

**UNIVERSITY OF WASHINGTON SCHOOL OF MEDICINE  
DEPARTMENT OF PSYCHIATRY AND BEHAVIORAL SCIENCES**

**CLINICIAN TEACHER PATHWAY GUIDELINES  
FOR APPOINTMENT, EVALUATION, AND PROMOTION**

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**INTRODUCTION**

The Clinician Teacher Pathway is a University of Washington School of Medicine (UWSOM) academic track for those faculty involved in all four aspects of a traditional academic career (clinical care, teaching, research/scholarship, and administration/service) but whose primary commitment is to clinical care and teaching.

Clinician Teacher faculty members have the titles Instructor, Assistant Professor, Associate Professor, and Professor.

The criteria below are used for appointment and promotion within this track in the Department of Psychiatry and Behavioral Sciences.

Consistent with the University's expressed commitment to excellence, equity, diversity, and inclusion, contributions in clinical care, teaching, research/scholarship, and administration/service that address diversity and equal opportunity shall be included and considered among the professional and scholarly qualifications for appointment and promotion outlined below.

In addition, all candidates for appointment and promotion are expected to meet departmental and UW Medicine expectations for professionalism. Professionalism includes demonstrating excellence, respect, integrity, compassion, altruism, and accountability in all endeavors. Diversity of ideas, perspectives and experiences is integral to our mission. All individuals in our UW Medicine community are responsible for creating a welcoming and respectful environment where every person is valued and honored.

It is the policy and expectation of UW Medicine that all members of our community will conduct themselves in a professional manner in interactions with patients, colleagues in the University community, and the public. Leaders in our community are expected to model, promote, and advocate for a strong and visible culture of professionalism.

## **Appointment**

An individual in this pathway devotes the majority of their time to clinical practice and teaching at one of the University's affiliated clinical teaching sites. The individual must have a coherent, focused area of scholarship. The individual also may have a substantive administrative role, such as the leadership of an educational program, administration of a clinical program, or chairing a major committee within the Department or School of Medicine. Leadership in regional or national programs, especially those related to psychiatric education, may also be considered administrative service.

Specific criteria for initial appointment include:

1. M.D. or D.O. and clinical residency training necessary to meet the American Board of Psychiatry and Neurology certification requirements, or completion of an American Psychological Association accredited Ph.D. program and internship, or equivalent training.
2. Eligibility to receive a medical staff appointment at one of the major University of Washington affiliated teaching sites.
3. Excellent clinical competence, documented from training or practice settings.
4. Excellence as a teacher, documented in letters of recommendation and/or from training or practice settings.
5. Potential for development of scholarship.
6. Excellent professionalism.

At the time of appointment, the Chair and Chief of Service should define in writing for each individual clinician teacher their responsibilities and time allocation for patient care, teaching, administration/service, and scholarship.

## **Continuing Appointment and Promotion**

Clinician-Teacher faculty are evaluated for continuing appointment and promotion on the basis of: 1) clinical competence and clinical service; 2) teaching; 3) administration; 4) scholarly activity; and 5) professionalism. Criteria for promotion to each faculty rank are given in Appendix A, and definitions and methods of evaluation are provided below. Recognizing that each Clinician-Teacher faculty member has a unique professional activity profile and assigned responsibilities in teaching, clinical care, scholarship, and administration, the relative importance of each of these as criteria for promotion should be aligned with the relative time commitment to each activity established by the faculty member, Service Chief, and Chair.

### 1. Clinical Competence and Clinical Service

For promotion within the clinician-teacher pathway, the faculty member must be an excellent clinician. Evaluation of clinical competence should use regular peer evaluations and focus on two main areas: (1) fund of knowledge, problem-solving skills, management of complex patients, overall clinical skills, mastery in implementation of evidence-based treatments; and (2) humanistic qualities, responsibility, compassion, sensitivity to diversity, integrity, professional behavior and attitudes, interpersonal skills, and effectiveness in working in multidisciplinary settings.

Peer evaluations should be performed by other faculty and trainees who work with the individual and are able to assess the faculty member's clinical abilities. Peer evaluators should be chosen by the faculty member, Service Chief, and Chair. No more than half of the evaluations should be performed by trainees. These evaluations should be performed in an ongoing way throughout the faculty member's career, to allow early and ongoing feedback and to identify areas for growth.

At the time of initial appointment, each clinician-teacher should be informed of the expectations for their clinical practice and productivity. Examples include number and types of patients seen, clinical activity as measured by work RVUs (wRVUs), revenues, months of inpatient attending, half days of clinical outpatient practice, and types of clinical service provided. Specific guidelines and expectations should be individualized for and clearly communicated to each clinician-teacher by the Chair or their designee (e.g. the Chief of Service).

## 2. Teaching

Faculty members in the Clinician-Teacher pathway are expected to be excellent teachers. In addition, mentoring junior faculty and trainees is expected of senior faculty (Associate Professors and Professors) in this pathway and may include mentoring in teaching, clinical care, scholarship, and/or administration; providing career mentoring; and mentoring to promote diversity and equal opportunity. Evaluation of teaching includes assessment of direct clinical teaching and/or supervision, workforce development and training, didactic teaching, curriculum development activities, and mentorship activities.

Direct teaching includes lectures, seminars, small group sessions, clinical supervision, preceptorships, mentoring, Grand Rounds, and continuing medical education teaching of students, residents, fellows, practicing physicians, and other health care providers within the broader local and national community. The quality of direct teaching should be documented by standardized trainee evaluations, peer evaluations, evaluations from Grand Rounds and continuing education programs, and (as appropriate) letters

evaluating teaching and mentoring effectiveness. Special recognition of teaching and/or mentoring excellence, including local and national teaching awards and invitations to teach in the form of lectures, workshops, or other teaching programs at the local, regional, or national level, is also important in the evaluation of the quality and impact of the faculty member's teaching.

Curriculum development activities include the creation of courses, lecture series, training programs, rotations, clerkships, syllabi, web-based programs, videotapes/DVDs, clinical case vignettes, clinical simulations, and other innovative educational materials. The quality of these materials should be assessed by learner ratings, impact on learner practice and performance, use in other settings within or beyond UWSOM, recognition as an innovative and/or excellent curricular development on a regional or national level, and/or evaluation by internal or external experts.

When a clinician-teacher faculty member is appointed, the Chair, Service Chief, and Vice Chair for Education should specify the expectations regarding the type and quantity of their teaching activities. Examples include number of hours of clinical supervision per week, number and level of trainees supervised, amount and type of didactic teaching, involvement in continuing education activities. Specific guidelines should be individualized for and clearly communicated to each clinician-teacher.

### 3. Administration

Effective administration, development, and evaluation of teaching, mentoring, and clinical programs is crucial to the Department's success and we strongly support the involvement of clinician teachers in key administrative positions in the Department. However, administration is not required of faculty members in this track. For those clinician- teachers for whom program development and administrative work is expected, these activities should be evaluated at the time of promotion, with their teaching, clinical care, and scholarship activities.

Evaluation should begin with a narrative from the clinician-educator which describes the program administered or developed and its goals, the exact role of the individual in the program (e. g. clinic director, course director, training director), the relationship of the program to the department's mission, the users of the program or the population it serves, indicators of the program's ability to meet its goals (for a clinic this might include an increase in the number of patients served, improvements in outcomes, on-time performance or no-show rates; for a teaching program this might include achievements of students, residents or fellows leaving the program), the estimated number of hours/week spent in administration of the program or program development and evaluation.

Each clinician-teacher should also provide a description of other activities involving service to the department and/or University. This should include committee membership, the purpose and accomplishments of the committees listed and the level of involvement and/or leadership of the individual within the committee.

For those clinician-teachers with significant administrative responsibilities, evaluation of administration should include input from the individual's immediate supervisor, those they supervise, and (where possible) users of the service/program administered. Input from supervisees and users of the service should include an assessment of the clinician teacher's availability, ability to communicate ideas and information, ability to provide feedback, degree of respect for workers, ability to stimulate interest and/or enthusiasm for the program, ability to promote diversity and equal opportunity, encouragement of independent and/or creative thinking, development and effective communication of a vision for the program, and an overall assessment of their performance as an administrator.

#### 4. Scholarship

The Department views scholarship as an essential activity for clinician-teachers, and has the goal of developing clinician-teacher faculty members who approach clinical work and teaching in a scholarly manner, demonstrating critical thinking abilities, and teaching reflective and evidence-based practice, rather than having solely an apprenticeship model of training.

Scholarship may include the generation of new knowledge (the scholarship of discovery), the synthesis and review of existing knowledge (the scholarship of integration), and/or the development of novel educational methods and materials (the scholarship of teaching). In evaluating impact for faculty whose work is focused on policy or system improvement, other contributed documents, such as white papers, position statements, or program or implementation guidelines that have wide uptake and substantial influence, are also taken into account. Each clinician-teacher faculty member is expected to have a coherent scholarly focus, centered on the scholarship of teaching and/or related to the subject matter of their teaching activities (e.g. a particular psychiatric disorder, area of psychiatry or mental health, or specific patient population).

The *Scholarship of Discovery* refers to the generation of new knowledge through research and other scholarly activities related to policy and system impact, which is then disseminated through data-based, peer-reviewed publications in scientific journals. Clinician-teachers can work as principal

investigators or collaborators on research studies, contributing to the generation of the research idea, recruiting patients, conducting chart reviews, treating patients as part of a treatment study, participating in data collection and analysis, and/or writing up the results for publication.

The *Scholarship of Integration* refers to the synthesis and integration of existing information on a particular question. This includes writing systematic reviews of the literature, including meta-analyses or Cochrane Collaboration reviews, book chapters, or review articles published in peer-reviewed journals; writing or editing books or policy papers; or serving as the editor or on the editorial board of a journal.

The *Scholarship of Teaching* refers to the development of new educational methods and materials, and to the generation of new knowledge regarding education and teaching. Contributions in this area could include peer-reviewed publications of studies or reviews regarding educational methods, or the development of new curricula, educational software, audiovisual materials, web-based educational programs, or new methods to evaluate the success of educational programs and the progress of trainees.

For promotion, clinician-teachers are expected to demonstrate ongoing scholarly achievement, as evidenced by quantity and quality of a candidate's independently reviewed scholarly products. If a scholarly product is a data-based research paper or peer-reviewed review article, these presumably have already undergone external review as a prerequisite for publication (which can be evidenced by journal publication or solicited peer review or documentation of public impact). Other scholarly products might include curricula, websites, videotapes/DVDs, books, or other teaching materials. These can be published in a peer-reviewed forum such as MedEd Portal. Alternatively, products that have been nationally disseminated can be sent to external experts in the area for peer review, while materials or curricula used locally within the department or UWSOM should be reviewed by departmental faculty, including senior clinician-teacher faculty members. The individual clinician teacher's mentor, Chief of Service, the Vice Chair for Education, and/or the Chair should provide them with guidance regarding seeking appropriate independent review of scholarly products.

While some faculty members in this pathway may be ready for promotion with as few as six scholarly products, most will have more. In general, however, having a scholarly focus with first- and/or senior-authored products in this focus area and having a positive trajectory indicating the likelihood of continued, ongoing future scholarly achievement are more important for promotion than the exact number of scholarly products.

## **The Teaching Portfolio**

Every clinician teacher faculty member must develop a teaching portfolio to submit at the time of consideration for promotion. The portfolio documents the individual faculty member's teaching philosophy and the nature and evaluation documents for their teaching, mentoring, educational administration and leadership, scholarship, regional/national/international recognition, honors and awards, and long-term goals.

## **Professionalism**

Faculty members are expected to meet professionalism expectations, as outlined in the UW Medicine Policy on Professional Conduct.

Professionalism in clinical practice settings includes, but is not limited to, safeguarding the privacy and confidentiality of patient information, communicating effectively, observing established standards for patient safety and timely completion of medical records, participating in quality improvement initiatives, exercising cultural humility, reporting errors, and following rules for billing and compliance.

Professionalism in the conduct of research and other scholarly activities includes, but is not limited to practicing intellectual integrity, maintaining a focus on advancement of public health, demonstrating inclusion of and respect for diverse groups of stakeholders, offering expertise in response to public concerns (federal, state, regional and/or tribal entities), ensuring the welfare of human and animal research subjects, exercising diligent and unbiased acquisition, evaluation, and reporting of scientific information, adhering to university regulations for the conduct of research, and employing collegial, non-threatening and fair treatment of residents, fellows, students and staff. When appropriate, research should be undertaken and conducted in a manner that is inclusive of diverse populations.

Professionalism in education includes, but is not limited to respect for diverse experiences and perspectives, modeling community and civil discourse, a commitment to the highest standards of scholarship, innovation in teaching methods, and leadership through modeling of life-long learning.

Professionalism in administration includes but is not limited to respect for the culture and values of the academy, commitment to creation of collegial partnerships with co-workers one is responsible for and responsible to, support of the work of collaborative teams, recognition of the needs of patients and our professional community, and dedication to the mission of the institution.

## **Appendix A**

### **CLINICIAN TEACHER PATHWAY PROMOTION CRITERIA Department of Psychiatry & Behavioral Sciences University of Washington**

#### **ASSISTANT PROFESSOR**

Documented evidence of:

- excellent clinical competence and productivity
- excellence as a teacher
- scholarly achievement
- excellent professionalism

#### **ASSOCIATE PROFESSOR**

Documented evidence of:

- clinical excellence and productivity
- high ranking as a teacher
- a thoughtfully articulated teaching philosophy
- ongoing scholarly achievement with a coherent focus
- excellence in administration (if part of the faculty member's assigned responsibilities)
- excellent professionalism
- regional recognition as a clinician, teacher, or medical educator.

#### **PROFESSOR**

Documented evidence of:

- clinical excellence and productivity
- high ranking as a teacher and mentor
- a thoughtfully articulated teaching philosophy
- ongoing substantial, mature scholarship as reflected by a coherent body of high quality scholarly work
- outstanding administrative leadership (if part of the faculty member's assigned responsibilities)
- excellent professionalism
- national or international recognition as a clinician, teacher, or medical educator

Contributions in clinical care, teaching, mentoring, research/scholarship, and administration/service that address diversity and equal opportunity shall be included and considered among the professional and scholarly qualifications for appointment and promotion outlined above.