# **University of Washington Department of Surgery Regular Faculty: Criteria for Appointment and Promotion**

Approved August 2023

## The University of Washington Department of Surgery Mission Statement:

The Department of Surgery will provide compassionate and high quality patient care, train future generations of surgical leaders and conduct research in a collegial environment which embraces diversity and promotes inclusiveness.

### Introduction

An individual being considered for appointment to the Department of Surgery or a faculty member who is being considered for promotion in the Department must meet the criteria for the proposed rank as set forth below. The eligible voting faculty shall take into account the value the Department places upon contributions to teaching, research, patient care, administration, and behavior that fosters mutual respect, integrity and the ability to work with others. In addition, consistent with the University's expressed commitment to excellence, equity, diversity, and inclusion, contributions in scholarship, teaching, and service that address diversity and equity should be included among the professional and scholarly qualifications for appointments and promotion outlined below.

The Department defines an Academic Surgeon as an individual who possesses excellent clinical skills, the willingness and ability to impart them to his or her trainees, and the willingness and ability to pursue scholarly activities that advance the scientific and/or educational mission of Surgery. The Academic Surgeon also contributes to the administrative needs of the hospital, the Department, and the Medical School, and participates in the local, regional and national medical community.

Further, all faculty members of the Department are expected to exhibit professionalism at all times as a part of their duties and responsibilities and in order to be eligible for appointment and promotion.

All promotions and appointments of surgeons within the Department will be viewed with these criteria in mind. It is expected that all members of the regular faculty will exhibit professional behavior and will contribute to all three missions (clinical care, teaching, and scholarship) but will achieve different balances among these three activities. For promotion or appointment, the faculty member should excel in at least two of these three areas and demonstrate achievement in the remaining area.\* In addition, consistent with the University/s expressed commitment to excellence, equity, diversity, and inclusion (DEI), contributions in scholarship, teaching, and service that address DEI should be included among the qualifications for appointments and promotion outlined below.

<sup>\*</sup> Please see accompanying documents, University of Washington Department of Surgery "Faculty Elements for Appointment and Promotion" and "Ethics and Professionalism Review."

**Teaching** in surgery primarily takes place in the operating room, on the ward, and in the clinic. Residents and students are expected to participate in all patient care activities, and at the conclusion of trainee rotations, the trainees will provide written evaluation of the teaching efforts of the faculty. Teaching performance must be documented. The Departmental accumulated record of evaluations by students and residents will be consulted in the promotion process. Other elements providing evidence of teaching are outlined in the Department's Elements for Appointment and Promotion of Regular Faculty and in the Department of Surgery "Faculty Evaluation of Faculty Teaching" form. This evaluation considers teaching in the areas of medical knowledge, communication, professionalism, and systems-based practice. It is also helpful for the faculty member to develop a teaching portfolio if teaching is regarded as one of their strengths. The portfolio can contain a statement by the faculty member about their philosophy of education and long-term goals. It can also include evidence of curriculum development and design, activity as an advisor, work in educational administration, documentation of continuing education in the faculty member's own development as an educator, and honors and awards. If relevant, it can include the faculty member's involvement in the aforementioned areas such as the development of effective teaching strategies, courses, or curricula, outreach, and tutoring, as well as the recruitment, retention, and mentoring of scholars, students, and residents in an effort to promote diversity and equal opportunity.

Peer evaluation of teaching effectiveness by faculty who work with the individual will be collected through a formal process administered in the Department Faculty Affairs office. A minimum of three two peer teaching evaluations are requested annually before promotion to Associate Professor, and biennially and the year before promotion to Professor. At every evaluation period, both faculty evaluators should be different from previous year. At least one faculty evaluator should be from outside of the individual's Department.

**Scholarship** is broadly defined as contributions that have some permanence, thus, lending themselves for evaluation (e.g. publication through printed or electronic media) be it in research, education, patient care or administration. Scholarship in research is viewed by the department in its broadest sense to include not only research in basic science but also research in health services, outcomes, communications, leadership, behavioral science, teaching and all other matters that are pertinent to the development and functioning of modern Surgery. Scholarship is generally measured by the approbation of peers in journal publication, grant funding from outside agencies, and in books, monographs or electronic publications. The individual contributions of the author and their importance to the field will be of greater significance than the quantity of material produced. Contributions that advance clinical science or education will be held in the same esteem as those that advance basic science. The expert performance of clinical care may also be a scholarly endeavor in certain settings. Surgery is to some degree a "performing art," and as in other performing arts the expert public performance becomes a part of the faculty member's scholarly contribution to the University. This creative professional activity (CPA) may include the development and dissemination of original or innovative techniques in clinical or professional areas.

Regular faculty are not required to be independent investigators, but should demonstrate scholarship by either basic, clinical, or collaborative research, development of innovative clinical care, curriculum development, or program development. They are expected to make permanent contributions that advance fellow, resident, and student education. Innovative teaching

programs, textbooks, monographs, or comparative studies relating to education are valued similarly to basic research, extramural funding, and clinical trials and the publications that come from them. These may be demonstrated by the development of syllabi, published reports, textbook chapters, review articles, computer-based programs, videotapes, web pages, creation of teaching materials, or establishment of clinical programs; peer evaluation of teaching materials and clinical programs should be sought.

Clinical care is at the very core of a clinical department and advances the mission and vision of the School of Medicine by providing access to the most modern clinical care to the citizens of the region while providing the milieu in which students and residents can learn. This activity, which includes the effective utilization of complex systems, advanced techniques, application of the latest evidence-based concepts while teaching residents and strictly complying with all rules and regulations is expected to take considerable time and effort for a member of the Department of Surgery. A faculty member's clinical service and skills will be evaluated by physician evaluations from other faculty, review by Section Chief, Division Head, and Chair, and by referring physicians within the school and community. Evaluations of clinical performance by faculty, residents, and referring physicians who work with the individual will be collected through a formal process administered in the Department Faculty Affairs office. Evaluations by residents will be obtained from MedHub annually. The Departmental accumulated record of evaluations by students and residents will be consulted in the promotion process.

In addition to Resident evaluations, a minimum of two peer clinical care evaluations are requested annually before promotion to Associate Professor, and biennially and the year before promotion to Professor. At every evaluation period, both faculty evaluators should be different from previous year. At least one faculty evaluator should be from outside of the individual's Department.

The quantity of clinical work may also be evaluated by reference to national benchmarks and local benchmarks within the Department, taking into account the proportion of the faculty member's time devoted to clinical care (clinical FTE or CFTE).

While a surgical faculty member will have considerable clinical responsibility, faculty are also expected to pursue scholarly activities resulting in permanent contributions as outlined above, to engage in teaching, and to provide administrative service. When a significant portion of time is devoted to clinical care, it is done with the specific understanding that teaching is integral to this clinical activity. Individuals who concentrate on clinical activity more than basic science or other forms of research (see above) must demonstrate outstanding ability in clinical surgery and teaching, and their scholarly contributions will be geared more toward education than clinical or basic science.

## **Diversity, Equity and Inclusion**

All faculty are expected to actively participate in creating an inclusive, diverse, and equitable culture within the University of Washington. Contributions in scholarship, teaching, clinical care and service that address diversity, equity, and inclusion (DEI) should be included and be given due recognition in the academic advancement process. These achievements can take a variety of forms and include:

- A statement on their philosophy regarding DEI and long term goals in this area.
- Evidence to support education in DEI which could include curriculum development and design, and submission of training grants, mentoring of scholars, students, residents, and fellows.
- Innovative recruitment efforts for fellowship and residency candidates.
- Public service and outreach through the University of Washington and professional societies that addresses the needs of DEI locally, regionally or nationally.
- Partnerships with community-based organizations/groups and professional societies with a goal of improving health, wellness, and health equity in communities, improving translation and hospital navigation services, and health literacy.
- Scholarship through contributions either printed or electronic in the pillars of research, education, patient care, or administration and include peer review publications, grant funding, books/book chapters, monographs, electronic publications, videos, clinical program policies and practice standards.
- Research that discovers, documents, and addresses health disparities in chronically marginalized populations; research in education focusing on best practices to promote DEI and development of core curriculum.
- Clinical care: outreach clinics, efforts at remedying healthcare disparities through provision of clinical care.
- Community outreach to vulnerable populations such as injury prevention and violence intervention programs.
- Committee Service: Serving on diversity committees at any level (national, department, division); implementing, creating, and disseminating best practices to promote equal opportunity, diversity, equity, and inclusion.
- Administration and service in the study, development of resources, education, and methods, communication, and professionalism within the mission of the University of Washington in the area of DEI.
- Documentation of Honors and awards recognizing contributions to DEI.
- A record of peer evaluation in DEI work through a formal process and format/form.

These contributions towards promoting DEI will be considered in the advancement process and will be evaluated similarly to other forms of scholarship, teaching, clinical activities, and administrative leadership. Because achievements in the DEI space may occupy other sections of the CV (within the 3 pillars), it is acceptable that they be listed in both areas.

Administrative service includes those activities necessary to run the Department, the School, and the medical center where clinical activity and teaching takes place. Organization of departmental teaching conferences, grand rounds, and morbidity and mortality conferences, quality assurance activities, and service on hospital and medical school committees fall into this category. Administrative responsibility for teaching programs will be given special weight. Junior faculty will be expected to participate on committees after the first few years on faculty. More senior faculty will be expected to chair committees and take initiative in setting departmental, hospital and school direction.

**Professionalism**: Appropriate professional behavior is expected of all members of the Department of Surgery. As described in the UW Medicine Policy on Professional Conduct, professionalism encompasses a commitment to excellence, humanism, accountability, and altruism. Faculty members in the Department are expected to demonstrate professionalism in all aspects of their work including everyday duties and responsibilities. For promotion to each successive rank in the Department, a faculty member is expected to grow in their fulfillment of this commitment and to be or become a role model for professionalism. Demonstrated growth in professionalism may occur in any aspect of a faculty member's work, including formal or informal leadership; mentoring; service activities for the Department, School or University; and the core mission activities of teaching, research and clinical care, including, if applicable, engagement in activity designed to remove barriers and increase participation by groups historically under-represented in higher education. Annual or semiannual faculty reviews will include an evaluation for professionalism, and these reviews will be included in promotion materials for the departmental Appointments and Promotions Committee.\* Before such a review, the Division Chief (for regular faculty, or the Chair for review of a Division Chief) will choose (in consultation with the faculty member) three venues where the faculty member works, e.g., the O.R., one of the surgical wards, and a surgery clinic, and arrange to have the Nurse Manager in each of those locations solicit feedback from staff regarding the professionalism qualities listed on the form. These will be transmitted without identification of the specific staff from the manager to the Division Chief (or to the Chair for Chiefs) and summarized in the discussion during annual review.

#### SPECIFIC CRITERIA-

#### **Assistant Professor**

An individual being considered for Assistant Professor will have completed their clinical training, be Board Certified or Eligible, and be licensed to practice in the state of Washington. In addition, the candidate will have completed suitable training to permit the candidate to undertake a career in teaching and research. Such individuals will typically have published papers as first author in refereed journals and have completed an advanced, academically oriented clinical fellowship or equivalent post-residency or post-doctoral research training. Initial appointments are ordinarily for a three-year term. In the second year, faculty senior in rank will evaluate the candidate's performance and vote on reappointment to a second three-year term. A person may remain as an Assistant Professor for six years.

#### **Associate Professor**

Review for promotion occurs by the sixth year after appointment as Assistant Professor.

A candidate for Associate Professor will be expected to have shown productivity and advancement in at least two of the three areas, teaching, scholarly productivity, and clinical care. A candidate for Associate Professor should have developed a reputation beyond the School of Medicine as well as be recognized by peers, supervisors, and reviewing committees within the Department and the School. A prime consideration is whether a candidate's professional career is developing in a manner that promises to make the candidate ultimately eligible for promotion to the next level.

Evidence of **teaching** includes a substantial record of excellence in teaching, and substantial progress in developing teaching programs, writing scholarly manuscripts or chapters in textbooks, and/or presenting original data regarding teaching effectiveness or other aspects of the educational mission of the department. The faculty member will have begun to receive recognition from outside the University for their contributions, and will have a documented record of successful teaching, and of participation in local, regional, and national organizations. Evidence of teaching also includes faculty who have exceptional skills in a unique discipline or procedure deemed essential by the department, and who have imparted the techniques to appropriate trainees.

Evidence of **scholarship** should be present as outlined in the Department's Elements for Appointment and Promotion of Regular Faculty. No fixed minimum number of grants, publications, monographs, chapters, teaching syllabi, or other materials is required, but the number and quality should give evidence that the candidate is in an accelerated phase of their career and shows promise of continued independent scholarship and productivity. A candidate will typically have begun to receive recognition from outside the University for their contributions, and will have a record of participation in local, regional, and national organizations.

Provision of excellent **clinical care** is an important activity in the Department and School of Medicine, and will be given appropriate consideration. A faculty member's clinical service and skills will be evaluated by physician evaluations from other faculty, review by Section Chief, Division Head, and Chair, and by referring physicians within the school and community.

Evaluations by faculty and referring physicians will be collected through a formal process administered in the Department Faculty Affairs office. The quantity of clinical work may also be evaluated by reference to national benchmarks and local benchmarks within the Department, taking into account the proportion of the faculty member's time devoted to clinical care (clinical FTE or CFTE). Directing a defined clinical program is also valued in this context. Clinical care will be evaluated as described in the Department's Elements for Appointment and Promotion of Regular Faculty\*.

Administration and Professionalism: It is expected that a candidate for Associate Professor will be participating in Departmental administrative activities and will have demonstrated professionalism. No specific quantity of administrative work is specified. Administrative activities specifically related to the educational mission of the Department will be given special consideration. Other elements of administration may include organization of Departmental teaching conferences, service on Departmental, hospital, and medical school committees, and acting as head of a section, division, or other administrative unit in the Department or School.

#### **Professor**

It is recognized that the rank of Associate Professor is an honorable one and that not all faculty members may be promoted to Professor.

A candidate must demonstrate outstanding, mature, and ongoing scholarship. Excellence in teaching as well as scholarly activity is required. Such an individual will be distinguished for a substantial record of investigation leading to significant advances in their field. Alternatively, they will have made substantial contributions in clinical research or medical education. Such an individual will have achieved national and/or international recognition for scholarly work or leadership in clinical and teaching programs.

Excellence in teaching must be documented.

Excellent clinical care and substantial administrative effort are also expected.

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<sup>\*</sup> See attached document, "University of Washington Department of Surgery - Elements for Appointment and Promotion of Regular Faculty."