FULL-TIME CLINICAL FACULTY (PAID): CRITERIA FOR APPOINTMENT AND PROMOTIONS, DEPARTMENT OF REHABILITION MEDICINE

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Introduction

Consistent with the University's expressed commitment to excellence, equity, diversity, and inclusion, the Department of Rehabilitation Medicine 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.

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.

Goals and Definitions

The appointment of full-time clinical faculty (FTCF) should advance the academic and service mission of the SOM by:

- Enhancing access to UWSOM clinical departments' services for patients by providing a clinical service that is responsive to the increased demand for UW clinical services in a manner that is consistent with patient expectations and UWSOM standards in terms of timeliness and ease of access,
- Enhancing the management and efficiency of the UWSOM clinical services,
- Participation of FTCF in teaching and training of students, residents, or fellows.

FTCF is defined as a person:

- Whose appointment is 0.5 FTE or greater; and
- Whose sole employer for clinical practice is UWP, CUMG, or VA; and
- Whose primary responsibility is to provide direct clinical services.

Appointments

Consistent with the Faculty Code, these will be annual appointments for the academic year July 1 through June 30. Each year, faculty must vote to reappoint, and the department chair must forward recommendations to reappoint to the Dean. Reappointment decisions must be made by March 31 of the first year and by December 31 each succeeding year.

FTCF will carry the title "Clinical (Instructor, Assistant Professor, Associate Professor, or Professor), and if a physician or psychologist, Member (or Associate) of UWP.

Instructor

This level will be the usual initial appointment and requires that the appointees have completed their formal training and are Board eligible or the equivalent in the case of physicians and licensure in the case of psychologists. Clinical faculty members with the entry level degree for their respective profession must meet the requirements for Board certification, licensure or equivalent in their field. Appointment at this level will be based on excellence as a clinician, and teacher. Promotion beyond Clinical Instructor will depend on meeting the criteria for Clinical Assistant Professor.

Assistant Professor

Appointment at this rank requires that the individual have training and experience substantially beyond that required for the rank of Clinical Instructor and that the person has contributed to clinical care, medical or allied health education, or the professions of rehabilitation in a substantial manner, exceeding the expectations for Clinical Instructor. To be promoted to this level, all clinicians must be judged to demonstrate competence in both clinical care to patients and clinical supervision of trainees. In general, Board certification will be required for appointment or promotion to the rank of Clinical Assistant Professor or above in the case of physicians. In some circumstances, because of unusual qualifications or experiences or because the individual is an allied health professional, the requirement for Board certification may be waived.

Associate Professor

The rank of Clinical Associate Professor is reserved for those who have made high quality contributions, in clinical program development, clinical teaching, or service of a substantial nature to the mission of the department and the school. Individuals at this level have a demonstrated record of strong clinical leadership. Promotion to Associate Professor level generally would require continued evidence of productive clinical activity plus regional recognition for clinical or educational expertise.

Professor

Appointment or promotion to this rank is based on recognition as a leader in the discipline as evidenced by accomplishments in clinical care, clinical program development, service in national or international professional societies, or

scholarly publications. The candidate should show a strong commitment to the University and/or public service. National recognition for scholarly work or for leadership in clinical programs is also required.

Criteria for evaluation and promotions

The criteria for evaluation of FTCF for physicians and psychologists will focus on four areas: (1) Clinical Competence and Clinical Services/Productivity, (2) Clinical Teaching Skills, and Professional Service.

Evaluation of Clinical Competence and Clinical Services/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 or psychology), 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 Rehabilitation Medicine), a number of individuals should complete evaluation forms during each evaluation period. The number should be sufficient to insure adequate representation. Some of these evaluators should be individuals who are outside the department but who have considerable contact with the FTCF in a patient care setting. Evaluators should include both physicians and allied health professionals, such as psychologists, occupational therapists, physical therapists, speechlanguage pathologists, rehabilitation counselors, and prosthetist/orthotists.

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.

Evaluation of Clinical Teaching Skills

The evaluation of teaching skills should be based on the quality of teaching to 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 may be carried out by a number of methods including but not limited to the following:

- (1) peer review of clinical teaching,
- (2) review by students,
- (3) review of teaching techniques or materials, instructional resources, and education programs, or
- (3) other evidence of teaching excellence such as teaching awards or letters of support.

Evaluation of Professional Service

It is expected that professional service to the division, department, school, and community be demonstrated by all FTCF. Contributions should be evaluated by the role, initiation, and accomplishments of FTCF on committees, in projects, and in groups. Examples of professional service include but are not limited to:

- (1) Membership in and/or chairmanship of divisional, departmental, school, and medical center clinical committees and/or task forces at the level that is significant to the function of the committee and/or task force,
- (2) Establishing, implementing and/or directing clinical programs,
- (3) Service in regional, national, and international professional societies,
- (4) Contribution to non-academic organizations or groups (e.g. community, regional and/or national non-profits, and so on).

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