

FULLTIME CLINICAL FACULTY

Department of Surgery, University of Washington School of Medicine Appointment and Promotion Guidelines

June 2023

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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

The full-time clinical faculty (FTCF) title is for clinicians who generally devote the majority of their time to clinical care at one of the University's major approved clinical sites.

FTCF is defined as a person:

- Whose appointment is 0.50 FTE or greater; and
- Who does not have clinical practice outside of UWP or CUMG except with Sites of Practice Committee and Dean approval; and
- Whose primary responsibility is to provide direct clinical service

FTCF have the title Clinical Instructor, Clinical Assistant Professor, Clinical Associate Professor, or Clinical Professor where appropriate, and Member of University of Washington Physicians (UWP) or Children's University Medical Group (CUMG).

Regular faculty at the rank of Associate Professor or Professor may resign from the faculty and apply for appointment to a FTCF position in accordance with the process defined for FTCF appointments. Assistant Professors may apply for appointment to an open FTCF position, provided they have not yet completed four academic years in that rank. If they have completed four academic years at that rank, permission for a change to FTCF is required from the Dean. FTCF may apply for appointment to a regular faculty position in accordance with the process defined for regular faculty appointments.

Full-time clinical faculty will not be eligible to submit research grants and cannot be assigned laboratory space. The Department chair may approve a variation from this policy on a case-by-case basis.

APPOINTMENT AND PROMOTION CRITERIA

Paid clinical appointments are annual with no limit to years of renewal. At the time of new clinical faculty appointments, the specific scope of responsibilities, time commitments, clinical work load, etc., will be established by mutual agreement between the clinical faculty member and the division

chief or the division chief designee and approved by the Chair. These mutually agreed upon responsibilities will be reviewed annually and, if necessary, updated to form the basis for renewal or non-renewal of the clinical faculty appointment. Decisions regarding reappointment are made by March 31 of the first year and by December 31 each succeeding year. 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.

Clinical Instructor:

Entry level for FTCTF is usually at the rank of Clinical Instructor. At the time of appointment, clinical instructors have demonstrated their potential for excellence in clinical care and teaching.

Key Criteria for Appointment to Clinical Instructor

- M.D. degree (or equivalent) and the clinical training needed to meet relevant board certification or subspecialty requirements
- Excellent clinical competence, documented from residency, fellowship, or practice settings

It is expected that appointees will contribute to the divisional program in patient care and in teaching programs when students and/or residents or fellows are present in the appointee's site of practice. While it is not a requirement for appointment, professional service or scholarship may be considered. Promotion beyond Clinical Instructor will depend on meeting the criteria for Clinical Assistant Professor.

Clinical Assistant Professor:

This rank requires that the individual has evidence of training or clinical practice experience beyond that required for initial appointment to the rank of Clinical Instructor. If being appointed directly to Clinical Assistant Professor, time in rank, prior rank at another institution, evidence of outstanding patient care, patient-related service excellence, professionalism and contribution to medical education will be considered. If being promoted from Clinical Instructor, a candidate must have demonstrated excellence in professionalism, clinical competence and clinical productivity and excellence in teaching when the clinical practice site involves students and/or residents or fellows, as outlined in the goals established for the FTCTF.

While not a requirement for appointment or promotion to Clinical Assistant Professor, professional service and scholarship may be considered. In general, current Board certification will be required for appointment or promotion to the rank of Clinical Assistant Professor or above. In rare circumstances, because of unusual qualification or experience, the requirement for current Board certification may be waived.

Clinical Associate Professor:

This rank requires that the individual have clinical experience which has matured over time with local or regional recognition for clinical excellence. If being appointed directly to Clinical Associate Professor, time in rank, prior rank at another institution, evidence of outstanding patient care, patient-related service, excellence, professionalism and contribution to medical education will be considered. If being promoted from Clinical Assistant Professor growing maturity and excellence

must be demonstrated in professionalism, clinical competence, clinical productivity and teaching when the clinical practice site involves students and/or residents or fellow.

While not a requirement for promotion to Clinical Associate Professor, professional service and scholarship may be considered. Criteria are evaluated as described. In general, current Board certification will be required for appointment or promotion to the rank of Clinical Associate Professor or above. In rare circumstances, because of unusual qualification or experiences, the requirement for current Board certification may be waived.

Clinical Professor:

Appointment or promotion to the rank of Clinical Professor is based on local and regional recognition as a leader in the discipline as evidenced by accomplishments in clinical care, clinical program development, teaching, service in national or international professional societies or scholarly publications. Distinguished and substantial professional activity in patient care over an extended period of time is required. Dedication to the programs of the division, department and school will be considered. Promotion from Clinical Associate Professor position should reflect greater maturity and excellence in all aspects: professionalism, clinical competence, clinical productivity and teaching when the clinical practice site involves students and/or residents or fellows.

While scholarship is not a requirement for FTCF track, for promotion to the level of Clinical Professor, the faculty must demonstrate, at minimum, a regional reputation:

- Through a consistent record of regional or national lectures and presentations, curriculum and/or program development
- By making significant administrative contributions to national/international professional societies.
- Leadership roles within UW Medicine are also considered in evaluation. Each of these criteria will be evaluated as described below.

Emeritus:

Emeritus status will be considered for a clinical faculty member who has retired from clinical activities and who's clinical, professional service, teaching or scholarly record has been highly meritorious. Emeritus appointments will be reserved for clinical faculty who have made sustained and substantial contributions to the missions of the division, department and school. In general, Emeritus appointments will require at least ten years of prior service and achievement of the rank of Clinical Associate Professor or Clinical Professor.

ANNUAL EVALUATIONS AND EVALUATION CRITERIA

Separate from the reappointment process, there is an annual review that is completed each year until they attain promotion to Clinical Associate Professor and then every two years, per department process for all regular faculty. These reviews will be conducted by the Division Chief or his/her designee. The FTCF will fill out a self-assessment and this will be used, along with specific criteria for the FTCF to perform the evaluation.

At the time of initial appointment of a FTCF, guidelines should be established that can be used for the evaluation of clinical service and productivity. Specific guidelines should be individualized for

each FTCF and should be developed by the division head and service chief with the concurrence of the department chair.

Professionalism:

Professionalism should be assessed annually by the Division head as part of the annual review process. A faculty member is rated as consistently meeting expectations by demonstrating:

- Respect for colleagues, trainees, patients, staff and visitors.
- Sensitivity and responsiveness to other's culture, age, gender, and disabilities.
- Responsibility as a leader and positive role model.
- A commitment to working as a team member who is accountable to others, confronts unprofessional behavior, fairly distributes finite resources, and works constructively to support established operational goals.
- Patient confidentiality, timely completion of medical records, accurate professional fee billing.
- Commitment to improving quality of care, patient safety, and appropriate use of hospital resources.
- Management of conflicts of interest.

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, and clinical care, including, if applicable, engagement in activity designed to remove barriers and increase participation by groups historically under-represented in higher education.

Clinical Care:

Examples of clinical care guidelines include number of WRVUs budgeted and produced, patients seen, clinical revenues, half days of clinic practice, weeks of inpatient attending, and types of services to be provided. These guidelines will be incorporated into the evaluation process.

Assumptions concerning productivity (i.e. WRVUs) that are related directly or indirectly to the availability of salary support for a particular FTCF should be specifically defined by the division head and department chair in writing, and the FTCF should be informed of the specific expectations for productivity.

Peer clinical evaluations:

For promotion on this track, the faculty member must be an excellent clinician. Peer clinical evaluations are conducted using a structured format adopted by the Department. Evaluations focus on two main areas:

- Medical knowledge, problem-solving skills, management of complex patients and overall clinical skills.
- Professionalism, responsibility, compassion, and management of the psychosocial aspects of illness.

A minimum of two peer clinical evaluations are requested annually before promotion to Clinical Associate Professor and Clinical Professor. Peer evaluations are chosen by the faculty member and Division Chief. Peers are usually faculty who work with the individual in the same clinical setting; however, in some instances non-physicians who work closely with the faculty member in clinical settings, such as a nurse practitioner, may provide an evaluation. Both of the faculty evaluators

should be different from the previous year and at least one faculty evaluator should be from outside of the individual's Department.

Evaluation of Clinical Teaching Skills

When the clinical practice site of the FTCF involves students and/or residents or fellows, the evaluation of clinical teaching skills of FTCF in the Department of Surgery should be part of the FTCF's self-review and a part of the evaluation conducted by the Division Chief. Criteria may include the following evaluation tools: 1) Clinical Teaching Assessment Forms collected from medical students, residents, and fellows; 2) ratings of classroom teaching; 3) ratings of lectures given for continuing medical education courses; 4) ratings of teaching skills demonstrated in other; and 5) peer ratings. If relevant, it can include the faculty member's involvement in the development of effective teaching strategies, courses, or curricula, outreach, and tutoring, as well as the mentoring of students, and residents in an effort to promote diversity and equal opportunity.

Evaluation of 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.
- 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.
- Clinical care: outreach clinics, efforts at remedying healthcare disparities through provision of clinical care
- Committee Service, administration, hospital service, and professionalism within the mission of the University of Washington in the area of DEI.

Optional Activities:

Evaluation of Professional Service

Professional service to the division, department, school, and community are not required for appointment or promotion to FTCF, but may be part of the position offered by Divisions. Examples of professional service include (not exclusively):

1. Membership in and/or chairmanship of divisional, departmental, school, and hospital clinical administrative/leadership positions.
2. Establishing, implementing and/or directing clinical programs.
3. Service in regional, national, and international professional activities.
4. Contribution of medical expertise to non-academic organizations or groups (e.g., community, regional and/or national non-profits).

Evaluation of Scholarship

Objective evidence of scholarship is not required for faculty appointment or promotion to FTCF. Although FTCF are not expected to be independent investigators, they may demonstrate scholarship by collaborative research, curriculum development, or program development. Examples of scholarship include (not exclusively):

1. Surgical Education (e.g., development and implementation of curriculum, teaching strategies, testing methods). This should include some end product that can be evaluated, such as syllabus materials, published reports, textbook chapters, computer-based programs, videotapes, etc.
2. Clinical research (disease descriptions, case reports, participation in clinical trials, scholarly reviews in peer-reviewed journals, and book chapters).
3. Managerial development in surgery or surgical education, which should be published whenever possible.