DEPARTMENTAL GUIDELINES ON APPOINTMENTS, PROMOTIONS AND ACCELERATED ADVANCEMENTS

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The Department of Medicine, like all academic departments, operates under the policy and procedures of the Academic Personnel Manual (see table below or go to: http://www.ucop.edu/academic-personnel-programs/academic-personnel-policy/). In interpreting these policies and procedures, several departmental expectations and standards also apply.

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<th>POLICY</th>
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| Academic Personnel Records          | APM 160 http://www.ucop.edu/academic-personnel-
                                          programs/_files/apm/apm-160.pdf |
| Appointment and Promotion (general) | APM 200 http://www.ucop.edu/academic-personnel-
                                          programs/_files/apm/apm-200.pdf |
| Review and Appraisal Committees     | APM 210 http://www.ucop.edu/academic-personnel-
                                          programs/_files/apm/apm-210.pdf |
| Professor (Ladder Rank) Series      | APM 220 http://www.ucop.edu/academic-personnel-
                                          programs/_files/apm/apm-220.pdf |
| In Residence Series                 | APM 270 http://www.ucop.edu/academic-personnel-
                                          programs/_files/apm/apm-270.pdf |
| Clinical “X” (Medicine) Series      | APM 275 http://www.ucop.edu/academic-personnel-
                                          programs/_files/apm/apm-275.pdf |
| Adjunct Series                      | APM 280 http://www.ucop.edu/academic-personnel-
                                          programs/_files/apm/apm-280.pdf |
| Health Sciences Clinical Series     | APM 278 http://www.ucop.edu/academic-personnel-
                                          programs/_files/apm/apm-278.pdf |
| Clinical Series (volunteer)         | APM 279 http://www.ucop.edu/academic-personnel-
                                          programs/_files/apm/apm-279.pdf |

For all promotions, the department expects evidence that the faculty member is at least maintaining if not accelerating the rate of accomplishments in all of the relevant domains, including teaching and service as well as research. Although different faculty in different series may have varying areas of emphasis, ongoing contributions to teaching and service are always relevant.
For promotion in the Ladder Rank or In-Residence series, which are considered identical for promotion purposes within the Department, the Department requires all of the criteria in the APM. The Department expects faculty members in the Ladder Rank—FTE and In Residence series to build programs, mentor trainees, and generate the maximum impact from the investments and commitments associated with promotion. Promotion requires individual excellence in research. Traditional indicators, such as Principal Investigator status on grants and consistent position as first or senior author on publications (or other product of joint effort), remain key hallmarks of the successful researcher. However, they are not the sole indicators of success in the present collaborative research environment. Consequently, both individual and collaborative studies are valued and will be assessed.

For promotion to **Associate Professor**, the Department places great emphasis on two criteria for advancement, publication and research support, as measures of creative research that will advance science or improve health, and as predictors of the likelihood of long-term success and funding. Specifically, promotion to Associate Professor or above requires:

1. **Publication of research in major, high-impact journals.** Regardless of authorship order, the contributions of the faculty member seeking promotion must be substantial, unique, and of the highest quality. In all cases the promotion package must clearly describe the specific, significant and unique scholarship that the candidate brought to the work and his/her contributions to the project. This is especially critical when the faculty has played a key role in collaborative science and holds a middle author position on manuscripts being offered as grounds for advancement. In the case of middle authorship, internal and external collaborators and the senior author of crucial manuscripts must provide letters that clearly provide specific and detailed descriptions of the faculty member’s contributions that enabled the creative scholarship described in the publication. Such letters should also describe the importance of these contributions, so that they can be properly considered during the promotion process.

2. **Grant or contract support as principal investigator.** Examples of such support include:

   a. NIH RO1 or equivalent peer-reviewed grants or contracts (from sources such as the Department of Veterans Affairs, Department of Defense, or Center for Disease Control.)
   b. NIH or equivalent Career Development Award, if paired with peer-reviewed grants from professional societies or major foundations. In this instance, an NIH RO1 equivalent that is under review or revision would strengthen the application
   c. Major contracts from commercial sources, if the NIH and other not-for-profit agencies are unlikely to fund the research, the PI has made significant intellectual contribution to the project, and the research is likely to result in significant contributions to science or health.
For promotion to **Professor**, He/she must be the leader of an exceptional independent research program and/or have key leadership roles in collaborative studies. The candidate must have a longstanding record of exceptional scholarship, which most often includes senior authorship on high impact publications of original research. The candidate may also have played a leadership role on, and made critical contributions to, publications of high impact collaborative research. The candidate should have a sustained record of extramural funding, which most often will include principal investigator funding, and must have evidence of effective teaching and supervision as demonstrated by the number and stature of his/her trainees.

For promotion to **Professor, Step 6** the candidate must demonstrate a sustained national, and in many cases international, reputation. He/she must have sustained the same level of competence as used for promotion to Professor (noted above).

Research investigation is broadly defined to include basic, translational and clinical research, including epidemiology, outcomes and health services research, and biostatistics as well as research in social sciences, public policy, ethics, bioinformatics and health economics, among others. Investigation also includes the development of innovative methods/technologies and/or novel applications of existing methods and technologies.

The Department is looking for publications and projects that will contribute to science and health, and not simply quantity of publication or awards for salary support. Finally, the Department may occasionally find that the best external person identified by a national search does not currently have the desired support but is deemed by the Department to be the best candidate and is likely to meet Departmental standards in the future.

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**CLINICAL X SERIES**

Appointments in this series will require evidence of substantial scholarly activities in addition to superior teaching. The Clinical X series should not be considered an alternative for individuals who have “failed” in the ladder track or In---Residence series. This series rewards superior educators, who develop and lead innovative programs. This series also recognizes truly exceptional teachers, especially when these teachers contribute substantially to the content that they teach, and outstanding clinicians who develop innovative programs of national and international distinction. Please refer to the attached guidelines (See Educator’s portfolio ----- [http://medschool2.ucsf.edu/academy/Educators_Portfolio](http://medschool2.ucsf.edu/academy/Educators_Portfolio) or Quality ).

Titles in the Clinical “X” (Medicine) series may be assigned to academically qualified full---time salaried faculty in the Department. The criteria for appointment or advancement in this series include educational leadership, teaching, professional competence and activity, creative work, and University and public service. The weighting of these criteria differs for the Clinical “X” series, in that, appointees in this series will normally carry a heavier load of educational leadership, teaching, clinical service, or University service than appointees in other Academic Senate series.

For promotion to **Associate Professor of Clinical Medicine**, the Department places great emphasis on contributions to education along with sustained regular involvement in teaching and evidence of excellence in teaching. Teaching must represent a major commitment and must be performed at a
superior level as evidenced by nomination or election to teaching awards, or by consistently outstanding evaluations by students, housestaff, and fellows who have had contact with the faculty member.

Clinical or University service should be unusually valuable to the Department or the School as shown by its volume, quality, uniqueness, or importance to other clinical and teaching programs. This includes leading major clinical or educational programs, as well as serving, especially as Chair, on key University and Departmental committees. The candidate may have a reputation as an innovator in approaches to diagnosis, treatment or prevention of disease, applications of technology to clinical care and/or in developing models of care delivery.

Creative activity includes the generation and publication of new knowledge, as well as the development of new approaches to clinical disorders; education of students, housestaff, and fellows; delivery of health care; or administration and program development, especially of educational activities and public policy. National (at the Professor rank) or regional (at the Associate professor rank) recognition for these creative contributions is required. Evidence of this recognition includes publications in peer-reviewed journals or chapters in major textbooks of medicine, and may also include invitations to lectureships at national meetings, visiting professorships, or election to office in regional or national specialty societies.

For promotion to Professor of Clinical Medicine, the Department expects the candidate must have a strong regional, and most often national, reputation as an independent leader in education. He/she must have developed innovative teaching methods, curricula, educational policy or educational assessment tools, or have performed influential research related to education. The candidate’s expertise must be demonstrated through scholarship which may take the form of influential first and senior author publications related to education, or educational materials developed by the candidate and adopted for use regionally or nationally. For clinicians, there must be strong regional, and most often national, reputation as an independent expert who has influenced a clinical field; must have influential scholarship in the area of clinical expertise; should be actively teaching in the clinical field.

For promotion to Professor of Clinical Medicine, Step 6, the candidate must demonstrate a sustained national, and in some cases international, reputation as an educational leader and innovator, and must be considered to be among the best in the country in the development of educational methods, curricula, policy and/or assessment tools, or in the conduct of educational research. The candidate’s expertise must be demonstrated through high impact scholarship that influences the field nationally.

HEALTH SCIENCES CLINICAL SERIES

The Department of Medicine follows the UCSF School of Medicine guidelines that appear below. Appointees in the H.S. Clinical Series teach the application of basic sciences and clinical procedure to clinical practice in all those areas concerned with the care of patients. Several types of individuals may be appointed to the Clinical Series. Most, but not all, will be physicians and, of these, most will have completed their Specialty Board training; some other individuals who participate in patient care, do not have the M.D. degree (i.e., Clinical Psychologists).
A principal factor for appointment and promotion in the HS Clinical Series (Salaried) is a particular competence appropriate to the clinical specialty. Candidates should have a record of active participation and excellence in teaching and clinical care activities. It must be emphasized that merit and accomplishment rather than time in grade are the major factors determining the rate of advancement. Instructors will normally serve for one or two years, Assistant Professors and Associate Professors for six to eight years. At the Assistant and Associate levels merit reviews are carried out every two years, and every three years at full Professorial rank. However, there is no reason why a clinical faculty member of exceptional ability should not be merit advanced or promoted more rapidly.

Exemplary professional practice, a strong commitment to teaching, supervision of training and health care programs, and administration of health care facilities should comprise a substantial portion of the academic effort of Salaried Clinical Series faculty members. These are essential contributions to the mission of the University and will be weighed heavily in decisions on academic advancement (comparable to research activities in the Tenure or in Residence Series). Since Salaried Clinical Series faculty are required to devote a major part of their time to teaching and clinical service, they have less time for formal creative work than most scholars at the University. However, they are encouraged to utilize their clinical experience as the basis for clinical research and other creative work. Faculty members are strongly encouraged to use the Systems Innovation, Quality Improvement & Patient Safety Portfolio (see attached) that allows them to provide richer descriptions of their quality and safety contributions. Finally, faculty in this series should be actively and effectively involved in University and public service by participating in the affairs of the department, school, hospital, profession and community.

For appointment at the Clinical Instructor level, individuals holding the Doctor of Medicine degree will normally have fulfilled the formal academic requirements for certification by an American Specialty Board, but need not have taken the examination or fulfilled the practice requirements (i.e., board eligible). An appointment as Clinical Instructor is to be viewed as an interim appointment during which time the appointee and the Chair of the Department will mutually evaluate their agreements and expectations. There is a two—year limit of service in the salaried Clinical Instructor title.

For appointment at or promotion to the Assistant Clinical Professor level or higher, individuals holding the Doctor of Medicine degree should normally be certified by the appropriate Specialty Board of their discipline, or the foreign equivalent, but in the case of exceptional merit, this normal requirement may be waived.

Appointment at or promotion to the rank of Associate Clinical Professor should be reserved for individuals who are excellent teachers and have demonstrated a high degree of professional competence. Physicians and other health care professionals at the Associate rank will normally have achieved regional recognition as a referral physician and/or consultant. Evidence of creative achievement, as demonstrated by the development of innovative programs in health care, professional practice, teaching and training, or in transmitting knowledge in a body of publications will strengthen the proposal for promotion. Review committees will also evaluate the amount and quality of the
candidate's University and public service (e.g., participation in the affairs of the department, school, hospital, profession and community).

Appointment at or promotion to the rank of Clinical Professor is normally reserved for individuals who have a reputation for outstanding competence within a clinical specialty in the areas of teaching and professional activities. The candidate may have a leadership role within the institution, department or hospital, receive nationwide referral patients, or serve on specialty boards and/or professional societies. In addition there should be some evidence of creative achievement, and a strong commitment to University and public service.

Advancement to Clinical Professor, Step 6 will be granted only on evidence of continuing great distinction in both University teaching and professional competence, in addition to outstanding accomplishment in any of the areas listed above as evidenced by national or international recognition.

VOLUNTEER CLINICAL FACULTY

Members of the Clinical Series Without Salary (volunteer clinical faculty) must spend a minimum of 50---75 hours annually teaching UCSF students, residents and/or fellows at the Medical Center or at other hospitals. Exceptions to this rule will be permitted only in rare instances, and the reasons for each exception must be carefully and fully documented. Attendance at grand rounds, seminars and the like on a non---participating basis, which is part of a faculty member’s own continuing education, should not be counted as part of this time commitment.

Volunteer clinical faculty should be highly effective clinical specialists and teachers, but not necessarily academically distinguished. Instructor (WOS) will usually serve for two years, Assistant Clinical Professors (WOS) for eight years and Associate Clinical Professors (WOS) for six years, although promotion is not automatic. Excellence in teaching and clinical care activities are more important than time in grade for determining the rate of advancement. Since this series is unsalaried, there are no merit or step advances at two/three years intervals.

ADJUNCT SERIES

Appointment in the adjunct series is predominantly for individuals engaged in research or other creative work and who participate in teaching, or to individuals who contribute primarily to teaching and have a limited responsibility for research or other creative work; these individuals may be professional practitioners of appropriate distinction. Appointees with titles in this series also engage in University and public service consistent with their assignments. In general, promotion in this series is based on the In---residence or Clinical X criteria, depending on the individual’s specific job description. Instructors will usually serve for two years, Assistant Adjunct Professors for six to eight years and Associate Adjunct Professors for six to eight years. Advancement to Adjunct Professor, Step 6 will be granted only on evidence of continuing great distinction in research, teaching or professional competence.
Adjunct appointments for individuals who are not full-time in the department require evidence of substantial, ongoing, continuous contributions in research, with an important teaching component. In general, these criteria can be met by being principal investigator on a grant based in the department, by continuous and ongoing involvement as an important co-investigator on a departmental grant, or by continuous and ongoing responsibilities in the teaching of research trainees in the investigator’s own laboratory. Adjunct appointments will not be used for honorific or symbolic purposes.

**ADDITIONAL ISSUES**

**CANDIDATE’S REPUTATION**

Appointment as Associate Professor requires, at a minimum, a strong local reputation, and in many cases a strong regional or national reputation. Appointment as Professor requires a strong regional, and most often, national reputation and appointment as Professor Step 6 requires a sustained regional, national, and in many cases international, reputation.

**TEAM-BASED, COLLABORATIVE SCIENCE**

Team-based, collaborative science brings interdisciplinary researchers together to address multifaceted health problems. The DOM values and supports researchers whose work focuses on team-based contributions and wishes to ensure that such individuals are recognized and supported for promotion. In all cases the promotion package must clearly describe the specific, significant and unique scholarship that the candidate brought to the work and his/her contributions to the project. This is especially critical when the faculty has played a key role in collaborative science and holds a middle author position on manuscripts being offered as grounds for advancement. In the case of middle authorship, internal and external collaborators and the senior author of crucial manuscripts must provide letters that clearly provide specific and detailed descriptions of the faculty member’s contributions that enabled the creative scholarship described in the publication. Such letters should also describe the importance of these contributions, so that they can be properly considered during the promotion process.

**EDUCATOR’S PORTFOLIO**

The Department requires the inclusion of the Educator’s Portfolio for all candidates in the Clinical “X” series and strongly recommends that all faculty members who have substantial teaching roles include the Educator’s Portfolio in their promotion packet.

See attached separate document or go to:

http://medschool2.ucsf.edu/academy/Educators_Portfolio/
SYSTE MS INNOVATION, QUALITY IMPROVEMENT & PATIENT SAFETY PORTFOLIO

The goal of the QI Portfolio is to highlight, foster, and reward faculty who are engaged in Systems Innovation, Quality Improvement and Patient Safety activities as part of the promotion process. The QI Portfolio is designed to better capture the activities and accomplishments of faculty engaged in this work, regardless of whether this is their career focus (e.g. Director of Quality or QI curriculum director), a critical task force they contribute to (e.g. Joint Commission Core Measure task force, Operating Room committee, or Medication Safety workgroup, etc.), or an element of their professional work not captured elsewhere in the CV.

For more detailed information please review the separately attached document or go to:
http://medicine.ucsf.edu/safety/docs/dom-qiportfolio-201104.pdf

NORMAL, ON-­‐-­‐-­‐ TIME SCHEDU LES FOR ADVANCEMENT

At UCSF, advancement from Assistant Professor to Associate Professor, Step I normally occurs after 6-­‐8 years at the rank of Assistant Professor, or 2 years of service at Step IV. Advancement from Associate Professor to Professor, Step I normally occurs after 6 years at rank or 2 years of service at Associate Professor Step III. The normal period between each step is 2 years for Assistant and Associate Professors and 3 years for Professors. This time schedule is the same for salaried faculty in all series.

ACCELERATED MERITS AND PROMOTIONS

Accelerated merits and promotions are an unusual honor bestowed by the department in special circumstances to reward exceptional academic contributions. It must be understood that on-­‐-­‐-­‐time promotions in the department recognize outstanding contributions of national and international renown; therefore, an accelerated promotion should recognize the truly extraordinary. Their respective chief of service based on a request by their division chief may propose faculty for accelerated promotion. The chief of service will then have the responsibility for deciding whether a formal review should be undertaken. These criteria for accelerated promotion are not necessarily linked to administrative advancement or salary negotiation, each of which may also be used to recognize excellence.

For more detailed information please review the separately attached document or go to:
http://academicaffairs.ucsf.edu/academic-personnel/appointment-­‐advancement-­‐reviews/media/UCSF_Criteria_for_Advancement.pdf
DIVERSITY AND EQUAL OPPORTUNITY

The DOM is committed to excellence and equity in every facet of its mission. Teaching, research, professional and public service contributions that promote diversity and equal opportunity are encouraged and given recognition in the evaluation of the candidate’s qualifications for appointment and promotion. These contributions to diversity and equal opportunity can take a variety of forms including efforts to advance equitable access to education, public service that addresses the needs of California’s diverse population, or research in a scholar’s area of expertise that highlights inequalities.

For more detailed information please review the separately attached document or go to: (APM 210---1---d)