may include, for example:

- Demonstrates respect toward all others both in direct interactions and in indirect references
- Aware of own limitations; seeks and accepts constructive feedback
- Answers questions directly and respectfully
- Tactfully offers assistance and support for team members
- Inspires trust in patients, colleagues, coworkers, and subordinates
- Listens well and responds appropriately
- Is dependable, competent, and responsible

F. Professional Recognition (e.g., "National Recognition")

Professional recognition outside of one's department and the School of Medicine is considered in the evaluation of promotion at all levels. The University of Washington requires "National Recognition" for advancement to the rank of professor. Departments should define how such recognition will be determined and valued at each level of advancement. The expected types of external recognition should reflect the profile of the faculty member's efforts devoted to their academic activities. Examples of how a faculty member might be recognized outside of the University include:

- Awards or prizes
- Serving on national advisory boards, guideline panels, or study sections
- Membership in scholarly organizations, especially elected societies
- Serving on editorial boards
- Providing peer reviews for scholarly journals
- Presenting at scholarly meetings and conferences
- Invitation to give state-of-the-art lectures or reviews at national or international meetings
- Visiting professorships
- Organizing international, national or regional meetings

Preparation of Promotion Dossiers

The deadlines for departments to submit completed promotion dossiers to the Dean's office are September 1st for mandatory and November 1st for non-mandatory promotions. Faculty should work with their department chair and/or division head to prepare their promotion packet in a timely manner. Each department should provide faculty with a list of components (checklist) for the promotion dossier at the time of appointment and again well in advance of consideration for promotion. The checklist should be used as a reference, as appropriate, at regular conferences between faculty members and their chairs or divisions heads.

The School of Medicine requires electronic submission of:

- Current [curriculum vitae](#) in UW School of Medicine format. An asterisk should identify five of the candidate's most significant scholarly contributions
- Electronic copies of the faculty member's five most significant scholarly contributions
- Teaching evaluations- including peer evaluations (as part of the teaching portfolio)
- Peer clinical competence evaluations- (for faculty who provide clinical professional services)
- Candidate's self-assessment of teaching, clinical, research and administrative activities
- Written summaries provided to the candidate during the departmental promotion process as well as responses from the candidate
- Letters of Evaluation:
 - A minimum of six letters of recommendation.
 - Of the six letters, at least three must come from external, non-UW referees who are not present or past colleagues, teachers, students, friends, mentors, or collaborators (co-investigator or co-authored papers).
 - The remaining three letters can come from UW faculty; one must be from within the department. Letters should come from senior faculty.
- Professorial Teaching Track Letters of Evaluation:
 - Three letters of recommendation

- When evaluating assistant teaching professors, it may also be appropriate to solicit letters from experts who are external to the candidate's department, but who are internal to the UW
- For considerations of candidates from associate teaching professor to teaching professor, reviewers must be external to UW.

The external referees should be senior faculty at institutions comparable to ours who are experts in their field and are qualified to review the candidate's contributions. Letters from former UW faculty are welcome but will not necessarily be considered as external letters. All evaluations are to be submitted unless the reviewer has indicated he/she is unfamiliar with the candidate and is unable to evaluate.

The candidate (and if appropriate the candidate's division head) should be consulted regarding the individuals from whom internal and external letters of evaluation will be requested. The department chair or departmental promotion committee will then select individuals to write letters, which will be solicited in writing by the chair or the chair's designee. A completed University of Washington School of Medicine (UW SoM) External Referee Form should accompany each outside (non-UW) request for a letter of evaluation.

- A completed UW SoM External Referee Form for each outside, non-UW referee
- Letter from the division head to the department chair-if appropriate
- Letter from the department chair to the Dean
- Letter of concurrence from chairs of the secondary department for candidates with joint or adjunct appointment(s); a vote from the second department is also required for joint appointments.
- An example letter of solicitation from the chair to referee writing letters of recommendation