# Appointments and Promotions Criteria

# **Department of Rehabilitation Medicine**

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#### **INTRODUCTION**

#### The Faculty

The educational and clinical responsibilities of the Department of Rehabilitation Medicine require a faculty from diverse disciplines in numbers and types likely different than other departments in the School of Medicine. In addition to the education of undergraduate medical students and physician specialty training (e.g., PM&R), as in other clinical departments in the School of Medicine, the Department has essentially complete management of four graduate level academic programs. Three of these programs prepare entry-level health professionals in Prosthetics and Orthotics (Master of Prosthetics and Orthotics), Occupational Therapy (Master of Occupational Therapy) and Physical Therapy (Doctorate in Physical Therapy). The fourth program is at the post-professional level and is a Ph.D. in Rehabilitation Science for all rehabilitation professionals. The total annual enrollment for these four programs is over 250 students in a given academic year. Whereas the responsibility for selecting, advising, and monitoring the progress of the medical students, as well as teaching them, is coordinated by the Dean's office and distributed over the entire School of Medicine, the responsibilities for these 250+ students are handled exclusively by faculty in these three academic Divisions, as well as other Department of Rehabilitation Medicine faculty. Further, pre- and post-doctoral internship and fellowship opportunities are available in Rehabilitation Science, Clinical Psychology, Multiple Sclerosis, Spinal Cord Injury Medicine, Brain Injury, Pediatric Rehabilitation, and Sports Medicine that require administration and mentoring by faculty in the Department.

The multidisciplinary nature of clinical care in the medical rehabilitation of individuals with physical disabilities requires that the faculty of the Department of Rehabilitation Medicine come from diverse fields and represent the breadth of rehabilitation practice. The combination of these educational, research and clinical care missions includes faculty from the fields of medicine (physiatry), clinical psychology and neuropsychology, physical therapy, occupational therapy, prosthetics/orthotics, speech pathology, rehabilitation counseling, and biomedical science. Each of these disciplines comes to the Department with different backgrounds and responsibilities.

#### Mentoring

Faculty members annually complete a Faculty Activities Report of their previous year's accomplishments and their plans for the subsequent year. The Chairperson or Division Head meets annually with faculty below the rank of Associate Professor, every other year for Associate Professors and every three years for Professors. During these meetings the Chairperson or Division Head reviews and advises faculty on their progress. Further, the Department has established an internal Appointments and Promotions Committee which is multiprofessional and makes recommendations to the Chair and to the Department regarding appointments and promotions. A mentoring program is in place for junior faculty.

## The National Scene

In all of the rehabilitation fields, there is a national shortage of personnel, especially in occupational therapy, physical therapy, and prosthetics/orthotics and post-doctoral research fellowships in rehabilitation are limited. In order to recruit and retain the best available faculty, it is therefore necessary to facilitate their faculty development relative to research. This is quite different from faculty of many of the other clinical departments who routinely arrive with post-doctoral research training. Thus, it is more important to evaluate the change in productivity, or for those with more extensive backgrounds, sustained productivity, and also to project the faculty person's ultimate contribution to quality research, training, clinical care, or administration and its change over time.

## The Assessment of Faculty

In view of the background issues discussed, for faculty on the Clinician/Scientist or Research Professorial track during their first six years, the absolute level of scholarly achievement as measured by number of quality publications can be expected to vary among and within the disciplines. What is important is evidence of focused development in a specific area and, for those with limited initial backgrounds, an increasing quality and quantity of scholarly contributions rather than any absolute number of publications.

Many of the faculty have teaching and program administration responsibilities that exceed those found anywhere else in the School of Medicine. It must be recognized that the teaching demands in these health professional academic programs are greater per faculty member than in most other departments. Advising and administration of such a large number of students also takes a considerable time commitment. In view of extensive teaching responsibilities in the academic programs, teaching and administrative scholarship will play a greater role in evaluations than would be the case for most School of Medicine faculty. It is recognized that these latter contributions can also be evaluated for scholarly content.

Consistent with the University's expressed commitment to excellence, equity, diversity, and inclusion, our Department embraces diversity and promotes inclusion in our criteria for promotion. Therefore, contributions in scholarship, teaching, and service that address diversity and equal opportunity should be included among the professional and scholarly qualifications for appointments and promotion outlined below.

Finally, the Department is committed to the development of a high level of professionalism at all stages of faculty development. As a component of UW Medicine, it is the policy and expectation of the Department of Rehabilitation Medicine that all faculty will conduct themselves with professionalism, dignity, and respect in their interactions with patients, students, members of the public and each other. Professionalism includes demonstrating excellence, humanism, respect, accountability, cultural sensitivity, and a commitment to altruism in all our work interactions and responsibilities.

## **Summary**

The background of the faculty of the Department of Rehabilitation Medicine is often different from one another and different compared to faculty from other departments in the School of Medicine. Educational backgrounds and faculty contributions must be considered relative to the individual's professional field. The goal is to promote and retain those faculty members who show a <u>focused growth and increased quality</u> of contribution in the areas of teaching, scholarship and clinical care. It must be recognized that in addition to these traditionally recognized areas, a fourth area of administration and student management should be recognized, especially if it is leading to scholarly contributions.

The following contains a description of the criteria for appointments and evaluation procedures for faculty in the Teaching Professor, Clinician/Scientist, Research Professor, and Clinician/Educator Tracks.

# PROFESSORIAL TEACHING TRACK

#### Criteria for Appointment

#### Assistant Teaching Professor

Faculty appointed to this rank are those for whom the majority of their time is associated with teaching. This rank is predominantly reserved for a subset of faculty within the Health Professional graduate programs. This rank may be appropriate for individuals with PhD degrees.

Appointment at this rank requires a demonstration of teaching ability that evidences promise of a successful teaching career. The qualifications include having the basic professional degree and certification, and evidence of clinical competence in their specialty area. Potential for scholarship is expected that can include introduction of new knowledge or methods into course content; development of new courses, curricula or course materials; contributions to interdisciplinary teaching; or participation in professional associations and conferences.

The primary expected degree requirements for those likely to be eligible for this appointment are as follows:

Physical Therapy:	DPT
Occupational Therapy:	BS, BA, MOT, MA, MS, or OTD
Prosthetics/Orthotics:	BS, BA, MA, MS, M.Ed., or MPO
Speech Language-Pathology:	MS

#### Associate Teaching Professor

Appointment or promotion to this rank requires extensive training, competence and experience in the discipline and service to the department, school, University and field. There should be demonstration of excellence in teaching through peer and student evaluations, leadership in course development and innovation and, as may be appropriate, leadership in an area of clinical competence. A record of scholarship is expected that can include introduction of new knowledge or methods into course content; development of new courses, curricula or course materials; contributions to interdisciplinary teaching; peer-reviewed publications; chapter publications; participation and presentations at professional conferences; and leadership in professional organizations. Scholarly activities should demonstrate impact beyond the institution with a regional and national influence. Evidence for regional or national involvement through presentations and courses, committee activities, or leadership positions is expected. The basic degree requirements are as indicated above for the Assistant Teaching Professor position.

## Teaching Professor

Appointment or promotion to this rank requires a sustained record of excellence in instruction, which may be demonstrated by exemplary success in curricular design and implementation, student mentoring, service and leadership to the department, school, University and field. Evaluation of excellence in teaching is through peer and student evaluations. As appropriate, an area of clinical competence is expected. National or international recognition for

teaching excellence or for leadership in teaching programs is also expected that may include outreach and recognition by professionals at other educational institutions. Extensive evidence of excellence in scholarship is expected that can include introduction of new knowledge or methods into course content; development of new courses, curricula or course materials; contributions to interdisciplinary teaching; peer-reviewed publications; and chapter publications. Evidence of national or international involvement through special courses, national presentations, committee activities, or leadership positions in professional organizations is required. The basic degree requirements are as indicated above for the Assistant Teaching Professor position.

## Evaluation

Evidence of teaching ability can be documented in a variety of ways including student evaluations, self-evaluation, departmental peer evaluation or evaluation by expert professionals such as those available through the Center for Teaching & Learning (CTL), and must include either departmental peer or outside expert evaluation. Peer teaching evaluations are expected on an annual basis. Evaluation of scholarly activities can be provided by peer evaluation of course content, course materials, national presentations and innovative teaching methods.

# CLINICIAN/SCIENTIST TRACK

## Criteria for Appointment

## Assistant Professor

This rank is the usual starting rank for physiatrists who have completed their basic residency, board certification, and have some evidence for productivity in scholarly pursuits. It is also the usual starting rank for psychologists, occupational therapists, physical therapists, prosthetist/orthotists, speech pathologists, and biomedical scientists at the Ph.D. level who have exhibited publication skills. It is for those with promise toward developing independence in scholarly activities. Evidence for teaching ability in the classroom, at the bedside, in the laboratory, and for continuing education should exist. Scholarly activities that exist, or are expected, can include publications in peer-reviewed journals and other activities such as review articles, chapters, systematic reviews, books, web-based publications and software development.

## Associate Professor

A Ph.D. or an M.D. is the expected degree requirement for this position. In addition to teaching excellence, a publication record is essential including refereed publications and other types of scholarly work, for example, review articles, books, systematic reviews, chapters, and web-based publications that can be documented to clearly impact the field outside of the University of Washington. An area of focus should be apparent, be it teaching, research, scholarly activities, or clinical care. Recognition beyond the University of Washington, as manifested by invitations to special conferences, professional associations, review panels, grant productivity, and/or administrative leadership should be well documented.

## Professor

Clear evidence that the faculty person has had a national or international impact must be documented. Such documentation must include recognition of this reputation through peer review from outside of the institution. A scholarly focus in depth and in quantity and quality of excellent caliber is expected. Evidence for professional and administrative leadership nationally, as manifested by invitations to present and serve on significant committees, editorial boards, and/or research review panels would be anticipated. Mentorship of junior faculty in their scholarly development would be expected. Evidence for teaching excellence and, as appropriate, clinical skills would also be required.

## Evaluation

Documentation and evaluation of a faculty member's contribution throughout the period of appointment constitute the most useful record to assess sustained faculty accomplishments at the time of promotion. Documentation includes a curriculum vitae in the format outlined by the Dean's Office (See Appendix A), a teaching portfolio that reflects the philosophy of education along with teaching accomplishment (See Appendix B for an example of topics), and letters from external referees assessing scholarship, impact of work, and level of recognition of candidates for appointment or promotion. Because the distribution of effort in the areas of scholarship, teaching, and service varies from one faculty member to another, the distribution of effort, as negotiated with the Chair of the Department, is considered in the evaluation process. For example, for those faculty members who devote most of their time to teaching, major emphasis is placed on the evaluation of teaching excellence. For Ph.D. faculty in the regular faculty track, appointment and promotion eligibility is based on the clinician/scientist pathway criteria, without evaluation of any clinical performance.

## **Scholarship**

Evidence for scholarly activities may include but is not limited to publications in peerreviewed journals, publication or dissemination of data and results in other peer-reviewed venues (e.g. abstracts, posters, oral presentations at meetings), and the development and dissemination of newer forms of scholarship including web-based resources. The most important criteria in assessing these scholarly contributions and efforts are their quality or rigor, evidence of a focused approach to a problem and the impact in the field. Both the scholarship of discovery, as reflected in peer-reviewed research publications, and the scholarship of integration, as reflected in systematic reviews and chapters, is considered. In general, the quality and impact of publications are more important than the number of publications, but a reasonable level of sustained productivity needs to be demonstrated.

## Teaching

All faculty members in the Department of Rehabilitation Medicine are expected to contribute to the educational mission of the Department by teaching in the context of clinical practice or in the classroom setting and mentoring graduate students. Evidence of teaching ability can be documented in a variety of ways including student evaluations, self-evaluation, departmental peer evaluation (see Appendix C), or evaluation by expert professionals such as evaluations available through the Center for Teaching and Learning (CTL), and must include either departmental peer or outside expert evaluation. A teaching portfolio is submitted as part

of each promotions packet. Several faculty members in the department are asked to review and critique the content and quality of the teaching portfolio.

## Service

Service for purposes of promotion has three potential components: clinical practice, clinical or academic administration/committee work, and community service. Clinical excellence, competence and accomplishment may be documented in several ways including documentation of the contribution to diagnostics or clinical services and a review by faculty peers. Specific information to document the provision of clinical services should include a description of the type of service and a clear recording of time commitment and where appropriate, case load in readily recognizable units. This information is included in the annual Faculty Activity Report. Administrative and community service is also documented by committee membership within the Department, the University, and the Community. Service is also documented through membership or leadership in national organizations and peer-reviewed boards for journals, professional organizations or funding agencies.

# **RESEARCH PROFESSOR TRACK**

Criteria for Appointment

# Research Assistant Professor

This rank is for those with promise toward developing independence in research and scholarly activities. Appointment to this rank requires qualifications corresponding to those prescribed for the rank of Assistant Professor in the Clinician/Scientist track with primary emphasize upon research. Research and scholarly activities that exist, or are expected, can include publications in peer-reviewed journals and other scholarly activities such as reviews, chapters, books, software development, and so on. A Ph.D. or an M.D. is the expected degree requirement for this position.

## Research Associate Professor

Appointment to this rank requires qualifications corresponding to those prescribed for the rank of Associate Professor in the Clinician/Scientist track with primary emphasize upon research. A publication record is essential including referred publications in journals appropriate for scholar's field of investigation. This may be supplemented by other types of scholarly work, for example, review articles, books, and chapters that can be documented to clearly impact the field outside of the University of Washington. Recognition beyond this institution, as manifested by invitations to special conferences, professional associations, review panels, grant productivity, and/or administrative leadership should be well documented.

## Research Professor

Appointment to this rank requires qualifications corresponding to those prescribed for the rank of Professor in the Clinician/Scientist track with primary emphasize upon research. Clear evidence that the faculty person has had a national or international impact must be documented. Such documentation must include recognition of this reputation through peer review from outside of the institution. A research and scholarly focus in depth and in quantity and quality of excellent caliber is expected. Evidence for professional and administrative leadership nationally, as manifested by invitations to present and serve on significant committees, editorial boards, and/or research review panels would be anticipated. Mentorship of junior faculty in their research and scholarly development would be expected.

## Evaluation

Appointment to various ranks within the Research Professorial track must meet all criteria and procedures that apply to Clinician/Scientist Track, except evaluation of teaching or any clinical performance.

# **CLINICIAN/EDUCATOR TRACK**

## Criteria for Appointment

In addition to their CVs, candidates at all levels will develop a comprehensive portfolio of their teaching experience and philosophy. Evaluation will also be based on feedback from a broad base of educational stakeholders and clinical stakeholders.

## Assistant Professor

Appointment at this rank requires excellence and productivity as a clinician and as a teacher. This rank requires documentation of clinical and teaching excellence. Scholarly work that can be evaluated is also required. This rank is the usual starting rank for physiatrists who have completed their residency, board certification, and have some evidence for teaching excellence. It is also appropriate for psychologists and neurophysiologists at the Ph.D. level who have some evidence of teaching excellence. Evidence for teaching ability should be documented in settings such as in the classroom, at the bedside, in the laboratory, and continuing education. Scholarly activities that exist, or are expected, can include activities such as articles in peer-reviewed journals, review articles, chapters, systematic reviews, books, software development, and web-based publications.

## Associate Professor

Appointment or promotion at this rank requires continued documented excellence and productivity as a clinician and continued high ranking as a teacher. Individuals at this level should have a demonstrated record of strong clinical and/or teaching leadership. Promotion to Associate Professor requires continued evidence of productive scholarly activity that can be evaluated plus regional recognition for clinical or educational expertise. Types of scholarly work can include, for example, articles in peer-reviewed journals, review articles, books, curricular development publications and chapters that can be documented to clearly impact the field outside of the University of Washington. A focus on the scholarship of integration such as systematic reviews and chapters is appropriate. Recognition beyond the University of Washington, as manifested by invitations to conferences, professional associations, review panels, and/or administrative leadership should be well documented.

## Professor

Appointment or promotion at this rank requires continued documented excellence and productivity as a clinician and mature scholarship. National recognition for scholarly work or for leadership in clinical and/or teaching programs is also required. Mentorship of junior faculty in teaching and scholarly development would be expected.

## Evaluation

The criteria for evaluation of clinician/educator faculty will focus on the following areas depending on the distribution of their clinical and teaching responsibilities: (1) Clinical Competence and Productivity, (2) Teaching Skills, (3) Academic Administration and (4) Scholarship.

## Clinical Competence and Productivity

The evaluation of clinical competence should be based on assessment of clinical skills, general knowledge in the candidate's professional field (e.g. medicine, psychology, and so on), knowledge specific to a sub-specialty area of expertise, humanistic qualities, interpersonal skills, and professional behavior and attitudes. The evaluation should also include assessment of effective leadership and management of a major clinical program.

Clinical competence should be evaluated by peer review at the departmental level. In addition to the appropriate advanced credential, (e.g. Board certification in Physical Medicine and Rehabilitation), a sufficient number of faculty associates to insure adequate representation should complete evaluation forms during each evaluation period. Some of these evaluators should be individuals who are outside the department but who have considerable contact with the clinician in a patient care setting. Evaluators can include both physicians and health professionals, such as occupational therapists, physical therapists, speech-language pathologists, rehabilitation counselors, prosthetist/orthotists, or psychologists.

The department chair will evaluate clinical productivity in accordance with performance expectations agreed upon at the time of appointment to the faculty, or altered during subsequent annual review.

## **Clinical Teaching Skills**

The evaluation of teaching skills should be based on the quality of teaching to preprofessional students, health professional students, residents, fellows, and practicing clinicians. Further, it should be assessed through evaluation of innovative teaching techniques or materials, instructional resources, and education programs. Finally, effective leadership and management of a major educational program should be assessed.

The assessment is carried out by a number of instruments including but not limited to the following:

(1) peer review of teaching at the departmental level (See Appendix C),

- (2) annual faculty self-report of teaching contributions and self-assessment inventory for clinical and classroom teaching,
- (3) review of ratings of classroom teaching to pre-professional students, health professional students, residents, fellows, and practicing clinicians,
- (4) review of teaching techniques or materials, instructional resources, and education programs, and
- (5) other evidence of teaching excellence such as teaching awards, letters of support, and teaching portfolio.

## <u>Scholarship</u>

Scholarship may focus on clinical practice, health services or applied clinical research, education, or other relevant fields. Often the scholarship of faculty members in the Clinician/Educator Track involves critical synthesis and integration of existing information on a particular question. This may include systematic reviews of the literature, book chapters and invitations to give state-of-art lectures.

An evaluation should be conducted at the departmental level including but not restricted to the following:

- (1) a review of the annual faculty self-report of scholarly activities,
- (2) letters solicited from qualified peers who are familiar with the individual,
- (3) review of quality of journal publications, chapters, and textbooks contributions on clinical and educational research projects,
- (4) the number of invited or peer-reviewed presentations at regional or national meetings,
- (5) curricular development and work such as course outlines, and
- (6) other evidence of clinical scholarship such as products designed or developed that are reflected in the teaching portfolio.

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# **APPENDIX A: DEAN'S OFFICE CV FORMAT**

## Curriculum Vitae

The curriculum vitae should contain the following information (where there is a listing, order chronologically):

- Personal Data: Name, Address, Phone, Place of birth, citizenship, if applicable; date of birth optional.
- **Education**: University of undergraduate and graduate degrees (indicate dates). (For graduate degrees list thesis title if applicable). Ok to list current degree pursuit activity, if accepted into a program. List degree expected and year expected to receive.
- **Postgraduate Training**: Internship, residencies, fellowships (place and dates).
- Faculty Positions Held: (place and dates).
- Hospital Positions Held and Other Pertinent Experience: (place and dates) Do not duplicate #3 above.
- Honors: Phi Beta Kappa, Sigma Xi AOA, Prizes, RCDA's, Markel Awards, etc.
- **Board or Specialty Certification**: All certifications regardless of profession (indicate date received).
- License to Practice: States and dates.
- **Professional Organizations**: Include committees and offices held.
- **Teaching Responsibilities**: List specific courses, specific responsibility and percentage of responsibility if shared course. Indicate role in teaching committees. List recent CME. List trainees during last 5 years, if primary mentor.
- Editorial Responsibilities: Mention only Editorial Boards. Do not mention occasional reviewing duties.
- **Special National Responsibilities**: Study sections, other Training & Research Grant Review Committees, and other similar responsibilities.
- **Special Local Responsibilities**: Department, University and Hospital committees. Do not duplicate teaching committees listed under Teaching Responsibilities
- **Research Funding**: Sources, dates and dollars. Include training grants. (List in chronological order, including agency; Include title; beginning and ending year; name of P.I. and Co P.I.'s; if you are neither, describe very briefly your role; list total dollar amount per year if you are P.I. or Co P.I., if you are neither list dollar amount only of your project within the grant).

- Bibliography Breakdown as follows:
  - Manuscripts in Refereed Journals: List authors in the order they appear in the original publication. Include manuscripts in press (i.e., accepted for publication). Number these articles consecutively and include the first and last page numbers of each article.
  - **Book Chapters**: Use the same format as above
  - **Published books, videos, software, etc**: Use the same format as above
  - **Other publications e.g. in non-referred journals and letters to the editor**: Use the same format as above
  - **Manuscripts submitted**: List separately with date of submission. Bot not list manuscripts in preparation or work in progress. Use the same format as above
  - Abstracts: Use the same format as above
- (**Optional**) **Other**: National invitational lectures, etc.

# **APPENDIX B: TOPICS FOR EDUCATOR'S TEACHING PORTFOLIO**

The educator's teaching portfolio may include some or all of the following topics:

- 1. Philosophy of Education. Articulation of one's philosophy of education allows for examination of the portfolio in the appropriate context.
- 2. Curriculum Development and Instruction Design. Evidence of scholarly activities surrounding new or revised courses, clerkships, rotations, or seminars, including curriculum objectives, teaching methods, instructional material and evaluation.
- 3. Teaching Skills. The focus on one's ability to deliver instructions to the learner. Evidence of teaching competency may be provided in the form of teaching evaluations, e.g. from students, peers, educational consultants, and others.
- 4. Assessment of Learner Performance. The process of making inferences about what an individual has learned including defining, designing, collecting, analyzing, and interpreting measures reflecting learning, e.g., involvement in creating and evaluating exams and exam performance.
- 5. Advising. The opportunity to document interactions with students, residents, fellows, and junior faculty in formal and informal settings.
- 6. Educational Administration. Service as course director, curriculum coordinator, resident/departmental/university committee member involved with educational projects and programs.
- Regional/National Scholarship. Activities which advance knowledge in the discipline of education via (1) peer-reviewed regional/national presentation and publications; (2) receipt of grant or contract based on peer review; (3) participation and service in professional educational organization.
- 8. Continuing Education. Documentation of record for continuing his/her own development as an educator and within their own medical specialty.
- 9. Honors and Award. Awards, certificates, honors as educator, clinician or scientists.
- 10. Long-term Goals. Opportunity for reflection, expression of vision and presenting projects in development.
- 11. Simpson, D. E., Beecher, A. C., Lindemann, J. C., & Morzinski, J. A. (1995). *The Educator's Portfolio*. Milwaukee, WI: Medical College of Wisconsin.

# **APPENDIX C: TEACHING EVALUATION FORM**

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