

DEPARTMENT OF PHYSICAL MEDICINE AND REHABILITATION
APPOINTMENTS, PROMOTION AND TENURE DOCUMENT
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I. PREAMBLE

This document describes the rules and process for Appointments, Promotion and Tenure for the Department of Physical Medicine and Rehabilitation. The document describes, in qualitative terms, the Department's criteria for appointments, promotion, and tenure, and evidence to be provided to support a case within the context of the Department's mission as well as the mission and standards of the College of Medicine.

Faculty members are evaluated for their contributions to the multi-partite mission of a Department, the College of Medicine, and OSU. Evaluation encompasses accomplishments in research and scholarship, teaching, education, innovation, program development and service, including activities in support of the patient care mission of the Department or College of Medicine.

The *Rules of the University Faculty* permit the Department of Physical Medicine and Rehabilitation to make appointments in the following tracks: Tenure-track; Clinical faculty; Research faculty; and to the Associated faculty. Herein are described the characteristics and qualifications that distinguish faculty members in these different tracks, and provide guidelines for appointments and promotions consistent with these distinctions.

The College of Medicine and Department of Physical Medicine and Rehabilitation endorse the University's recognition of the value of diverse contributions by individual faculty members toward the realization of the overall mission of the institution. For example, within the Tenure and Clinical faculty there may be many different patterns of scholarly activity that reflect a range of faculty interests, skills, and accomplishments. These different patterns of performance may result in variation in emphasis among teaching, scholarship and service. Although faculty members may choose to place greater emphasis on certain aspects of scholarly activity, and less emphasis on others, the Department of Physical Medicine and Rehabilitation requires that the faculty member demonstrate excellence in all areas.

All faculty members are to be evaluated for appointment and promotion using metrics that reflect the quality and impact of their contributions to the Department of Physical Medicine and Rehabilitation, to the Medical Center and OSU in the context of their assigned position descriptions. In addition, faculty members' activities may change over time, and thus may be consistent with different patterns of performance throughout the course of their careers. All of these different patterns of faculty activity will still lead to consideration for, and granting of, promotion and/or tenure, provided that the College's standard of excellence in all areas (including

demonstration of national or international impact and recognition) as appropriate to the faculty level track, and duties, is met.

Appointments, promotion, and tenure of candidates in the Department of Physical Medicine and Rehabilitation must adhere to the Office of Human Resources [Policy 1.10](#) governing affirmative action, equal employment opportunity and non-discrimination/harassment.

II. MISSION

The academic setting in which the Department of Physical Medicine and Rehabilitation functions requires excellence in teaching, research, and service in areas relevant to the field of physical medicine and rehabilitation. It is the mission of the department to enhance its already existing national stature and distinction in these areas and to advance the field of physical medicine and rehabilitation. This advancement will occur through education of skilled professionals, discovery and dissemination of new knowledge, and innovative solutions for improving health that address personalized health care.

In order to ensure departmental balance, reasonable flexibility will be exercised in evaluating individual performance. However, to achieve the mission of the Department of Physical Medicine and Rehabilitation, all faculty members are expected to contribute to the teaching, research and service goals of the department in a manner consistent with the nature of their faculty appointment. Therefore, faculty members in the Tenure-track are expected to have a relative emphasis of their effort directed toward research or other scholarly activity whereas faculty members in the Clinical faculty are expected to have a relative emphasis in teaching and service. Teamwork and collaboration are fundamental values of this field of medical science and will be considered as part of all evaluations for appointment and ongoing performance. Outstanding performance providing service in physical medicine and rehabilitation provides a model for students at all levels and shall be considered a minimal expectation for appointment, reappointment, and promotion and tenure. The Department of Physical Medicine and Rehabilitation will support this mission while adhering to its Policy on Faculty Duties and Responsibilities and providing an environment for the development of its faculty members.

III. DEFINITIONS

A. COMMITTEE OF THE ELIGIBLE FACULTY

1. TENURE-TRACK FACULTY

The eligible faculty for appointment at senior rank, reappointment, promotion and tenure, and promotion reviews of tenure-track faculty consists of all tenured faculty of higher rank than the candidate whose tenure resides in the department excluding the department chair, the dean and assistant and associate deans of the college, the executive vice president and provost, and the president.

For tenure reviews of probationary professors, eligible faculty are tenured professors whose tenure resides in the department excluding the department chair, the dean and assistant and associate deans of the college, the executive vice president and provost, and the president.

2. CLINICAL FACULTY

The eligible faculty for reappointment and promotion of clinical faculty consists of all tenured faculty of higher rank than the candidate whose tenure resides in the department and all non-probationary clinical faculty of higher rank than the candidate whose primary appointment is in the department excluding the department chair, the dean and assistant and associate deans of the college, the executive vice president and provost, and the president.

3. RESEARCH FACULTY

The eligible faculty for reappointment and promotion reviews of research faculty consists of all tenured faculty of higher rank than the candidate whose tenure resides in the department, all non-probationary clinical track faculty of higher rank than the candidate whose primary appointment is in the department, and all non-probationary research track faculty whose primary appointment is in the department excluding the department chair, the dean and assistant and associate deans of the college, the executive vice president and provost, and the president.

4. CONFLICT OF INTEREST

A conflict of interest exists when an eligible faculty member is related to a candidate or has a comparable close interpersonal relationship, has substantive financial ties with the candidate, is dependent in some way on the candidate's services, has a close professional relationship with the candidate (i.e. dissertation advisor), or has collaborated so extensively with the candidate that an objective review of the candidate's work is not possible. Generally, faculty members who have collaborated with a candidate on at least 50% of the candidate's published work since the last promotion will be expected to withdraw from a promotion review of that candidate.

5. MINIMUM COMPOSITION

In the event that the department does not have at least three eligible faculty members who can undertake a review, the department chair, after consulting with the dean, will appoint a faculty member from another department within the college.

B. PROMOTION AND TENURE COMMITTEE

The department has a Promotion and Tenure Committee that assists the Committee of the Eligible Faculty in managing the personnel and promotion and tenure issues. The committee's chair and membership are appointed by the department chair. The term of service is three years, with reappointment possible.

C. QUORUM

For any face-to-face meeting or teleconference, the quorum required to discuss and vote on all personnel decisions is a simple majority of the eligible faculty not on an approved leave of absence. A member of the eligible faculty on Special Assignment may be excluded from the count for the purposes of determining quorum only if the department chair has approved an off-campus assignment. A member will be considered 'present' at the meeting if attending in person or via teleconference.

Faculty members who recuse themselves because of a conflict of interest are not counted when determining quorum.

Electronic voting without a face-to-face meeting can be used for approving changes in rules of the AP&T committee or the AP&T document, and for re-appointments, but not for promotion decisions.

D. RECOMMENDATION FROM THE COMMITTEE OF THE ELIGIBLE FACULTY

In all votes taken on personnel matters only "yes" and "no" votes are counted. Abstentions are not votes. Faculty members are strongly encouraged to consider whether they are participating fully in the review process when abstaining from a vote on a personnel matter.

Absentee ballots and proxy votes are not permitted.

1. REAPPOINTMENT, PROMOTION AND TENURE, PROMOTION

A positive recommendation from the eligible faculty for reappointment, promotion and tenure, and promotion, is secured when a simple majority (greater than 50%) of the votes cast is positive.

IV. APPOINTMENTS

The *Rules of the University Faculty* permit the Department of Physical Medicine and Rehabilitation to make appointments in the following tracks: Tenure-track; Clinical faculty; Research faculty; and to the associated faculty. The latter contains unpaid and paid associated faculty. The appropriate appointment type for initial appointment to the Department of Physical Medicine and Rehabilitation must reflect these differing qualifications, be congruent with the job description of the position within the Department, and be consistent with both the short-term and long-term career plans of the individual. The Department chair should carefully evaluate and align the career goals of the faculty candidate and the department needs in determining the most appropriate track for the faculty member.

Most but not all of the faculty in the Department of PM&R will have clinical responsibilities. For those with clinical responsibilities, promotion or appointment to the associate professor or full professor ranks requires board certification in physical medicine and rehabilitation, or Board certification in rehabilitation psychology (ABRP), neuropsychology (ABCN or ABPN) or other appropriate certification. Candidates for assistant professor will be expected to obtain board certification within the probationary period (if the number of years of experience required for board certification make it unlikely that certification can be achieved during the probationary period, appropriate adjustments to the time allowed to achieve certification will be made).

A. APPOINTMENT CRITERIA

1. TENURE-TRACK FACULTY

The Tenure-track exists for those faculty members who primarily strive to achieve sustained excellence in the discovery and dissemination of new knowledge, as demonstrated by national and international recognition of their scholarship and successful competition for extramural funding such as that provided by the National Institutes of Health (NIH), the National Institute on Disability and Rehabilitation Research (NIDRR), Patient-Centered Outcomes Research Institute, the Centers for Disease Control (CDC), and other public and private sources that apply similar rigor to the grant review process. Although excellence in teaching and service are required, primary emphasis is placed on research activities.

Appointments are made in accordance with University Rule [3335-6-02](#). Each new appointment must enhance, or have strong potential to enhance, the quality of the Department. There must be an expectation that faculty members who are appointed to the tenure-track will be assigned a workload that provides sufficient time for the faculty member to meet the expectations and requirements for tenure-track appointments.

At the time of appointment, probationary Tenure-track faculty members will be provided with all pertinent documents detailing Departmental, College of Medicine, and University promotion and tenure

policies and criteria. If these documents are revised during the probationary period, probationary Tenure-track faculty members will be provided with copies of the revised documents.

Appointees with clinical responsibilities must obtain the appropriate Ohio licensure and other required certifications.

Appointment: Instructor on the Tenure-track

An appointment to the rank of Instructor is always probationary. During the probationary period a faculty member does not have tenure and is considered for reappointment annually. Appointments at the rank of Instructor are appropriate for individuals who do not yet have the requisite skills or experience to fully assume the range of responsibilities of an Assistant Professor. Appointments to this rank may also be made if all of the criteria for the position of Assistant Professor have been met with the exception that the candidate will not have completed a terminal degree, or other relevant training, at the time of the appointment. When an individual is appointed to the rank of Instructor, the letter of offer should indicate the specific benchmarks and achievements required for promotion to Assistant Professor.

An appointment at the instructor level is limited to three years. When an instructor has not completed requirements for promotion to the rank of assistant professor by the end of the third year of appointment, the third year is a terminal year of employment. Upon promotion to assistant professor, the faculty member may request prior service credit for time spent as an instructor. This request must be approved by the department's eligible faculty, the department chair, the dean, and the Office of Academic Affairs

Criteria for appointment to the rank of Instructor include the following.

- Anticipated receipt of an earned doctorate or other terminal degree in the relevant field of study or possession of equivalent experience. Individuals who have completed all the requirements of their terminal degree, but who have not obtained the final degree at the time of initial employment will be appointed as an Instructor. In addition, appointment at the rank of Instructor is appropriate for individuals who, at the time that they join the faculty, do not have the requisite skills or experience to fully assume the full range of responsibilities of an Assistant Professor.
- Evidence of potential for excellence in scholarship. Such evidence might include peer-reviewed publications in a mentored setting, but insufficient evidence of an independent, creative, and productive program of research with potential for external funding.
- A mindset and track record reflecting adherence to standards of professional ethical conduct consistent with the "Statement on Professional Ethics" by the American Association of University Professors [see Appendix D].
- In aggregate, accomplishments related to the above criteria should be sufficiently compelling that the appointee is judged to have significant potential to attain tenure and a distinguished record as a faculty member in the Department of Physical Medicine and Rehabilitation.

Appointment: Assistant Professor on the Tenure-track

An appointment to the rank of Assistant Professor is always probationary. During a probationary period a faculty member does not have tenure and is considered for reappointment annually. Tenure cannot be awarded at the rank of Assistant Professor. An Assistant Professor must be reviewed for promotion and tenure in the mandatory review year (6th year of appointment for faculty without significant clinical responsibilities, 11th year of appointment for faculty with significant patient clinical service responsibilities); however, promotion and tenure may be granted at any time during the probationary period when the faculty member's record of achievement so merits. Similarly, a probationary appointment may be terminated at any time subject to the provision of University Rule [3335-6-08](#) and the provision of paragraphs (6), (H), and (I) of University Rule [3335-6-03](#).

Consistent with Faculty Rule [3335-6-09](#), faculty members with significant patient clinical service responsibilities are granted an extended probationary period of up to 11 years, including prior service credit, depending on the pattern of research, teaching, and service workload. An assistant professor with an extended probationary period is reviewed for promotion and tenure no later than the 11th year as to whether promotion and tenure will be granted at the beginning of the 12th year. For individuals not recommended for promotion and tenure after the mandatory review, the 12th year will be the final year of employment.

For appointments at the rank of Assistant Professor, prior service credit of up to three years may be granted for work experience at the time of the initial appointment. Doing so requires the approval of the eligible faculty, Department Chair, Dean, and Executive Vice President and Provost. Prior service credit shortens a probationary period by the amount of the credit and once granted cannot be revoked except through an approved request to exclude time from the probationary period.

Criteria for appointment at the rank of Assistant Professor in the Tenure-track include:

- An earned doctorate or other terminal degree in the relevant field of study or possession of equivalent experience.
- Early evidence of excellence in scholarship as demonstrated by the initial development of a body of research, scholarship, and creative work. In addition, evidence must be provided that supports a candidate's potential for an independent program of scholarship and a strong likelihood of independent extramural research funding.
- A mindset and track record reflecting adherence to standards of professional ethical conduct consistent with the "Statement on Professional Ethics" by the American Association of University Professors [see Appendix D].
- In aggregate, accomplishments related to the above criteria should be sufficiently compelling that the appointee is judged to have significant potential to attain tenure and a distinguished record as a faculty member in the Department of Physical Medicine and Rehabilitation.

Appointment: Associate Professor with Tenure on the Tenure-track

Criteria for appointment to the rank of Associate Professor with tenure are identical to the criteria for promotion to Associate Professor with Tenure, as detailed in Section VII of this document. The university

will not grant tenure in the absence of permanent residency.

Appointment: Associate Professor without Tenure on the Tenure-track

While appointments to the rank of Associate Professor may include tenure, a probationary period can be granted after petition to the Office of Academic Affairs. A Department must exercise care in making these appointments, especially if the probationary period will be less than four years. For faculty without patient clinical service responsibilities the probationary period may not exceed four years. For faculty with significant patient clinical service responsibility, the probationary period may not exceed six years. Requests for such appointments require the approval of the Dean of the College of Medicine, and the Executive Vice President and Provost.

An appointment to the rank of Associate Professor without tenure is probationary. During a probationary period a faculty member does not have tenure and is considered for reappointment annually. Criteria for appointment to the rank of Associate Professor without tenure are identical to the criteria for promotion to Associate Professor without Tenure, as detailed in Section VII of this document. The university will not grant tenure in the absence of permanent residency.

Appointment: Professor with Tenure on the Tenure-track

Criteria for initial appointment to the rank of Professor with tenure are identical to the Department's criteria for promotion to Professor with tenure, as detailed in Section VII of this document. The university will not grant tenure in the absence of permanent residency. Appointment to the rank of professor will include tenure unless the candidate does not have permanent residency, in which case a probationary period of up to four years may be extended to provide the faculty member with time to establish permanent residency. During the probationary period the faculty member is considered for reappointment annually. If permanent residency is not established during the probationary period, the fourth year of appointment will be the terminal year.

2. CLINICAL FACULTY

The Clinical faculty is equivalent in importance to the Department of Physical Medicine and Rehabilitation as the Tenure-track. The Clinical faculty exists for those faculty members whose principal career focus is outstanding teaching, clinical and translational research and delivery of exemplary clinical care. Clinical faculty members will generally not have sufficient protected time to meet the robust scholarship requirements of the Tenure-track within a defined probationary period. For this reason, the nature of scholarship in the Clinical faculty differs from that in the Tenure-track and may be focused on a mixture of academic pursuits including the scholarship of practice, integration, education, as well as new knowledge discovery. Faculty members appointed to this track may choose to distinguish themselves in teaching, innovative pedagogic program development, or patient-oriented research. Faculty members appointed to this track may choose to distinguish themselves through several portfolios of responsibility including Clinician-Educator, Clinician-Scholar, and Clinical Excellence pathways. The Clinician-Educator pathway reflects pedagogic excellence as measured by teaching evaluations and innovative teaching practices, modules and publications. The Clinician-Scholar pathway reflects excellence in translational science, clinical research and health services (*e.g.*, health care policy and comparative effectiveness research) as measured by publications and grant funding, respectively. The Clinical-

Excellence pathway reflects unique contributions that serve to substantially enhance the national recognition of the Medical Center. Faculty members on the Clinical faculty are not eligible for tenure and may not participate in promotion and tenure matters of tenure-track faculty.

All appointments of faculty members to the Clinical faculty are made in accordance with Chapter 7 of the *Rules for University Faculty 3335-7*. Each new appointment must enhance, or have strong potential to enhance, the quality of the Department. At the time of appointment, probationary Clinical faculty members will be provided with all pertinent documents detailing Department, College of Medicine, and University promotion policies and criteria. If these documents are revised during the probationary period, faculty members will be provided with copies of the revised documents.

Contracts will be for a period of at least three years and for no more than five years. The initial contract is probationary, and a faculty member will be informed by the end of each probationary year if he or she will be reappointed for another year. By the end of the penultimate year of the probationary contract, the faculty member will be informed as to whether a new contract will be extended. In the event that a new contract is not extended, the final year of the probationary contract is the terminal year of employment. There is no presumption that a new contract will be extended. In addition, the terms of the contract may be renegotiated at the time of reappointment. Furthermore, each appointee must obtain the appropriate Ohio licensure and other required certifications, including medical staff privileges. The following paragraphs will outline the basic criteria for initial appointments in the Clinical faculty.

Appointment: Instructor on the Clinical faculty

Appointment to the rank of Instructor is made if all of the criteria for the position of Assistant Professor have been met with the exception that the candidate will not have completed the terminal degree, or other relevant training, at the time of the appointment. In addition, appointment at the rank of Instructor is appropriate for individuals who, at the time that they join the faculty, do not have the requisite skills or experience to fully assume the full range of responsibilities of an Assistant Professor. When an individual is appointed as an Instructor, the letter of offer should indicate the specific benchmarks and accomplishments that will be necessary for promotion to Assistant Professor.

Instructor appointments are limited to four years, with the fourth year being the terminal year. In such cases, if the instructor has not completed requirements for promotion to the rank of assistant professor by the beginning of the penultimate year of the contract period, a new contract will not be considered even if performance is otherwise adequate and the position itself will continue.

When an Instructor is promoted to Assistant Professor on the Clinical faculty, a new letter of offer with a probationary period of three to five years will be issued. Candidates for appointment to the rank of Instructor on the Clinical faculty will have, at a minimum:

- Anticipated receipt of an earned doctorate or other terminal degree in the relevant field of study.
- Evidence of potential for contributions to scholarship as demonstrated by activities such as publications or presentation of abstracts as primary or secondary author. The individual may not as yet have demonstrated substantial evidence of independent contributions as reflected by first author publications and/or presentations.

- Post-doctoral clinical training in an appropriate area.
- A mindset and track record reflecting adherence to standards of professional ethical conduct consistent with the “Statement on Professional Ethics” by the American Association of University Professors [see Appendix D].

Appointment: Assistant Professor on the Clinical faculty

The initial appointment to the rank of Assistant Professor is always probationary. During a probationary period a faculty member is considered for reappointment annually. A probationary appointment may be terminated at any time subject to the provision of University Rule [3335-6-08](#) and the provision of paragraphs (B) and (D) of University Rule [3335-7-07](#). An Assistant Professor may be reviewed for promotion at any time during the probationary period or during a subsequent contract.

This is the appropriate level for initial appointment of persons holding the appropriate terminal degree and the relevant clinical training, who are expected to be involved in full time teaching and clinical service, with more limited contribution to scholarship. This is also the appropriate level for persons assigned major clinical responsibilities who plan to engage principally in the education or clinical and translational science research or health service research. Candidates for appointment at this rank are expected to have completed all relevant training, including residency and fellowship where appropriate, consistent with the existing or proposed clinical program goals of the Department.

Candidates for appointment to the rank of Assistant Professor on the Clinical faculty will have, at a minimum:

- An earned doctorate or other terminal degree in the relevant field of study or possession of equivalent experience; and completion of requisite post-doctoral clinical training.
- Evidence of scholarship as demonstrated by activities such as presentation of abstracts or peer reviewed articles as primary, secondary, or corresponding author; or educational or clinical program development leadership; or involvement or leadership in quality or operations initiatives; and potential to advance through the faculty ranks.
- A mindset and track record reflecting adherence to standards of professional ethical conduct consistent with the “Statement on Professional Ethics” by the American Association of University Professors [see Appendix D].
- Has the training prerequisites required for board certification in physical medicine and rehabilitation, or board certification in rehabilitation psychology (ABRP), neuropsychology (ABCN or ABPN), or other appropriate certification or completion of training that leads to such certification. Candidates for assistant professor will be expected to obtain board certification within the probationary period (if the number of years of experience required for board certification make it unlikely that certification can be achieved during the probationary period, then adjustments to the time allowed to achieve certification can be made).

- Able to be appropriately licensed as a health care professional and member of the medical staff consistent with participation in the expected patient based teaching, research and service activities.

Appointment: Associate Professor on the Clinical faculty

The criteria for initial appointment at the rank of Associate Professor in the Clinical faculty require that the candidate meet criteria for promotion to this rank as outlined in Section VII of this document in addition to meeting criteria for assistant professor.

Appointment: Professor on the Clinical faculty

The criteria for initial appointment at the rank of Professor in the Clinical faculty, are identical to those criteria for promotion to this rank as outlined in Section VII of this document, in addition to meeting criteria for assistant professor.

3. RESEARCH FACULTY

The Research faculty exists for faculty members who focus principally on scholarship. Notably, the standards for scholarly achievement are similar to those for individuals on the Tenure-track for each faculty rank. A Research faculty member may, but is not required to, participate in educational and service activities. Research faculty members are expected to contribute to a Department's research mission and are expected to demonstrate excellence in scholarship as reflected by high quality peer-reviewed publications and successful competition for NIH or similar funding.

Appointments to the Research faculty are made in accordance with Chapter 7 of the *Rules of the University Faculty* [3335-7](#). Each new appointment must enhance, or have strong potential to enhance, the quality of the Department. Unless otherwise authorized by a majority vote of the Tenure-track faculty in a department, Research faculty must comprise no more than twenty per cent of the number of Tenure-track faculty in the Department. In all cases, however, the number of Research faculty positions in a unit must constitute a minority with respect to the number of tenure-track faculty in the Department.

Contracts will be for a period of at least one year and for no more than five years, and must explicitly state the expectations for salary support. In general, research faculty appointments will require 100% salary recovery. It is expected that salary recovery will be entirely derived from extramural funds. The initial contract is probationary, and a faculty member will be informed by the end of each probationary year as to whether he or she will be reappointed for the following year. By the end of the penultimate year of the probationary contract, the faculty member will be informed as to whether a new contract will be extended at the conclusion of the probationary contract period. In the event that a new contract is not extended, the final year of the probationary contract is the terminal year of employment. There is no presumption that a new contract will be extended. In addition, the terms of a contract may be renegotiated at the time of reappointment.

Research faculty members are eligible to serve on University committees and task forces but not on University governance committees. Research faculty members also are eligible to advise and supervise graduate and postdoctoral students and to be a principal investigator on extramural research grant

applications. Approval to advise and supervise graduate students must be obtained from the graduate school as detailed in Section XV the [Graduate School Handbook](#).

Appointment: Research Assistant Professor

The department's criteria for appointment as a Research Assistant Professor include:

- An earned doctorate or other terminal degree in the relevant field of study, or possession of equivalent experience.
- Completion of sufficient post-doctoral research training to provide the basis for establishment of an independent research program.
- An initial record of excellence in scholarship as demonstrated by having begun to develop a body of research, scholarship, and creative work, and initial evidence of program of research as reflected by first or senior author publications or multiple co-authorships and existing or strong likelihood of extramural research funding as one of several program directors or principal investigators on network-type or center grants (multiple-PD/PI) or as a co-investigator on multiple grants.
- A mindset and track record reflecting adherence to standards of professional ethical conduct consistent with the "Statement on Professional Ethics" by the American Association of University Professors [see Appendix D]. Strong potential for career progression and advancement through the faculty ranks.

Appointment: Research Associate Professor

The criteria for initial appointment to the rank of Associate Professor in the Research faculty are identical to those criteria for promotion to this rank as outlined in Section VII of this document.

Appointment: Research Professor

The criteria for initial appointment to the rank of Professor in the Research faculty are identical to those criteria for promotion to this rank as outlined in Section VII of this document.

4. ASSOCIATED FACULTY

Associated faculty appointments exist for faculty members who focus on a specific and well-defined aspect of the College mission, most commonly outstanding teaching and exemplary clinical care. Associated faculty may be involved in scholarly pursuits and service to the University, but this is not required for advancement.

Associated Faculty, as defined in the *Rules of the University Faculty* [3335-5-19](#) (D), include "persons with adjunct titles, clinical practice titles, visiting titles, and lecturer titles," plus "professors, associate professors, assistant professors, and instructors who serve on appointments totaling less than fifty per cent service to the university." Members of the associated faculty are not eligible for tenure, may not vote at any level of governance, and may not participate in promotion and tenure matters. Associated faculty

appointments are for up to three years. The below titles are used for associated faculty in the Department of Physical Medicine and Rehabilitation.

Adjunct Assistant Professor, Adjunct Associate Professor, Adjunct Professor. Adjunct appointments may be compensated or uncompensated. Adjunct faculty appointments are given to individuals who provide academic service to the department, such as teaching a course, for which a faculty title is appropriate. Criteria for appointment at advanced rank are the same as for promotion. Adjunct faculty members are eligible for promotion (but not tenure).

Clinical Instructor of Practice, Clinical Assistant Professor of Practice, Clinical Associate Professor of Practice, Clinical Professor of Practice. Associated faculty with patient care responsibilities will be given clinical associated appointments. Clinical appointments may either be compensated or not compensated. Criteria for appointment at advanced rank are the same as for promotion. Associated clinical faculty members are eligible for promotion (but not tenure).

Lecturer. Appointment as lecturer requires that the individual have, at a minimum, a Master's degree in a field appropriate to the subject matter to be taught. Evidence of ability to provide high-quality instruction is desirable. Lecturers are not eligible for tenure.

Senior Lecturer. Appointment as senior lecturer requires that the individual have, at a minimum, a doctorate in a field appropriate to the subject matter to be taught, along with evidence of ability to provide high-quality instruction; or a Master's degree and at least five years of teaching experience with documentation of high quality. Senior lecturers are not eligible for tenure or promotion.

Assistant Professor, Associate Professor, Professor with FTE below 50%. Appointment at regular titles is for individuals at 49% FTE or below is either compensated or uncompensated. The rank of associated faculty with regular titles is determined by applying the criteria for appointment of tenure-track faculty. Associated faculty members with regular titles are eligible for promotion (but not tenure) and the relevant criteria are those for promotion of tenure-track faculty.

Visiting Instructor, Visiting Assistant Professor, Visiting Associate Professor, Visiting Professor. Visiting faculty appointments may either be compensated or not compensated. Visiting faculty members on leave from an appointment at another institution are appointed at the rank held in that position. The rank at which other individuals are appointed is determined by applying the criteria for appointment of tenure-track faculty. Visiting faculty members are not eligible for tenure or promotion. They may not be reappointed for more than three consecutive years.

At a minimum, all candidates for Associated faculty appointments must meet the following criteria.

- Associated clinical faculty with clinical responsibilities must be a licensed physician or health care provider.
- Have significant and meaningful interaction in at least one of the following mission areas of the Department of Physical Medicine and Rehabilitation:

- a) Teaching of medical students, residents, or fellows: For community physicians providing outpatient teaching of medical students, meaningful interaction consists of supervising medical students for at least one month out of the year.
- b) Research: These faculty members may collaborate with a Department or Division in the College in research projects or other scholarly activities.
- c) Administrative roles within the College: This includes participation in committees or other leadership activities (e.g., membership in the Medical Student Admissions Committee).

Appointment and Reappointment: Associated Faculty at Advanced Rank

By definition, Associated Faculty members are appointed for terms of up to three years. As such, associated faculty are not eligible for traditional promotion, but they are eligible to be reappointed at the next rank. Appointment or reappointment at advanced rank should evidence excellence in a specific aspect of the College mission. All new appointments at advanced rank require a review and vote of the eligible faculty, an evaluation by the department chair, and an evaluation letter from a person that can attest to the faculty member's primary contribution in clinical care, teaching or scholarship.

5. COURTESY APPOINTMENT FOR FACULTY

A non-salaried appointment for a tenure-track, clinical or research University faculty member from another department is considered a Courtesy appointment. An individual with an appointment in one department may request a Courtesy appointment in another department when that faculty member's scholarly and academic activity overlaps significantly with the discipline represented by the second unit. Such appointments must be made in the same faculty track, using the same title, as that offered in the primary department. Courtesy appointments are warranted only if they are accompanied by substantial involvement in the academic and scholarly work of the Department.

B. APPOINTMENT PROCEDURES

See the [Faculty Policy on Faculty Recruitment and Selection](#) and the [Policy on Faculty Appointments](#) in the Office of Academic Affairs [Policies and Procedures Handbook](#) for information on the following topics:

- recruitment of tenure-track, clinical track and research track faculty
- appointments at senior rank or with prior service credit
- hiring faculty from other institutions after April 30
- appointment of foreign nationals

Any faculty appointment forwarded from the Department for approval by the College of Medicine must be consistent with that department's Appointments, Promotion and Tenure document, and other relevant policies, procedures, practices, and standards established by: (1) the College of Medicine, (2) the *Rules of the University Faculty*, (3) the Office of Academic Affairs, including the Office of Academic Affairs Policies and Procedures Handbook, and (4) the Office of Human Resources. A draft letter of offer to a faculty candidate must be submitted to the Vice Dean for Academic Affairs of the College of Medicine for review

and approval. The draft letter of offer will be reviewed for consistency with the essential components required by the Office of Academic Affairs Policies and Procedures Handbook, and by the College. Templates for letters of offer are found online on [OneSource](#). Departments must access these templates for each letter written to ensure that they use the approved version. The following sections provide general guidelines for searches in the different faculty tracks.

1. TENURE-TRACK FACULTY

A national search is required to ensure a diverse pool of highly qualified candidates for all tenure-track positions. Exceptions to this policy must be approved by the college and the Office of Academic Affairs in advance. Search procedures must be consistent with the university policies set forth in the most recent update of *A Guide to Effective Searches*, which can be found at: <http://www.hr.osu.edu/hrpubs/guidesearches.pdf>. Searches for tenure-track faculty proceed as follows:

The Dean of the College provides approval for the Department to commence a search. The Department Chair or the individual who has commissioned the search appoints a search committee, usually consisting of three or more faculty members who reflect the field of expertise that is the focus of the search, as well as other fields within the Department. The search committee:

- Appoints a Diversity Advocate who is responsible for providing leadership in assuring that vigorous efforts are made to achieve a diverse pool of qualified applicants.
- Develops a search announcement for internal posting in the University Personnel Postings through the Office of Human Resources Employment Services (hr.osu.edu) and external advertising, subject to the Department Chair's approval.
- Develops and implements a plan for external advertising and direct solicitation of nominations and applications. If there is any likelihood that the applicant pool will include qualified foreign nationals, the search committee must assure that at least one print advertisement is published in one of the discipline's academic journals. Exclusive announcement in electronic media is not sufficient. The University does not grant tenure in the absence of permanent residency ("green card"), and U. S. Department of Labor guidelines do not permit sponsorship of foreign nationals for permanent residency unless the search process resulting in their appointment to a Tenure-track position included an advertisement in a nationally circulated print journal.
- Screens applications and letters of recommendation and presents its findings to the Department Chair.

Interviews are arranged by the search committee chair. While interviews will usually be in-person, under some circumstances teleconferencing will be acceptable. Interviews with candidates must include opportunities for interaction with faculty groups, including the search committee; graduate students or residents, where appropriate; the Department Chair; and the Dean or designee. In addition, it is recommended that all candidates make a presentation to the faculty, students and/or residents on their scholarly activity.

Following completion of interviews, the Search Committee presents its findings and makes its recommendations to the Department Chair or the individual who has commissioned the search, who then proceeds with the offer of an appointment.

If the offer involves senior rank (Associate Professor or above), the eligible faculty members must also vote on the appointment. If the offer may involve prior service credit, the eligible faculty members vote on the appropriateness of such credit.

2. CLINICAL FACULTY

Searches for initial appointments in the Clinical faculty should follow the same procedures as those utilized by the Department and the College of Medicine for Tenure-track faculty, with the exception that the candidate is not required to give a presentation during the interview. A national search is required to ensure a diverse pool of highly qualified candidates for all clinical track positions. Exceptions to this policy must be approved in advance from the Dean of the College of Medicine. Search procedures must be consistent with the university policies set forth in [*A Guide to Effective Searches*](#).

3. RESEARCH FACULTY

Searches for initial appointments in the Research faculty should follow the same procedures as those utilized by the Department and the College of Medicine for Tenure-track faculty, with the exception that the candidate is not required to make a presentation during the interview. A national search is required to ensure a diverse pool of highly qualified candidates for all research track positions. Exceptions to this policy must be approved in advance from the Dean of the College of Medicine. Search procedures must be consistent with the university policies set forth in [*A Guide to Effective Searches*](#).

4. TRANSFER FROM THE TENURE-TRACK

Tenure-track faculty may transfer to a clinical or research faculty if appropriate circumstances exist. Tenure is lost upon transfer, and transfers must be approved by the department chair, the college dean, and the executive vice president and provost.

The request for transfer must be initiated by the faculty member in writing and must state clearly how the individual's career goals and activities have changed.

Transfers from a clinical appointment and from a research appointment to the tenure-track are not permitted. Clinical faculty members and research faculty members may apply for tenure-track positions and compete in regular national searches for such positions.

The new letter of offer must outline a new set of expectations for the faculty member aligned with the new responsibilities. Presumably, these will differ from prior expectations.

5. ASSOCIATED FACULTY

Initial appointments to a paid Associated faculty position should follow the same procedures as those utilized by the Department and the College of Medicine for Clinical faculty, with the exception that a

national search is not required. Appointments to unpaid positions in the Associated Faculty require no formal search process. However, appointments to unpaid positions require a vote from the faculty.

Associated faculty for whom promotion is a possibility follow the following guidelines.

a. ASSOCIATE

Teaching and Mentoring: For faculty members whose principal focus is teaching and mentoring, benchmarks for appointment or reappointment at advanced rank include sustained excellence in reviews by students and residents supervised by the faculty member, teaching awards, introduction of students to new modes of practice or patient populations not previously available to learners, participation or leadership in curriculum development.

Scholarship: For faculty members whose principal focus is scholarship, benchmarks include participation in research projects, programs, or other scholarly activity that result in enhanced regional recognition of the College through publications, funded programs, or other means. Presentations at regional meetings or leadership or participation in regional organizations dedicated to the faculty member's area of focused scholarship serve as further indicators of advancement to this rank. Although a record of publication is not an expectation for Associated faculty, publications or other forms of dissemination of scholarship (*e.g.*, web based documents, other electronic media) are valued and contribute to advancement in rank. This is particularly true for faculty who are appointed based on their collaboration in research or other scholarly activities. Publications may be of diverse types and are not required to be first or senior authored.

Leadership and Administration: For faculty members whose principal focus is service, benchmarks may include the faculty member's membership and participation on committees or other leadership groups. Leadership of subgroups within a committee, such as a writing group, or supervision of a task force is another example of such benchmarks. There must be a sustained commitment to leadership and administration rather than a single interaction with a College or Medical Center committee or leadership group.

b. PROFESSOR

Appointment or Reappointment to the rank of Professor is based not only on sustained contributions in the faculty member's area of focus but on a more advanced stage of leadership or greater sphere of impact than that of an Associate Professor.

Teaching and Mentoring: For faculty members whose principal focus is teaching and mentoring, faculty appointed or reappointed to the rank of Professor will not only have the accomplishments of an Associate Professor but will also attain broader recognition for contributions through curriculum development and recognition of excellence in education. This may come in the form of regional and national teaching awards, membership and leadership in national organizations and meetings dedicated to medical education, adoption of teaching innovations and curricula introduced by the faculty member to institutions outside the Department of Physical Medicine and Rehabilitation, and invitations to speak at outside institutions. Although publications are not an expectation, publications

or web sites conveying the faculty member's innovations will serve as an indication for dissemination of innovation outside the College.

Scholarship: For faculty members whose principal focus is scholarship, the scholarly contributions of Associated faculty appointed or reappointed to the rank of Professor will exceed the scope of those at the rank of Associate Professor. Benchmarks include participation in research projects, programs, or other scholarly activities that result in enhanced national recognition of the College through publications, funded programs, or other means. Authorship or co-authorship of manuscripts and participation in nationally funded programs of research are examples of benchmarks for those achieving this rank. Presentations at national meetings and membership or leadership in national organizations dedicated to the faculty member's focus of scholarship are further benchmarks.

Leadership and Administration: For faculty members whose principal focus is service, the faculty member appointed or reappointed to the rank of Professor will progress to senior leadership roles in the College or Medical Center. This may consist of serving as chair of committees that contribute to the growth in excellence of the College or which have made fundamental and innovative changes in College procedures, practice or culture. There must be a record of sustained senior leadership rather than a single interaction with a College or Medical Center committee or leadership group.

5. COURTESY APPOINTMENTS

Any department faculty member may propose a 0% FTE (Courtesy) appointment for a faculty member from another OSU department. A proposal that describes the uncompensated academic service to the courtesy department justifying the appointment must be considered by the faculty through a meeting or via email. The Chair must review all courtesy appointments every three years to determine whether they continue to be justified, may take recommendations for nonrenewal from the faculty, and must conduct a vote with the faculty either via meeting or email. A courtesy faculty appointment forwarded from a Department for approval by the College must have been made consistent with that Department's Appointments, Promotion and Tenure document, and other relevant policies, procedures, practices, and standards established by the *Rules of the University Faculty*, the Office of Academic Affairs, and the Office of Human Resources.

V. ANNUAL REVIEW PROCEDURES

The department follows the requirements for annual reviews as set forth in the [Faculty Annual Review Policy](#).

The Department Chair or his or her designee must conduct an annual review of every faculty member, irrespective of rank, in accordance with University Rule [3335-6-03](#) (C), and the Office of Academic Affairs [Policies and Procedures Handbook](#). The only exception to this guideline is that Courtesy appointments do not require formal annual renewal, but continuation of the appointment should reflect ongoing academic involvement as described in the Office of Academic Affairs Policies and Procedures [Volume 1](#): 2.4.1.6.

Procedures for Tenure-track, Clinical faculty, Research faculty, and Full-time Paid Associated Faculty

The faculty member must maintain an up-to-date profile and/or keep a recent curriculum vitae on record with the Department. Departments will establish OAA electronic dossier, a formal mechanism for the review of all faculty members during the course of each academic year. Departments may create a standardized evaluation tool to suit their unique needs. The Department Chair or his or her designee will supply each faculty member with a written evaluation of his or her performance, in narrative format. Annual reviews must include a scheduled opportunity for a face-to-face meeting with the Department Chair. If a Chair's designee conducts the annual review, there must be a mechanism for apprising the Chair of each faculty member's performance. The department chair is required (per Faculty Rule [3335-3-35](#)) to include a reminder in the annual review letter that all faculty have the right (per Faculty Rule [3335-5-04](#)) to view their primary personnel file and to provide written comment on any material therein for inclusion in the file.

A. ANNUAL REVIEW PROCEDURES: PROBATIONARY TENURE-TRACK FACULTY

Every probationary tenure-track faculty member is reviewed annually by the chair or designee, who meets with the faculty member to discuss his or her performance and, future plans and goals; and prepares a written evaluation that includes a recommendation on whether to renew the probationary appointment.

If the department chair recommends renewal of the appointment, this recommendation is final. The department chair's annual review letter to the faculty member renews the probationary appointment for another year and includes content on future plans and goals. The faculty member may provide written comments on the review. The department chair's letter (along with the faculty member's comments, if received) is forwarded to the dean of the college. In addition, the annual review letter becomes part of the cumulative dossier for promotion and tenure (along with the faculty member's comments, if he or she chooses).

If the department chair recommends nonrenewal, the Fourth-Year Review process (per Faculty Rule [3335-6-04](#)) is invoked. Following completion of the comments process, the complete dossier is forwarded to the college for review and the dean makes the final decision on renewal or nonrenewal of the probationary appointment.

1. FOURTH YEAR REVIEW

Each faculty member in the fourth year of probationary service must undergo a review utilizing the same process as the review for tenure and promotion, with two exceptions: external letters of evaluation will not be required, and review by the College of Medicine Promotion and Tenure Advisory Committee is not mandatory. The objective of this review will be to determine if adequate progress towards the achievement of promotion and tenure is being made by the candidate.

If either the Department Chair or the Dean recommends nonrenewal of a faculty member's probationary contract, the case will be referred to the College Appointment, Promotion and Tenure Advisory Committee, which will review the case, vote and make a recommendation to the Dean. The Dean makes the final decision regarding renewal or nonrenewal of the probationary appointment.

In all cases, the Dean independently evaluates all faculty in their fourth year of probationary appointment and will provide the Department Chair with a written evaluation of the candidate's progress.

2. EIGHTH YEAR REVIEW

For faculty members with an 11 year probationary period, an eighth year review, utilizing the same principles and procedures as the fourth year review, will also be conducted.

3. EXCLUSION OF TIME FROM PROBATIONARY PERIOD

University guidelines for Exclusion of Time from Probationary Period are specified in University Rule [3335-6-03\(D\)](#).

B. ANNUAL REVIEW PROCEDURES: TENURED FACULTY

Tenured faculty members are to be reviewed annually by the Department Chair or his or her designee. The department chair or his or her designee meets with each faculty member to discuss his or her performance and future plans and goals; and prepares a written evaluation in narrative format.

C. ANNUAL REVIEW PROCEDURES: CLINICAL FACULTY

The annual review process for clinical faculty probationary and non-probationary faculty is identical to that for tenure-track probationary and tenured faculty respectively.

In the penultimate year of a clinical faculty member's appointment, a formal performance review is necessary to determine whether the faculty member will be offered reappointment. This review proceeds identically to the Fourth-Year Review procedures for tenure-track faculty. External letters of evaluation are not solicited. There is no presumption of renewal of contract.

D. ANNUAL REVIEW PROCEDURES: RESEARCH FACULTY

The annual review process for research faculty probationary and non-probationary faculty is identical to that for tenure-track probationary and tenured faculty respectively.

In the penultimate year of a research faculty member's appointment, a formal performance review is necessary to determine whether the faculty member will be offered reappointment. This review proceeds identically to the Fourth-Year Review procedures for tenure-track faculty. External letters of evaluation are not solicited. There is no presumption of renewal of contract.

E. ANNUAL REVIEW PROCEDURES: ASSOCIATED FACULTY

Compensated associated faculty members in their initial appointment must be reviewed before reappointment. The department chair, or designee, prepares a written evaluation and meets with the faculty member to discuss his or her performance, future plans, and goals. The department chair's recommendation on renewal of the appointment is final. If the recommendation is to renew, the department chair may extend a multiple year appointment.

Compensated associated faculty members on a multiple year appointment are reviewed annually by the department chair, or designee. The department chair, or designee, prepares a written evaluation and meets with the faculty member to discuss his or her performance, future plans, and goals. No later than October 15 of the final year of the appointment, the chair will decide whether or not to reappoint. The department chair's recommendation on reappointment is final.

VI. MERIT SALARY INCREASES AND OTHER REWARDS

Merit salary increases and other rewards made by a Department must be made consistent with its Appointments, Promotion and Tenure document and other relevant policies, procedures, practices, and standards established by: (1) the [College of Medicine](#), (2) the [Rules of the University Faculty](#), (3) the Office of Academic Affairs [Policies and Procedures Handbook](#), and (4) the [Office of Human Resources](#). The following is a description of the criteria for awarding salary increases, the procedures for making such awards, and the documentation required for this process.

A. MERIT SALARY INCREASES AND OTHER REWARDS: CRITERIA

Except when the university dictates any type of across the board salary increase, all funds for annual salary increases are directed toward rewarding meritorious performance and assuring, to the extent possible given financial constraints, that salaries reflect the market and are internally equitable.

Meritorious performance in teaching, scholarship, and service are assessed in accordance with the same criteria that form the basis for promotion decisions. The time frame for assessing performance will be the past 36 months, with attention to patterns of increasing or declining productivity. Faculty with high-quality performance in all three areas of endeavor and a pattern of consistent professional growth will necessarily be favored. Faculty members whose performance is unsatisfactory in one or more areas are likely to receive minimal or no salary increases.

Faculty who fail to submit the required documentation for an annual review at the required time will receive no salary increase in the year for which documentation was not provided, except in extenuating circumstances, and may not expect to recoup the foregone raise at a later time.

B. MERIT SALARY INCREASES AND OTHER REWARDS: PROCEDURES

Each faculty member must undergo an annual review utilizing the principles outlined in Section V of this document. The Department Chair will compare the faculty member's performance to stated expectations and to those recorded in the relevant Appointments, Promotion and Tenure document, and then determine an appropriate level of merit salary increase (if any). Other rewards will be determined in a similar manner.

C. MERIT SALARY INCREASES AND OTHER REWARDS: DOCUMENTATION

Documentation for the purposes of determining merit salary increases will use the same standards as are applied for considerations of promotion and/or tenure. These standards are described in Section VII of this document, and may be augmented by additional descriptions in the Appointments, Promotion and Tenure document of the Department.

VII. PROMOTION AND TENURE, AND PROMOTION REVIEWS

A. CRITERIA

Outlined below are the Department's formal criteria for academic advancement, including promotion on each faculty track and awarding of tenure. Tables 1-5 in the appendix provide examples of methods for meeting the criteria, but should not be considered prescriptive.

The College of Medicine expects that when a Department forwards the dossier of a candidate for review and has recommended promotion and/or granting of tenure, every diligent effort has been made to ensure the qualifications of the candidate meet or exceed applicable criteria.

In evaluating a candidate's qualifications in teaching, scholarship, and service, reasonable flexibility will be exercised. As the College of Medicine diversifies and places new emphasis on interdisciplinary endeavors and program development, instances will arise in which the proper work of a faculty member may depart from established academic patterns, especially with regard to awarding tenure. Thus, care must be exercised to apply criteria flexibly, but without compromise in requiring the essential qualifications for promotion. Insistence upon this high standard for faculty is necessary for the maintenance and enhancement of the University as an institution dedicated to the discovery and transmission of knowledge.

Although institutional citizenship and collegiality cannot be used as an independent criterion for promotion or tenure, these positive attributes characterize the ability of a faculty member to effectively contribute to exemplary scholarship, teaching and service. A commitment to these values and principles can be demonstrated by constructive responses to and participation in University and College of Medicine initiatives. Examples include participation in faculty governance, outreach and service, ethical behavior, adherence to principles of responsible conduct of research, constructive conduct and behavior during the discharge of duties, responsibilities and authority, and the exercise of rights and privileges of a member of

the faculty as reflected in the “Statement of Professional Ethics” of the American Association of University Professors.

Annually, the OSU Office of Academic Affairs establishes specific guidelines, procedures, and schedules for the review of candidates for promotion and tenure. The Dean of the College of Medicine also establishes and communicates the latest date for the receipt of dossiers for annual consideration by the College. Upon receipt of a candidate’s dossier, the Dean of the College of Medicine will submit the dossier to the College’s Appointments, Promotion and Tenure Advisory Committee for formal review. The committee will review the dossier, and convey to the Dean in writing a recommended action to be taken. The Dean will consider the recommendations of the committee and will convey, in writing, a recommended action to the Executive Vice President and Provost.

1. PROMOTION OF TENURE-TRACK FACULTY (TABLE 1)

a. ASSOCIATE WITH TENURE

The awarding of tenure is an acknowledgment of excellence and future potential for preeminence. It requires evidence of consistent achievement throughout the professional life of the faculty member. Promotion to the rank of Associate Professor with Tenure occurs when a faculty member exhibits convincing evidence of excellence in the discovery and dissemination of new knowledge, as demonstrated by a national level of significance and recognition of scholarship. In addition, excellence in teaching and outstanding service to OSU is required, but alone is not sufficient for promotion and awarding of tenure. These three key achievements: scholarship, teaching and service, are individually discussed below and outlined in Table 1.

The primary criterion for awarding of promotion to the rank of Associate Professor and awarding of tenure is convincing evidence that the candidate has developed a national level of impact and recognition since being appointed to the rank of Assistant Professor. Objective examples of a national reputation include service on NIH, National Institute of Disability and Rehabilitation Research (NIDRR), Patient-Centered Outcomes Research Institute (PCORI), Centers for Disease Control (CDC) or equivalent grant review panels, participation on federal steering, guideline or advisory committees, selection for service in a national professional society, invitation for lectureships or scholarly reviews, receipt of national scientific awards, external letters of evaluation and other measures of national impact.

Scholarship: Scholarship is broadly defined as the discovery and dissemination of new knowledge. Achievement of excellence in scholarship is demonstrated by discovery of a substantial body of original knowledge that is published in high quality, peer-reviewed journals or proceedings, and achievement of a national reputation for expertise and impact in one's field of endeavor. Such endeavors might include clinical research, laboratory investigation, development of innovative programs, theoretical insight, innovative interpretation of an existing body of knowledge, public health and community research, implementation science, and diffusion research, among many potential others. While individual circumstances may vary, both the quantity and quality of publications will be considered. A sustained record of high quality and quantity of scholarly productivity as an assistant professor is required for promotion to the rank of associate professor or professor. Examples of achievements that reflect excellence in scholarship are provided in Table 1, however this list should not be considered exhaustive. A suggested range of publications at time of promotion is 20 to 40 peer reviewed manuscripts reporting original work. Publication of papers with high impact (i.e. publication in journals in the candidate's discipline that are within the upper half of the ISI, or high SCI, or alternative metrics of impact) is recognized as a more difficult achievement, and therefore the quantity of publications may be expected to be lower. These are metrics that suggest a scope of achievement and not an inflexible requirement for promotion.

Participation in collaborative, multidisciplinary research and team science is highly valued, especially to the extent that a faculty member's record of collaborative scholarship includes manuscripts on which authorship is first, senior, or corresponding; or the individual input of the faculty member as a middle author is uniquely contributory and clearly evident.

Expectations regarding scholarship will be adjusted according to the extent of the faculty member's commitment to clinical service, teaching, or administrative duties. The extent of those activities must be documented in the annual reviews of faculty members and must be included in the Departmental promotion and/or promotion reviews.

Evidence of sustained or multiple grant support is another crucial indicator of expertise in the field. Candidates for promotion to associate professor with tenure who are without significant clinical responsibilities must have obtained multi-year funding from one or more extramural public or private source(s) that apply a high level of rigor in their reviews (e.g. National Institutes of Health (NIH), Patient-Centered Outcomes Research Institute (PCORI), National Institute of Disability and Rehabilitation Research (NIDRR), Centers for Disease Control (CDC), etc. as well as various charitable and/or private foundations such as the American Heart Association) as a principal investigator (PI) or as one of several program directors or principal investigators on a multicenter grant or have obtained a mid-career K award. They should ideally have demonstrated sustainability of their research program by renewal of the grant award and/or by garnering a second distinct extramural nationally competitive, peer reviewed grant from public or private sources.

Faculty members are encouraged to collaborate with other investigators and are encouraged to meet the requirement for extramural support for their research as a one of several program directors or principal investigators on network-type or center grants (multiple-PD/PI) or, in some circumstances, by serving as a co-investigator on multiple NIH grants. Sustained funding through pharmaceutical or instrumentation companies for investigator initiated proposals is acceptable. Faculty members who generate support for their research programs through the creation of patents that generate licensing income or spin-off companies meet the equivalent criteria of extramural funding.

Beyond basic and translational laboratory investigation, development of innovative programs in clinical science, public health and community research, comparative effectiveness research, implementation science, and diffusion research are acceptable fields of inquiry in this track.

Although the total body of scholarship over the course of a career is considered in promotion and tenure decisions, the highest priority is placed on scholarly achievements while a faculty member at The Ohio State University. It should be appreciated that evidence of scholarship below the specified range does not preclude a positive promotion decision and that scholarship exceeding the specified range is not a guarantee of a positive tenure or promotion decision, especially if it occurs in isolation or in the context of poor performance in other areas.

Entrepreneurship is a special form of scholarship valued by the COM. Entrepreneurship includes patents and licenses of invention disclosures, software development, and materials transfers (e.g., novel plasmids, transgenic animals, cell lines, antibodies, and similar reagents), technology commercialization, formation of startup companies and licensing and option agreements. Inasmuch as there are no expressly defined metrics for entrepreneurship, the Department will analyze these flexibly. Generally, invention disclosures and copyrights will be considered equivalent to a professional meeting abstract or conference proceeding, patents should be considered equivalent to an original peer-reviewed manuscript, licensing activities that generate revenues should be considered equivalent to extramural grant awards, and materials transfer activities should be considered evidence of national (or

international) recognition and impact. These entrepreneurial activities will be recognized as scholarly or service activities in the promotion and tenure dossier.

Teaching and Mentoring: A distinctive record of teaching and mentoring excellence is required for promotion and tenure. Excellence is demonstrated by positive evaluations by students, residents, fellows, local colleagues and/or national peers. Teaching awards and other honors are also highly supportive of teaching excellence. A faculty member may also demonstrate a favorable impact on teaching and training programs, including curricular innovation, new teaching modalities or methods of evaluating teaching, and program or course development. Development of impactful, innovative programs that integrate teaching, research and patient care are valued.

Teaching excellence is most commonly demonstrated in this track through evaluations and peer feedback based on presentations at other academic institutions, presentations or tutorials at scientific conferences or meetings, presentations at other medical centers or hospitals, and the like. Active participation as a mentor in training grants such as NIH T32 or K-awards F31, F32 or other mentored fellowship awards for graduate students or postdoctoral fellows is highly valued as a teaching and mentoring activity.

Service: Service includes administrative service to OSU, excellent patient care, program development, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University. Evidence of service can include appointment or election to Department, College of Medicine, hospital, and/or University committees. Evidence of professional service to the faculty member's discipline can include journal editorships, reviewer for journals or other learned publications, offices held and other service to local and national professional societies. Evidence of the provision of professional expertise to public and private entities beyond the University includes: reviewers of proposals, external examiner, service on panels, boards, committees and commissions, program development, professional consultation to industry, government, and education. Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion. Table 1 below provides additional examples of service .

For clinicians seeking tenure, accommodation will be made for the time devoted to clinical practice as reflected in percent effort or average RVUs/FTE. For example, a 25 to 50% clinical commitment will reduce the required number of publications, H index and other comparable indices by 25%. However, evidence of at least co-investigator status in one of the grant categories listed is a prerequisite to tenure. For clinicians with a greater than 50% clinical commitment there should be either evidence of co-investigator status in one of the grant categories listed as a prerequisite to tenure and/or strong publication record (i.e., ≥ 50 peer reviewed publications) coupled with clear evidence of a national reputation for clinical excellence and innovation. Similar accommodations can be made on the basis of educational or administrative commitments.

b. ASSOCIATE WITHOUT TENURE

Promotion to Associate Professor without Tenure is available to faculty members with 11 year probationary periods. The criteria for promotion will require a level and pattern of achievement that demonstrates that the candidate is making significant progress * toward tenure, but has not yet achieved all the requisite criteria for promotion with tenure. It is expected that promotion to Associate Professor

without tenure will be common in the in the College of Medicine among scholars with clinical roles prior to completion of the 11 year probationary period. A department may propose a faculty member for promotion consideration (without tenure) in cases where a faculty member is making progress but has not achieved the necessary requirements for tenure. In addition faculty committees (at the Department or College) or administrators (Chair or Dean) may determine that a faculty member's accomplishments do not merit tenure and may recommend promotion without tenure even if a faculty member has requested promotion with tenure. Promotion without tenure may only occur if a candidate is not in the mandatory review year. If a clinician candidate is promoted without tenure, the tenure review must occur within six years, and no later than the mandatory review year, whichever comes first.

*Significant progress will be defined as reaching the majority but not all of the targets determined to be appropriate based on clinical FTE (the targets are reduced by the percent FTE devoted to clinical work).

C. PROMOTION TO PROFESSOR (TENURE-TRACK)

Awarding promotion to the rank of Professor with tenure must be based upon convincing evidence that the candidate has a sustained, eminent record of achievement recognized. *The primary criterion is evidence of national leadership or international recognition within the field.* The general criteria for promotion in scholarship, teaching and service require more advanced and sustained quantity, quality and impact than that required for promotion to associate professor. Importantly, the standard for external reputation is substantially more rigorous than for promotion to Associate Professor with tenure. This record of excellence must be evident from activities undertaken and accomplishments achieved since being appointed or promoted to the rank of associate professor.

Scholarship: A sustained record of external funding and an enhanced quality and quantity of scholarly productivity as an Associate Professor is required for promotion to Professor (see table 1). Candidates for promotion to professor should ideally have 20-40 peer-reviewed publications since their promotion to associate professor. Clear evidence of a national leadership or international reputation including (but not limited to): election to a leadership position in an international society or repetitive appointments to a national office, service as a national committee or task force chair, chair of an NIH or other federal review panel, regular membership on an NIH (or other funding source) study section, peer recognition or awards for research, and editorships and lectures in international venues. Candidates for promotion will be expected to have developed and maintained nationally competitive and peer reviewed extramural funding to support their research program including sustained funding from PCORI, NIH, CDC, NIDRR, various charitable foundations or another private or public funding source that applies a similar level of rigor. For clinician scientists seeking promotion to professor accommodation should be made in their grant requirements based on their clinical duties.

Teaching and Mentoring: A record of teaching excellence as an Associate Professor must continue to justify promotion to the rank of Professor. Evidence for exemplary teaching includes outstanding student and peer evaluations, course or workshop leadership and design, a training program directorship, teaching awards, and organization of national course and curricula and participation in specialty boards or Residency Review Committees of the Accreditation Council for Graduate Medical Education. Active participation as a mentor in training grants such as NIH T32 or K-awards is highly valued as a teaching and mentoring activity.

Mentorship of junior faculty may also demonstrate teaching excellence. It is presumed that this will take the form of a primary mentoring relationship, and not just ad hoc career coaching. Candidates should evidence mentoring relationships by providing mentees' evaluations.

Service: Promotion to the rank of Professor requires service with distinction to the COM, OSU, and in national and international professional societies. Service can include leadership roles on OSU committees, in professional organizations and journal editorships. Evidence of the provision of professional expertise could include roles as a board examiner, service on panels, boards, committees and commissions, program development, and professional consultation to industry, government, and education.

For clinicians seeking promotion to professor with tenure, accommodation will be made for the time devoted to clinical practice as reflected in percent effort or average RVUs/FTE. However, for those with 25 to 50% clinical effort evidence of at least co-investigator status in one of the grant categories listed is a prerequisite to tenure. For clinicians with a greater than 50% clinical commitment there should be either evidence of co-investigator status in one of the grant categories listed and/or strong publication record coupled with international recognition of clinical excellence. Similar accommodations can be made on the basis of educational and administrative commitments.

<p>Note that all metrics assume they were acquired since last promotion unless otherwise noted.</p> <p>"Highly Recommended" reflects the most common methods for meeting criteria within each area.</p>	Tenure track	
	Associate Professor	Professor
Scholarly Activity Productivity:		
(Highly Recommended) Multiple publications in journals in the candidates discipline that are within the upper half of the ISI	Dependent upon expectations of discipline, but typically 20-40 since appointment (OR 12 with high impact, i.e. in journals within the upper half of ISI, or high SCI, or alternative metrics of impact).	Multiple (dependent upon expectations of discipline, but typically 20-40 since last appointment).
(Highly Recommended) Presentations at national or international meetings since last promotion	Multiple	Multiple
Focus and independence:		

(Highly Recommended) First or senior authored peer-reviewed publications or 'middle' authorship on collaborative multidisciplinary or multicenter projects (with evidence of substantial contribution)	Multiple, reflecting independence	Multiple reflecting independence
(Highly Recommended) Development of a program of research	Articles/grants within same topic area and narrative description	Articles/grants within same topic area and narrative description
Teaching		
<i>Excellence demonstrated through:</i>		
(Highly Recommended) Peer evaluations in classroom or of clinical education	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores
(Highly Recommended) Peer evaluations of lectures at conferences or meetings	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores
(If Applicable) Student Evaluation of Instructor scores	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores
(Highly Recommended) Student, resident, fellow, and/or mentee (junior faculty) evaluations	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores
External evaluation of teaching materials that are sent out for review and rating	Positive evaluation	Positive evaluation
(Highly Recommended) Develop or expand existing curricula, teaching modalities or methods for evaluating teaching	Expand existing curricula	Develop new curricula
Develop or expand programs that integrate teaching, research, and/or patient care and demonstrate impact	Expand existing programs; evidence of impact	Develop new programs, evidence of impact
Training program directorship	Appointment	New or maintained appointment
Teaching awards or other formal recognition of teaching, mentoring, or advising students, residents or junior faculty (since last promotion)	1	1
National teaching awards		1
Service as mentor on training grant	Funded grant	Funded grant

Organize national courses and curricula	1	1
Participation on specialty boards or Residency Review Committees for the Accreditation Council of CME	1	1
Service <i>Excellence demonstrated by:</i>		
(Highly Recommended) Active participant in national organization	Committee membership	Committee or task force chair
(Highly Recommended) *Selection (elected or appointed) for service in national or international organization	Elected or appointed for service in national or international organization	Appointed or elected role in international organization or repeated/multiple appointed or elected roles in national organization
Participation in community outreach and diversity projects and grants	Evidence of active participation	Evidence of leadership role
(Highly Recommended) Participation in division, college, or university committees, task forces, and councils	Evidence of active participation	Evidence of leadership role
Participation in program planning, program accreditation or program outcome assessment	Evidence of active participation	Evidence of leadership role
Reviewer for professional or scientific journals	Guest reviewer	Editorial Board Member
*Journal editor		Associate or Senior Editor
Served on local government or private foundation grant review panel	Reviewer	Chair
*Served on federal agency grant review panel	Reviewer	Reviewer or Chair
Exemplary patient care as evidenced by patient satisfaction surveys	Preponderance of ratings in the upper half of possible scores	Preponderance of ratings in the upper half of possible scores
*National recognition for patient care or clinical program development	Peer review or National Ranking	Peer review or National Ranking Award
*National awards for clinical excellence and/or program development		
*Professional consultation for industry, government or education outside of OSU	Evidence of invitation and provision of service	Evidence of invitation and provision of service

*Participation in external steering, guideline, or advisory committees, boards, commissions or panels	Member	Leadership role
Sustainability *(Highly Recommended) PI on peer-reviewed nationally competitive extramural grants that support the productivity of the independent researcher across multiple years	1	2
*Site PI on multicenter research grants	1	2
Mid-career K award	1	1
Submitted as PI nationally competitive grants that were scored	2	na
PI on investigator-initiated industry contracts	1	2
Co-I on nationally competitive peer-reviewed research grants	2	3
*PI on federal agency agreements and contracts	1	2
Patent/Licensing activities generating revenue	1	2
National/international Impact <i>National/international impact demonstrated by (see also * selections in other categories, not repeated here):</i>		
Invited national presentations	2	Multiple
Invited International presentations	1	2
H index	10	20
Publications in journals in the upper half of the ISI for Rehabilitation Science and Clinical Neurology	Majority	Majority
Research award	1	1
Major author or editor of books or chapters	2	Multiple
Entrepreneurial accomplishments linked to the scholarly focus such as materials transfer activities	Evidence of profitability	Evidence of profitability

Notes

* Also denoted evidence of national or international impact

§ To determine if a journal satisfies the requirement for being in the top half of the ISI Web of Knowledge Journal Citation Reports for a particular category, sort the journals within the category by impact factor (1 year), then look at the top 50% of the journals within that category

2. PROMOTION OF CLINICAL FACULTY

Clinical faculty members have a greater responsibility for clinical teaching and patient care than individuals in the Tenure-track. Clinical faculty members are not eligible for tenure. The criteria in the categories of teaching and service are, for the most part, similar to those for the Tenure-track for each

faculty rank, although there is greater emphasis on teaching, service and patient care in this track, and less emphasis on traditional scholarship.

Clinical Faculty members may continue their service to the Department and the University without ever seeking promotion to the next higher faculty rank, simply through repeated reappointment at the same level. However, the goals and objectives of the College and the University are best served when all faculty members, in all tracks, strive for continued improvement in all academic areas as measured by meeting or exceeding the requirements for promotion to the next faculty rank.

With the exception of the Clinical Excellence Track, the primary criterion for awarding of promotion to the rank of Associate Professor in the Clinical faculty is convincing evidence that that the candidate has developed a national level of impact and recognition since being appointed to the rank of Assistant Professor. The primary criterion for awarding of promotion to the rank of Professor in the Clinical faculty is convincing evidence that that the candidate demonstrates national leadership or international recognition. Candidates pursuing promotion to Associate Professor in the Clinical Excellence Track must demonstrate that their clinical work has contributed to the national reputation of the Medical Center, while those seeking promotion to Professor must demonstrate national recognition as an individual.

Faculty members on the clinical faculty typically pursue careers as clinician scholars, clinician educators or clinical excellence.

a. ASSOCIATE, CLINICIAN EDUCATOR PATHWAY (TABLE 2)

The awarding of promotion to the rank of Associate Professor in the Clinical faculty – Clinician-Educator Pathway should be based upon convincing evidence that that the candidate has developed a national level of impact and recognition as a clinician educator since being appointed to the rank of Assistant Professor. Examples of how this can be achieved are provided in Table 3.

Teaching and Mentoring: A distinctive record of teaching and mentoring excellence is required for promotion. Excellence is demonstrated by positive evaluations by students, residents, fellows, local colleagues and national peers. Teaching awards and other honors are necessary evidence of teaching excellence. Candidates should demonstrate favorable impact on teaching and training programs, including curriculum innovation, new teaching modalities or methods of evaluating teaching, and program or course development. Development of impactful, innovative programs that integrate teaching, research and patient care are particularly valued. Active participation as a mentor in training grants such as NIH T32 or K-awards and other such mentored programs is highly valued as a teaching and mentoring activity.

Service: Service is broadly defined to include administrative service to the University, exemplary patient care, program development relating to clinical, administrative, leadership and related activities, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University. Evidence of service can include membership on department, College, hospital, or University committees and/or participation in external steering, guideline, or advisory committees, boards, commissions or panels.

Scholarship: The candidate should demonstrate contributions to scholarship as reflected by primary or senior authorship of multiple peer-reviewed journal publications and scholarly review articles focused on pedagogic theory, innovative teaching techniques or development of web-based or video-teaching modules (dependent on expectations of discipline, typically 1 annually)

b. PROFESSOR, CLINICIAN EDUCATOR PATHWAY

The awarding of promotion to the rank of Professor in the Clinical faculty – Clinician-Educator pathway must be based upon convincing evidence that that the candidate has developed a national level of leadership or international recognition as a teacher since being appointed to the rank of Associate Professor. Examples of how this can be achieved are provided in Table 2.

Teaching and Mentoring: A distinctive record of sustained superlative teaching and mentoring excellence is required for promotion. Excellence is demonstrated by sustained positive evaluations by students, residents, fellows, local colleagues and national peers. Multiple teaching awards and other honors are indicative of this level of teaching excellence. Candidates must demonstrate favorable impact on teaching and training programs, including curriculum innovation, new teaching modalities or methods of evaluating teaching, and program or course development. Development of multiple impactful, innovative programs that integrate teaching, research and patient care are valued. Teaching excellence may also be demonstrated through participation in specialty boards such as Resident Review Committees, specialty boards and the Accreditation Council for Graduate Medical Education.

Mentorship of junior faculty may also demonstrate teaching excellence. It is presumed that this will take the form of a primary mentoring relationship, and not just ad hoc career coaching. Candidates should evidence mentoring relationships by providing mentees’ evaluations.

Service: Service is broadly defined to include administrative service to the University, exemplary patient care, program development relating to clinical, administrative, leadership and related activities, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University. Evidence of service can include appointment or election to College, hospital, and/or University committees. Evidence of professional service to the faculty member's discipline should include journal editorships, and offices held and other service to national professional societies.

Scholarship: The candidate must demonstrate sustained contributions to scholarship as reflected by primary or senior authorship of peer-reviewed journal publications and scholarly review articles focused on pedagogic theory, innovative teaching techniques or development of web-based or video-teaching modules (dependent on expectations of discipline, typically 2 annually).

<p>Note that all metrics assume they were acquired since last promotion unless otherwise noted. "Highly Recommended" denotes the most expected methods for meeting criteria within each area.</p>	<p>Clinical Educator</p> <table border="1" style="width: 100%; text-align: center;"> <tr> <td data-bbox="1015 1688 1291 1814">Associate Professor</td> <td data-bbox="1291 1688 1580 1814">Professor</td> </tr> </table>		Associate Professor	Professor
Associate Professor	Professor			
<p>Scholarly Activity Productivity:</p>				

Multiple publications in journals in the candidates discipline that are within the upper half of the ISI. Clinical Track candidates may also fulfill this requirement with scholarly review articles and/or web-based or video teaching modules	Dependent on expectations of discipline, typically 1 annually	Dependent on expectations of discipline, typically 2 annually
(Highly Recommended) Development and metrics indicating substantial impact of an educational program on fulfilling the mission(s) of the COM	Narrative and commonly accepted metrics	Narrative and commonly accepted metrics
(Highly Recommended) Presentations at national or international meetings since last promotion	At least 2	Multiple
Focus and independence:		
(Highly Recommended) First or senior authored educationally-focused publications (includes curricula, etc.) or 'middle' authorship on collaborative multidisciplinary or multicenter projects (with evidence of substantial contribution)	Multiple, reflecting independence	Multiple, reflecting independence
(Highly Recommended) Evidence of independence in development of educational program that helps fulfill the mission(s) of the COM	Independence and co-leadership role	Independence and leadership role
Teaching		
Excellence demonstrated through:		
(Highly Recommended) Peer evaluations in classroom or of clinical education	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores
Peer evaluations of lectures at conferences or meetings	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores
(Highly Recommended) Student Evaluation of Instructor scores	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores
(Highly Recommended) Student, resident, fellow, and/or mentee (junior faculty) evaluations	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores
External evaluation of teaching materials that are sent out for review and rating	Positive evaluation	Positive evaluation
(Highly Recommended) Develop or expand existing curricula, teaching modalities or methods for evaluating teaching	Expand existing curricula	Develop new curricula
Develop or expand programs that integrate teaching, research, and/or patient care and demonstrate impact	Expand existing programs; evidence of impact	Develop new programs, evidence of impact
Training program directorship	Appointment	New or maintained appointment

(Highly Recommended) Teaching awards or other formal recognition of teaching, mentoring, or advising students, residents or junior faculty (since last promotion)	At least 1	At least 1
*National teaching awards		1
Service as mentor on training grant	Funded grant	Funded grant
Organize national courses and curricula	At least 1	At least 1
Participation on specialty boards or Residency Review Committees for the Accreditation Council of CME	At least 1	At least 1
Service <i>Excellence demonstrated by:</i>		
(Highly Recommended) Active participant in national organization	Committee membership	Committee or task force chair
*Selection (elected or appointed) for service in national or international organization	Appointed or elected role in national or international organization	An appointed or elected role in international organization or repeated/multiple appointed or elected roles in national organization
Participation in community outreach and diversity projects and grants	Evidence of active participation	Evidence of leadership role
(Highly Recommended) Participation in division, college, or university committees, task forces, and councils	Evidence of active participation	Evidence of leadership role
Participation in program planning, program accreditation or program outcome assessment	Evidence of active participation	Evidence of leadership role
Exemplary patient care as evidenced by patient satisfaction surveys	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores
*National recognition for patient care or clinical program development	Peer review or National Ranking	Peer review or National Ranking Award
*National awards for clinical excellence and/or program development		
*Professional consultation for industry, government or education outside of OSU	Evidence of invitation and provision of service	Evidence of invitation and provision of service
*Participation in external steering, guideline, or advisory committees, boards, commissions or panels	Member	Leadership role
Sustainability		

<i>Sustainability for Clinical Track candidates :</i>		
*Leader of nationally-funded or multi-institutional educational/training project	1	1
*PI (or site PI for multicenter) for peer-reviewed nationally competitive extramural grant	1	1
Co-I on national, extramural grants	1	2
(Highly Recommended) Evidence that educational program is self sustaining	enrollment, revenue, or accepted metric	enrollment, revenue, or accepted metric
Patent/Licensing activities generating revenue	evidence of profitability	evidence of profitability
National/international Impact <i>National/international impact demonstrated by (see also * selections in other categories, not repeated here):</i>		
Invited national presentations	At least 1	Multiple
Invited International presentations	At least 1	Multiple
Obtained training or educational grants as PI or Co-I	1	1
Major author or editor of books or chapters	2	Multiple
Entrepreneurial accomplishments linked to the scholarly focus such as materials transfer activities	Evidence of profitability	Evidence of profitability

Notes

* Also denoted evidence of national or international impact

§ To determine if a journal satisfies the requirement for being in the top half of the ISI Web of Knowledge Journal Citation Reports for a particular category, sort the journals within the category by impact factor (1 year), then look at the top 50% of the journals within that category

c. ASSOCIATE, CLINICIAN SCHOLAR PATHWAY

The awarding of promotion to the rank of Associate Professor in the Clinical faculty – Clinician-Scholar pathway must be based upon convincing evidence that that the candidate has developed a national level of impact and recognition as a clinician scientist since being appointed to the rank of Assistant Professor (see Table 3).

Teaching and Mentoring: A distinctive record of teaching and mentoring excellence is required for promotion. Excellence is demonstrated by positive evaluations by students, residents, fellows, local colleagues and national peers. Teaching awards and other honors are also supportive of teaching excellence. Teaching excellence must be demonstrated through evaluations and peer feedback based on presentations at other academic institutions, presentations or tutorials at scientific conferences or meetings, presentations at other medical centers or hospitals, and the like. Active participation as a mentor in training grants such as NIH T32 or K-awards and other such mentored programs is very highly valued as a teaching and mentoring activity.

Scholarship: The candidate must demonstrate contributions to scholarship as reflected by primary or senior authorship of peer-reviewed journal publications, scholarly review articles and case reports, and participation in basic, translational or clinical research projects or in clinical trials. Again, participation in collaborative, multidisciplinary research and team science is highly valued even though it may result in “middle” authorship, as long as the faculty member’s unique contribution can be discerned. Faculty on this track should have acquired external funding in support of their program of scholarship. Candidates should have a track record of being investigators in foundation, industry or NIH studies. Entrepreneurship and inventorship are also evidence of scholarly activity, as described in Section VII [Criteria for promotion to Associate Professor with tenure] above, and will be viewed most favorably.

Service: Service is broadly defined to include administrative service to the University, exemplary patient care, program development relating to clinical, administrative, leadership and related activities, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University, including participation in external steering, guideline, or advisory committees, boards, commissions or panels. Evidence of service can include membership on department, COM, hospital, and/or University committees and mentoring activities.

d. PROFESSOR, CLINICIAN SCHOLAR PATHWAY

The awarding of promotion to the rank of Professor in the Clinical faculty – Clinician-Scholar pathway must be based upon convincing evidence that that the candidate has developed national leadership or international recognition as a clinician scientist since being appointed to the rank of Associate Professor (see Table 3).

Teaching and Mentoring: A record of teaching excellence as an Associate Professor must continue to justify promotion to the rank of Professor. The faculty member should have made unique and impactful contributions to the teaching mission as an Associate Professor. Active participation as a mentor in training grants such as NIH T32 or K-awards and other such mentored programs is highly valued as a teaching and mentoring activity.

Mentorship of junior faculty may also demonstrate teaching excellence. It is presumed that this will take the form of a primary mentoring relationship, and not just ad hoc career coaching. Candidates should evidence mentoring relationships by providing mentees’ evaluations.

Service: Promotion to the rank of Professor requires service with distinction to the College of Medicine, OSU, and in a national context. The faculty member should have made new and impactful service contributions as an Associate Professor. Candidates should have led the development of new and innovative clinical or clinical research programs which received national recognition and participated in leadership positions of learned academic education professional societies.

Scholarship: The candidate must demonstrate contributions to scholarship as reflected by primary or senior authorship of peer-reviewed journal publications, scholarly review articles and case reports, and participation in basic, translational or clinical research projects or in clinical trials. Faculty members

on this track should ideally have been co-investigators on multiple NIH, Pharma, or major national clinical trials. Entrepreneurship and inventorship are also evidence of scholarly activity, as described in Section VI.A. and will be viewed most favorably.

<p>Note that all metrics assume they were acquired since last promotion unless otherwise noted.</p> <p>"Highly Recommended" denotes the most expected methods for meeting criteria within each area.</p>	Clinical Scholar	
	Associate Professor	Professor
<p>Scholarly Activity</p> <p>Productivity:</p>		
(Highly Recommended) Multiple publications in journals in the candidates discipline that are within the upper half of the ISI	Dependent on expectations of discipline, typically 2 annually OR 1 annually in upper ISI (typically minimum of 15 total)	Typically 3 annually (typically minimum of 25 total)
(Highly Recommended) Presentations at national or international meetings since last promotion	Multiple	Multiple
Development and metrics indicating substantial impact of a scholarly program on fulfilling the mission(s) of the COM	Narrative and commonly accepted metrics	Narrative and commonly accepted metrics
<p>Focus and independence:</p>		
First or senior authored peer-reviewed publications or 'middle' authorship on collaborative multidisciplinary or multicenter projects (with evidence of substantial contribution)	Multiple reflecting independence	Multiple reflecting independence
(Highly Recommended) Evidence of independence in development of scholarly program that helps fulfill the mission(s) of the COM	Independence and co-leadership role	Independence and leadership role
<p>Teaching</p>		
<p>Excellence demonstrated through:</p>		
(Highly Recommended) Peer evaluations in classroom or of clinical education	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores
(Highly Recommended) Peer evaluations of lectures at conferences or meetings	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores
Student Evaluation of Instructor scores	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores

(Highly Recommended) Student, resident, fellow, and/or mentee (junior faculty) evaluations	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores
External evaluation of teaching materials that are sent out for review and rating	Positive evaluation	Positive evaluation
Develop or expand existing curricula, teaching modalities or methods for evaluating teaching	Expand existing curricula	Develop new curricula
Develop or expand programs that integrate teaching, research, and/or patient care and demonstrate impact	Expand existing programs; evidence of impact	Develop new programs, evidence of impact
Training program directorship	Appointment	New or maintained appointment
Teaching awards or other formal recognition of teaching, mentoring, or advising students, residents or junior faculty (since last promotion)	At least 1	At least 1
*National teaching awards		1
Service as mentor on training grant	Funded grant	Funded grant
Organize national courses and curricula	At least 1	At least 1
Participation on specialty boards or Residency Review Committees for the Accreditation Council of CME	At least 1	At least 1
Service <i>Excellence demonstrated by:</i>		
(Highly Recommended) Active participant in national organization	Committee membership	Committee or task force chair
*Selection (elected or appointed) for service in national or international organization	Appointed or elected role in national or international organization	1 appointed or elected role in international organization or repeated/multiple appointed or elected roles in national organization
Participation in community outreach and diversity projects and grants	Evidence of active participation	Evidence of leadership role
(Highly Recommended) Participation in division, college, or university committees, task forces, and councils	Evidence of active participation	Evidence of leadership role
Participation in program planning, program accreditation or program outcome assessment	Evidence of active participation	Evidence of leadership role

Exemplary patient care as evidenced by patient satisfaction surveys	Preponderance of ratings in the upper half of possible scores	Preponderance of ratings in the upper half of possible scores
*National recognition for patient care or clinical program development	Peer review or National Ranking Evidence of invitation and provision of service Member	Peer review or National Ranking Award Evidence of invitation and provision of service Leadership role
*National awards for clinical excellence and/or program development		
*Professional consultation for industry, government or education outside of OSU		
*Participation in external steering, guideline, or advisory committees, boards, commissions or panels		
Sustainability		
<i>Sustainability for Clinical Track candidates :</i>		
*Leader of nationally-funded or multi-institutional educational/training project	Site (1)	National (1)
*PI (or site PI for multicenter) for peer-reviewed nationally competitive extramural grant	1	1
Co-I on national, extramural grants	1	2
(Highly Recommended) Evidence that scholarly program is self sustaining	enrollment, revenue, or accepted metric	enrollment, revenue, or accepted metric
Patent/Licensing activities generating revenue	evidence of profitability	evidence of profitability
National/international Impact <i>National/international impact demonstrated by (see also * selections in other categories, not repeated here):</i>		
Invited national presentations	At least 1	Multiple
Invited International presentations	At least 1	Multiple
Obtained training or educational grants as PI or Co-I	1	1
Major author or editor of books or chapters	2	Multiple
Entrepreneurial accomplishments linked to the scholarly focus such as materials transfer activities	Evidence of profitability	Evidence of profitability

Notes

* Also denoted evidence of national or international impact

§ To determine if a journal satisfies the requirement for being in the top half of the ISI Web of Knowledge Journal Citation Reports for a particular category, sort the journals within the category by impact

factor (1 year), then look at the top 50% of the journals within that category

E. ASSOCIATE PROFESSOR, CLINICAL EXCELLENCE PATHWAY

In the circumstance where individuals are assigned major responsibilities (90% time or greater) for clinical care and clinical administrative activities, faculty members may seek promotion for excellence in activities categorized as “scholarship of practice” (or “scholarship of application”). The clinical time commitment of these individuals may not allow the achievement of personal national recognition for their accomplishments; however, their unique contributions serve to enhance the national recognition of the Medical Center or their assigned hospital. For these individuals, their contribution to the regional and national recognition of the Medical Center may serve as a proxy for individual national recognition. Metrics might include consistent rankings among the Nation’s elite in the Castle-Connolly or U.S. News Physicians Survey, or similar (Best Doctors, Inc). Examples of methods for demonstrating clinical excellence include (as applicable to discipline):

- a) Referral patterns from beyond the typical distribution for their discipline (demonstrates a reputation external to our organization as “best in class”).
- b) Referral of the most complex and sickest patients (identifies those physicians/psychologists with clinical skills beyond their peers).
- c) Multiple lines of evidence supporting excellence in clinical performance, including clinical measures such as quality indicators, mortality metrics, complication rates, and patient satisfaction rates where performance measures can easily be internally and externally benchmarked for comparison.
- d) Establishment of quality improvements or systems-based changes that result in enhancement of the care provided to OSU Medical Center patients.
- e) A sustained track record of exemplary clinical leadership and unique program development within the institution.
- f) Demonstration of dissemination of peer reviewed data and expertise in the form of Grand Rounds, clinical practice guidelines, seminars, podcasts, websites, small group activities with peer reviewed data and internal benchmarking.
- g) Demonstration of collaboration with researchers and educators in the department and beyond.

The awarding of promotion to the rank of Associate Professor on the Clinical Excellence Pathway must be based upon convincing evidence that the candidate has demonstrated a level of excellence and a record of impact beyond the usual physician’ or psychologist’s scope or sphere of influence. Promotion will not be granted purely on the basis of length of service to the institution or satisfactory job performance.

One of the most important measures of excellence in the scholarship of practice would be evidence that activities or innovations of an individual faculty member have contributed to a change in the scope and the nature of practice in his or her own discipline. Another piece of evidence could be the

development of new and innovative approaches to the clinical management of challenging clinical problems.

A faculty member who qualifies for promotion on this pathway should have supportive annual evaluations that document clinical effort in the years leading up to promotion on this pathway.

f. PROFESSOR, CLINICAL EXCELLENCE PATHWAY

The awarding of promotion to the rank of Professor in the Clinical Excellence Pathway must be based upon convincing evidence that that the candidate’s work has developed a national impact and recognition for clinical excellence and innovation since being appointed to the rank of Associate Professor. Metrics should include consistent rankings among the Nation’s elite in the Castle and Connelly or U.S. News Physicians Survey or similar (Best Doctors, Inc). They should receive patient referrals from throughout the United States. National awards for clinical excellence and innovation are clear indicators of achievement.

	Clinical Excellence	
	Associate Professor	Professor
<p>Note that all metrics assume they were acquired since last promotion unless otherwise noted. "Highly Recommended" reflects the most expected methods for meeting criteria within each area.</p>		
<p>Scholarly Activity Productivity:</p>		
<p>Multiple publications in journals in the candidates discipline that are within the upper half of the ISI. Clinical Track candidates may also fulfill this requirement with scholarly review articles and/or web-based or video teaching modules</p>	<p>Dependent on expectations of discipline, typically 2 annually OR 1 annually in upper ISI (typically minimum of 10 total)</p>	<p>Dependent on expectations of discipline, typically 2 annually OR 1 annually in upper ISI (typically minimum of 10 total)</p>
<p>(Highly Recommended) Metrics or other evidence indicating substantial impact of candidate's advancements in clinical care, programs or operations on fulfilling the mission(s) of the COM and OSUWMC</p>	<p>Outcomes and/or metrics</p>	<p>Outcomes and/or metrics</p>
<p>Presentations at national or international meetings since last promotion</p>	<p>at least 1</p>	<p>at least 3</p>
<p>Focus and independence:</p>		
<p>(Highly Recommended) Evidence of independence in development of clinical program that helps fulfill the mission(s) of the COM</p>	<p>Independence and co-leadership role</p>	<p>Independence and leadership role</p>
<p>Teaching</p>		
<p>Excellence demonstrated through:</p>		

(Highly Recommended) Peer evaluations in classroom or of clinical education	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores
Peer evaluations of lectures at conferences or meetings	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores
Student Evaluation of Instructor scores	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores
(Highly Recommended) Student, resident, fellow, and/or mentee (junior faculty) evaluations	Majority of ratings in the upper half of possible scores	Majority of ratings in the upper half of possible scores
External evaluation of teaching materials that are sent out for review and rating	Positive evaluation	Positive evaluation
Develop or expand existing curricula, teaching modalities or methods for evaluating teaching	Expand existing curricula	Develop new curricula
(Highly Recommended) Develop or expand programs that integrate teaching, research, and/or patient care and demonstrate impact	Expand existing programs; evidence of impact	Develop new programs, evidence of impact
Training program directorship	Appointment	New or maintained appointment
Teaching awards or other formal recognition of teaching, mentoring, or advising students, residents or junior faculty (since last promotion)	1	1
*National teaching awards		1
Service as mentor on training grant	Funded grant	Funded grant
Organize national courses and curricula	1	1
Participation on specialty boards or Residency Review Committees for the Accreditation Council of CME	1	1
Service <i>Excellence demonstrated by:</i>		
Active participant in national organization	Service on committee	Service on committee
*Selection (elected or appointed) for service in national or international organization	Appointed or elected role in national organization	Appointed or elected role in national organization
Participation in community outreach and diversity projects and grants	Evidence of active participation	Evidence of leadership role
(Highly Recommended) Participation in division, college, or university committees, task forces, and councils	Evidence of active participation	Evidence of leadership role
(Highly Recommended) Participation in program planning, program accreditation or program outcome assessment	Evidence of active participation	Evidence of leadership role

(Highly Recommended) Exemplary patient care as evidenced by patient satisfaction surveys	Preponderance of ratings in the upper half of possible scores	Preponderance of ratings in the upper half of possible scores
*National recognition for patient care or clinical program development	Peer review or National Ranking	(Highly Recommended) Peer review or National Ranking
*National awards for clinical excellence and/or program development	Award	Award
*Professional consultation for industry, government or education outside of OSU	Evidence of invitation and provision of service	Evidence of invitation and provision of service
*Participation in external steering, guideline, or advisory committees, boards, commissions or panels	Member	Leadership role
Sustainability		
<i>Sustainability for Clinical Track candidates :</i>		
*Leader of nationally-funded or multi-institutional educational/training project	Site (1)	National (1)
*PI (or site PI for multicenter) for peer-reviewed nationally competitive extramural grant	1	1
Co-I on national, extramural grants	1	2
(Highly Recommended) Evidence that clinical program is self sustaining	enrollment, revenue, or accepted metric	enrollment, revenue, or accepted metric
Patent/Licensing activities generating revenue	evidence of profitability	evidence of profitability
National/international Impact		
<i>National/international impact demonstrated by (see also * selections in other categories, not repeated here):</i>		
Accomplishments make important contribution to national recognition of division, department or Medical Center	(Highly Recommended) Evidence that work has contributed to national recognition of organization) (proxy for individual national recognition)	Professor requires individual national recognition
Invited national presentations	1	2
Invited International presentations	1	2
Obtained training or educational grants as PI or Co-I	1	1
Major author or editor of books or chapters	1	Multiple

Entrepreneurial accomplishments linked to the scholarly focus such as materials transfer activities	Evidence of profitability	Evidence of profitability
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Notes

* Also denoted evidence of national or international impact

§ To determine if a journal satisfies the requirement for being in the top half of the ISI Web of Knowledge Journal Citation Reports for a particular category, sort the journals within the category by impact factor (1 year), then look at the top 50% of the journals within that category

4. PROMOTION OF RESEARCH FACULTY

In the Research faculty, the criteria for promotion focus principally on the category of research, and the standards are comparable to those used for the Tenure-track for each faculty rank. Table 5 provides examples of methods that the candidate can demonstrate national recognition (for promotion to Associate Professor) and national leadership or international recognition (for promotion to Professor).

a. ASSOCIATE

Scholarship: Scholarship is broadly defined as the discovery and dissemination of new knowledge. Achievement of excellence in scholarship is demonstrated by discovery of a substantial body of original knowledge that is published in high quality, peer-reviewed journals or proceedings, and achievement of a national reputation for expertise and impact in one’s field of endeavor. Such endeavors might include laboratory investigation, development of innovative programs, theoretical insight, innovative interpretation of an existing body of knowledge, clinical science, public health and community research, implementation science, and diffusion research, etc. Participation in collaborative, multidisciplinary research and team science is highly valued, especially to the extent that a faculty member’s record of collaborative scholarship includes manuscripts on which authorship is first, senior, or corresponding, or the individual input of the faculty member as a middle author is uniquely contributory and clearly evident.

The development of a competitive, innovative and distinctive program of scholarship is also evidenced by acquisition of peer-reviewed, nationally competitive extramural support as a PI or multiple-PD/PI or as co-investigator on several awards. Similarly, status as core director in a program grant is an acceptable criterion for extramural funding.

Nationally competitive, peer reviewed funding from public or private sources including support from national charitable foundations (*e.g.*, American Heart Association or American Cancer Society), industry, or federal entities such as the NIH, NIDRR, PCORI, CDC and the NSF will satisfy the criterion for nationally competitive peer reviewed funding should evidence exist for a sustained record of funding from these types of agencies. Faculty members are encouraged to collaborate with other investigators and may therefore meet the requirement for extramural support for their research as a co-investigator on public or private grants comparable to the level of rigor required by NIH. Funding through pharmaceutical or instrumentation companies for investigator initiated proposals, or as local

principal investigator for multi-center trials also meets the requirement of extramural funding. Similarly, faculty members who generate support for their research programs through their contribution to the creation of patents with associated license-derived income or spin-off companies also meet the criteria for extramural funding. Typically, it is expected that the successful candidate will have a sustained record of 100% salary recovery from extramural sources.

Overall, the number of publications required for promotion should be sufficient to persuasively characterize the faculty member's influence in helping to discover new knowledge in their field. Thus, both quality and quantity are important considerations. Publication as at least a co-author in the field's highest impact factor journals (or publications that are individually highly cited) is an important variable that converges with other factors such as the extent of external funding, invited lectures, invited manuscripts, editorial boards, peer-review panels, and external letters of evaluation in the decision to promote.

It should be appreciated that scholarship exceeding the specified range is not a guarantee of a positive promotion decision. Similarly, records of scholarship below the specified range do not preclude a positive promotion decision.

Entrepreneurship is a special form of scholarship valued by the Department of Physical Medicine and Rehabilitation. Entrepreneurship includes, but may not be limited to, invention disclosures, software development, materials transfers (*e.g.*, novel plasmids, transgenic animals, cell lines, antibodies, and similar reagents), technology commercialization, patent and copyrights, formation of startup companies and licensing and option agreements. Inasmuch as there are no expressly defined metrics for entrepreneurship, the Department of Physical Medicine and Rehabilitation will analyze these flexibly. Generally, invention disclosures and copyrights will be considered equivalent to a professional meeting abstract or conference proceeding, patents should be considered equivalent to an original peer-reviewed manuscript, licensing activities that generate revenues should be considered equivalent to extramural grant awards, and materials transfer activities should be considered evidence of national (or international) recognition and impact. These entrepreneurial activities will be recognized as scholarly or service activities in the promotion dossier.

b. PROFESSOR

The awarding of promotion to the rank of Research Professor must be based upon convincing evidence that the candidate has developed a national leadership role or an international level of impact and recognition.

Scholarship: A sustained record of external funding and an enhanced quality and quantity of scholarly productivity as an Associate Professor is required for promotion to the rank of Professor on the Research faculty. Clear evidence of national leadership and/or an international reputation must be achieved. Examples of such a national reputation include service on NIH or equivalent grant review panels, participation on steering, guideline or advisory committees, selection for service in a national professional society, invitation for lectureships or scholarly reviews, receipt of national scientific awards, external letters of evaluation and other measures of national impact.

<p>Note that all metrics assume they were acquired since last promotion unless otherwise noted.</p> <p>"Highly Recommended" denotes the most expected methods for meeting criteria within each area.</p>	Research track	
	Associate Professor	Professor
Scholarly Activity		
Productivity:		
(Highly Recommended) Multiple publications in journals in the candidates discipline that are within the upper half of the ISI	Dependent on expectations of discipline, typically 2 annually OR 1 annually that is highly impactful (upper ISI, SCI, or alternative metrics (typically minimum of 15 total))	Typically 3 annually (typically minimum of 25 total)
(Highly Recommended) Presentations at national or international meetings since last promotion	Multiple	Multiple
Focus and independence:		
(Highly Recommended) First or senior authored peer-reviewed publications or 'middle' authorship on collaborative multidisciplinary or multicenter projects (with evidence of substantial contribution)	Multiple, reflecting independence	Multiple, reflecting independence
(Highly Recommended) Development of a program of research	Articles/grants within same topic area and narrative description	Articles/grants within same topic area and narrative description
Sustainability		
* PI on peer-reviewed nationally competitive extramural grants that support the productivity of the independent researcher across multiple years	1	2
*Site PI on multicenter research grants	1	2
Mid-career K award	1	1
Submitted as PI nationally competitive grants that were scored	3 per 5 years	na
PI on investigator-initiated industry contracts	1	2
Co-I on nationally competitive peer-reviewed research grants	2	3
*PI on federal agency agreements and contracts	1	2
Patent/Licensing activities generating revenue	1	2

(Highly Recommended) 100% of salary supported by extramural (outside OSU/OSUWMC) sources	Evidence of support	Evidence of support
National/international Impact <i>National/international impact demonstrated by (see also * selections in other categories, not repeated here):</i>		
Invited national presentations	2 per 5 years	2 per 5 years
Invited International presentations	1 every 5 years	2 every 5 years
H index	10 by 6 years	20 by 12 years
Publications in journals s in the upper half of the ISI for discipline	Majority	Majority
Research award	1	1
Major author or editor of books or chapters	2	Multiple
Entrepreneurial accomplishments linked to the scholarly focus such as materials transfer activities	Evidence of profitability	Evidence of profitability

Notes

* Also denoted evidence of national or international impact

§ To determine if a journal satisfies the requirement for being in the top half of the ISI Web of Knowledge Journal Citation Reports for a particular category, sort the journals within the category by impact factor (1 year), then look at the top 50% of the journals within that category

B. PROMOTION AND TENURE, AND PROMOTION REVIEW: PROCEDURES

Each Department must describe in detail the procedures for promotion and tenure, and promotion reviews, as part of its Appointments, Promotion and Tenure document. These procedures must be fully consistent with those set forth in University Rule [3335-6-04](#) and with the Office of Academic Affairs annually updated procedural guidelines for promotion and tenure reviews found in [Volume 3](#) of the Policies and Procedures Handbook. The basic requirements for promotion and tenure reviews are outlined in the following paragraphs.

In evaluating a candidate's qualifications in teaching, scholarship, and service, reasonable flexibility will be exercised, balancing (where appropriate) heavier commitments and responsibilities in one area of performance against lighter commitments and responsibilities in another. As the College enters new fields of endeavor, including interdisciplinary involvement, and places new emphases on its continuing activities, instances will arise in which the proper work of a faculty member may depart from established academic patterns. Generally, distinguished achievement in scholarship must include evidence of creative expression and innovation in the candidate's discipline.

The College of Medicine is comprised of a wide array of professional disciplines. Care must be taken to apply the criteria for appointment and promotion with sufficient flexibility. In all instances, superior intellectual attainment, in accordance with the criteria set forth, is an

essential qualification for appointment and promotion to all faculty positions. Insistence upon this standard for continuing members of the faculty is necessary for the maintenance and enhancement of the University as an institution dedicated to the discovery and transmission of knowledge.

1. CANDIDATE RESPONSIBILITIES

Candidates are responsible for utilizing Office of Academic Affairs approved electronic dossier and to submit a complete, accurate dossier fully consistent with Office of Academic Affairs guidelines. Candidates should not sign the Office of Academic Affairs Candidate Checklist without ascertaining that they have fully met the requirements set forth in the core dossier outline including, but not limited to, those highlighted on the checklist.

- Candidates are responsible to submit a copy of the department's APT Document that was in effect at the time of the candidate's hire or when the candidate was last promoted, whichever is more recent, if s/he wishes to be reviewed under that document's criteria and procedures. This must be submitted when the dossier is submitted to the department.

Candidates are responsible for reviewing the list of potential external evaluators developed by the department chair and the Promotion and Tenure Committee. The candidate may add no more than three additional names, but is not required to do so. The candidate may request the removal of no more than two names, providing the reasons for the request. The department chair decides whether removal is justified. (Also see External Evaluations below.)

2. PROMOTION AND TENURE COMMITTEE RESPONSIBILITIES

The recommended responsibilities of the Promotion and Tenure Committee are as follows:

- To review this document annually and to recommend proposed revisions to the faculty.
- To consider annually, in spring semester, requests from faculty members seeking a non-mandatory review in the following academic year and to decide whether it is appropriate for such a review to take place. Only professors on the committee may consider promotion review requests to the rank of professor. A simple majority of those eligible to vote on a request must vote affirmatively for the review to proceed.
 - The committee bases its decision on assessment of the record as presented in the faculty member's CV and on a determination of the availability of all required documentation for a full review (student and peer evaluations of teaching). Lack of the required documentation is necessary and sufficient grounds on which to deny a non-mandatory review.
 - A tenured or non-probationary faculty member may only be denied a formal promotion review under Faculty Rule 3335-6-04 (<http://trustees.osu.edu/rules/university-rules.html>) for one year. If the denial is based

on lack of required documentation and the faculty member insists that the review go forward in the following year despite incomplete documentation, the individual should be advised that such a review is unlikely to be successful.

- A decision by the committee to permit a review to take place in no way commits the eligible faculty, the department chair, or any other party to the review to making a positive recommendation during the review itself.
- Annually, in late spring through early autumn semester, to provide administrative support for the promotion and tenure review process as described below.
 - **Late Spring:** Select from among its members a Procedures Oversight Designee__ who will serve in this role for the following year. The Procedures Oversight Designee cannot be the same individual who chairs the committee. The Procedures Oversight Designee's responsibilities are described in the Office of Academic Affairs annual procedural guidelines.
 - **Late Spring:** Suggest names of external evaluators to the department chair.
 - **Summer:** Gather internal evidence of the quality of the candidate's teaching, scholarship, and service from students and peers, as appropriate, within the department.
 - **Early Autumn:** Review candidates' dossiers for completeness, accuracy (including citations), and consistency with Office of Academic Affairs requirements; and work with candidates to assure that needed revisions are made in the dossier before the formal review process begins.
 - Meet with each candidate for clarification as necessary and to provide the candidate an opportunity to comment on his or her dossier. This meeting is not an occasion to debate the candidate's record.
 - To make adequate copies of each candidate's dossier available in an accessible place for review by the eligible faculty before the meeting at which specific cases are to be discussed and voted.
 - Draft an analysis of the candidate's performance in teaching, scholarship and service to provide to the full eligible faculty with the dossier; and seek to clarify any inconsistent evidence in the case, where possible. The committee neither votes on cases nor takes a position in presenting its analysis of the record.
 - Revise the draft analysis of each case following the faculty meeting, to include the faculty vote and a summary of the faculty perspectives expressed during the meeting; and forward the completed written evaluation and recommendation to the department chair.

- Provide a written response, on behalf of the eligible faculty, to any candidate comments that warrant response, for inclusion in the dossier.

h) ELIGIBLE FACULTY RESPONSIBILITIES

The responsibilities of the members of the eligible faculty are as follows:

- To review thoroughly and objectively every candidate's dossier in advance of the meeting at which the candidate's case will be discussed.
- To attend all eligible faculty meetings except when circumstances beyond one's control prevent attendance; to participate in discussion of every case; and to vote.

i) DEPARTMENT CHAIR RESPONSIBILITIES

The responsibilities of the department chair are as follows:

- Where relevant, to verify the prospective candidate's residency status. Faculty are not eligible for tenure or tenure review if they do not have citizenship or permanent residency status.
- **Late Spring:** To solicit external evaluations from a list including names suggested by the Promotion and Tenure Committee, the chair and the candidate. (Also see External Evaluations below.)
- To solicit an evaluation from a TIU head of any department with which the candidate has a joint appointment.
- To remove any member of the eligible faculty from the review of a candidate when the member has a conflict of interest but does not voluntarily withdraw from the review.
- To provide an independent written evaluation and recommendation for each candidate, following receipt of the eligible faculty's completed evaluation and recommendation.
- To meet with the eligible faculty to explain any recommendations contrary to the recommendation of the committee.
- To inform each candidate in writing after completion of the department review process:
 - of the recommendations by the eligible faculty and department chair
 - of the availability for review of the written evaluations by the eligible faculty and department chair

- Of the opportunity to submit written comments on the above material, within ten days from receipt of the letter from the department chair, for inclusion in the dossier.
- To provide a written response to any candidate comments that warrants response for inclusion in the dossier.
- To forward the completed dossier to the college office by that office's deadline, except in the case of associated faculty for whom the department chair recommends against promotion. A negative recommendation by the department chair is final in such cases.
- To write an evaluation and recommendation to the department chair of a tenure initiating unit recommending promotion for a joint appointee by the date requested.

j) EXTERNAL EVALUATIONS

External evaluations are obtained for all promotion and/or tenure reviews. As described above, a list of potential evaluators is assembled by the Promotion and Tenure Committee, the department chair, and the candidate. If the evaluators suggested by the candidate meet the criteria for credibility, a letter is requested from at least one of those persons. Faculty Rule 3335-6-04 requires that no more than half the external evaluation letters in the dossier be written by persons suggested by the candidate.

A minimum of five credible and useful evaluations must be obtained. A credible and useful evaluation:

- Is written by a person highly qualified to judge the candidate's scholarship (or other performance, if relevant) who is not a close personal friend, research collaborator, or former academic advisor or post doctoral mentor of the candidate. Qualifications are generally judged on the basis of the evaluator's expertise, record of accomplishments, and institutional affiliation. The department will only solicit evaluations from full professors at institutions comparable to Ohio State. In the case of an assistant professor seeking promotion to associate professor with tenure, a minority of the evaluations may come from associate professors.
- Provides sufficient analysis of the candidate's performance to add information to the review. A letter's usefulness is defined as the extent to which the letter is analytical as opposed to perfunctory. Under no circumstances will "usefulness" be defined by the perspective taken by an evaluator on the merits of the case.

Since the department cannot control who agrees to write and or the usefulness of the letters received, at least twice as many letters should be sought as are required, and they should be solicited no later than the end of the spring semester prior to the review year. This timing allows additional letters to be requested should fewer than five useful letters result from the first round of requests.

Any potential reviewer who declines to write a letter of evaluation must be included in the department's report of non-responding evaluators.

Templates for the solicitation of external letters of evaluation for faculty on each track in the College of Medicine may be found at:

<http://medicine.osu.edu/faculty/resources/admins/apptoolbox/pages/dossiercontent.aspx>

Under no circumstances may a candidate solicit external evaluations or initiate contact in any way with external evaluators for any purpose related to the promotion review. If an external evaluator should initiate contact with the candidate regarding the review, the candidate must inform the evaluator that such communication is inappropriate and report the occurrence to the department chair, who will decide what, if any, action is warranted (such as requesting permission from the Office of Academic Affairs to exclude that letter from the dossier). It is in the candidate's self-interest to assure that there is no ethical or procedural lapse, or the appearance of such a lapse, in the course of the review process.

All solicited external evaluation letters that are received must be included in the dossier. If concerns arise about any of the letters received, these concerns may be addressed in the department's written evaluations or brought to the attention of the Office of Academic Affairs for advice.

C. DOCUMENTATION

Faculty members preparing their dossiers for promotion and/or tenure review should consult [Volume 3](#) of OAA's policies and procedures manual to ensure that all required documentation is included. Additionally, it is highly recommended that faculty members consult the college's Dossier Standardization Guidelines for information about how and where to enter information into the core dossier in alignment with college objectives.

The following paragraphs provide suggested standards for documenting excellence in Teaching, Research and Scholarship, and Service. Additional standards are included in appendices attached to this document by individual departments, the specific descriptions of initial appointments, and in the outlined criteria for promotion in other sections of this document.

1. TEACHING AND MENTORSHIP

Teaching is defined as imparting knowledge, experience, insight, and skill to other persons. In the Department of Physical Medicine and Rehabilitation, teaching must be consistently effective and of high quality.

All Tenure-track and Clinical faculty members in the Department of Physical Medicine and Rehabilitation must be engaged in teaching, development of the Department's and College's academic programs, and the mentoring of students, residents, postdoctoral students, fellows and junior faculty. Evidence of effective teaching and mentorship must be demonstrated by documentation as occurring over a sustained period of time. The College's Office of Medical Education can provide assistance with appropriate documentation and assessment tools to be used in evaluation of teaching.

Evidence for effective teaching may be collected from multiple different sources including students, peers, self-evaluation and administrators. Student evaluations and peer evaluations are required. Excellence is demonstrated by positive evaluations from students, residents, fellows, local colleagues and national peers. Each Department must establish a consistent methodology and assessment tool for teacher evaluation by students in specific types of instructional settings. Importantly, administration of an assessment tool must not be under the control of the faculty member being evaluated. Faculty members may supplement the required assessment tool with others if they wish. Students must be provided an opportunity to assess the instructor and course using the required assessment tool in every regular classroom course. Guidelines must be established for the frequency with which required assessment tools should be administered in other types of instructional settings such as outpatient clinics, inpatient services, and the operating room. Regardless of the instructional setting, effort should be made to obtain evaluations from the largest number of students possible. When there is a significant discrepancy between the number of students enrolled and the number providing evaluations, the evaluations cannot be assumed to represent a consensus of student opinion.

Documentation of teaching for the promotion dossier will include, for the time period since the last promotion or the last five years, whichever is less:

- cumulative SEI reports (Student Evaluation of Instruction computer-generated summaries prepared by the Office of the University Registrar) for every formal class
- MedStar evaluations
- peer evaluation of teaching reports as required by the department's peer evaluation of teaching program (details provided in the Appendix to this document)
- teaching activities as listed in the core dossier including
 - involvement in graduate/professional exams, theses, and dissertations, and undergraduate research
 - mentoring postdoctoral scholars and researchers
 - extension and continuing education instruction
 - involvement in curriculum development
 - awards and formal recognition of teaching
 - presentations on pedagogy and teaching at national and international conferences
 - adoption of teaching materials at other colleges or universities
- other relevant documentation of teaching as appropriate

Peer evaluation is required on a recurring basis for all faculty members. Peer evaluations may include internal, and/or external review of classroom instruction, clinical teaching and course materials such as syllabi, examinations and instructional materials including textbooks. Assessment by observation of classroom and clinical teaching is most useful when done systematically over time and conducted with the specific goal of offering constructive suggestions.

Each Department must have a well-delineated mechanism for peer evaluation of instruction that appropriately complements information received from students. This plan must indicate what form peer review will take, the purposes to be accomplished, who will conduct the review, and when and how often the review will take place. Responsibility for arranging for and carrying out peer review activities must rest with someone other than the faculty member whose teaching or teaching materials are to be reviewed.

Other documentation of teaching may include an administrator's assessment of the candidate's teaching load, contribution to the teaching mission of the academic unit, and contribution to curriculum development. Evidence of the success of the candidate's former students including professional and graduate students and post-doctoral trainees should be documented.

2. SCHOLARSHIP

Scholarship is broadly defined as the discovery and dissemination of new knowledge by research, study and learning. In the Department of Physical Medicine and Rehabilitation, a faculty member's scholarship must be demonstrated to be of high quality, significance and impact.

All tenure-track, clinical, and research faculty members must develop a record of scholarship that is documented by a body of original scholarly work over a period of time. The evidence for scholarship must refer to original, substantive works that are documented achievements. Recognition of the scholarly work must also be external to the University, residing in the scientific communities apropos to the faculty member's field of scholarship.

Evidence of scholarship can include: peer reviewed journal articles, bulletins and technical reports, original books and monographs, edited books, chapters in edited books, editor reviewed journal articles, reviews and abstracts, papers in proceedings, unpublished scholarly presentations, externally funded research, funded training grants, other funding for academic work, prizes and awards for research or scholarly or creative work, major professional awards and commendations. Evidence of scholarship may also include invited lectures at other universities, symposia, and conferences; invention disclosures, patent activity, entrepreneurship, technology commercialization, software development; editorship of a major collection of research work; leadership of advanced seminars and symposia under organizational sponsorship; and invitations to serve on national review bodies.

Documentation of scholarship also includes grants and contracts submitted and received, and a demonstration of the impact of the scholarship, as documented with citation data, impact factors, book distribution data or sales figures, adoption of texts or procedures by external departments or academic health centers, and so forth.

3. SERVICE

Service is broadly defined to include administrative service to the University, exemplary patient care, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University. In the Department of Physical Medicine and Rehabilitation, a candidate's service contributions must be demonstrated to be of high quality and effectiveness. All Tenure-track and Clinical faculty members must contribute to service as evidenced by documentation of contributions over a sustained period of time. Documentation of service will be provided by the candidate in the dossier in the form of listing the service activities and roles, and describing specific contributions.

Evidence of administrative service to the University may include appointment or election to Department, College, and/or University committees, holding administrative positions; and development of innovative programs. Program Development, reflecting the integration of teaching, service and research in a specific content area, may be given special recognition and significance if desired by the Department. Evidence of professional service to the faculty member's discipline can include editorships of, or service as, a reviewer for journals or other learned publications; offices held and other service to professional societies. Evidence of the provision of professional expertise to public and private entities beyond the University includes service as a reviewer of grants or other scholarly proposals, external examiner or advisor, a panel, board, committee or commission participant, and as

professional consultant to industry, government, and education. While provision of high quality patient care is expected of all faculty members with clinical responsibilities, in and of itself it is insufficient for meeting the service requirement for Tenure-track and Clinical faculty.

VIII. APPEALS

Faculty Rule [3335-6-05](#) sets forth general criteria for appeals of negative promotion and tenure decisions. Appeals alleging improper evaluation are described in Faculty Rule [3335-5-05](#).

Disagreement with a negative decision is not grounds for appeal. In pursuing an appeal, the faculty member is required to document the failure of one or more parties to the review process to follow written policies and procedures.

IX. REVIEWS IN THE FINAL YEAR OF PROBATION

In most instances, a decision to deny promotion and tenure in the penultimate probationary year (11th year for faculty members with clinical responsibilities, 6th year for those without clinical responsibilities) is considered final. However, in rare instances in which there is substantial new information regarding the candidate's performance that is relevant to the reasons for the original negative decision, a seventh (or twelfth) year review may be conducted. The request for this review must come from the eligible faculty and the head of the Department, and may not come from the faculty member himself/herself. Details of the criteria and procedures for a review in the final year of probation are described in University Rule [3335-6-05](#) (B).

If a terminal year review is conducted by a Department and the College, it will be made consistent with that Department's Appointments, Promotion and Tenure document, the College's Appointments, Promotion and Tenure document, and other relevant policies, procedures, practices, and standards established by: (1) the College, (2) the *Rules of the University Faculty*, (3) the Office of Academic Affairs, including the Office of Academic Affairs Policies and Procedures Handbook, and (4) the Office of Human Resources.

X Procedures for Student and Peer Evaluation of Teaching

See Appendix C Below

XI. APPENDICES

A. GLOSSARY OF TERMS

Adjunct Faculty – 0% FTE, non-salaried or salaried, non-clinical associated faculty that participate in the education and training of medical students. (see also **Associated Faculty**). An adjunct appointment is not the same as a **Courtesy Appointment**.

APT – **Appointments, Promotion and Tenure**

Appointments, Promotion and Tenure Committee – the body of faculty that make recommendations to the Department Chair or Dean regarding the viability of candidates for appointment, promotion and/or tenure.

Appointments, Promotion and Tenure Document – a document required of every Department and College that describes the guidelines that must be used for making appointments, and for faculty to achieve promotion and tenure.

Associated – faculty that are not considered “regular.” These faculty fall into many sub-categories. (See also Clinical Associated Faculty, Adjunct Faculty, full-time Paid Associated)

Clinical Associated Faculty – 0% FTE community physicians that participate in the education and training of medical students and residents and have the title of instructor, assistant, associate or professor of practice. (see also **Full-time Paid Associated Faculty**)

Courtesy Appointment – a no salary associated appointment for a regular faculty member from another academic department within the University. The title associated with the no salary appointment is always the same as the regular position.

Clinical faculty – the faculty track for physicians and psychologists who primarily engage in clinical teaching and practice.

Dossier – a document compiled by a promotion and/or tenure candidate to demonstrate achievement.

Eligible faculty – the faculty who are authorized vote on appointment, promotion and tenure matters. These faculty must be above the candidate’s rank. Clinical and Research faculty may not vote on tenure-track faculty.

Exclusion of Time – the ability to have up to three years taken off the time clock toward achieving tenure

Faculty tracks – the College of Medicine has four: Tenure-track, Clinical faculty, Research , and the Associated faculty (see also **Regular Faculty**)

FTE – Full-time equivalent, the percentage of time worked expressed as a decimal. Full-time is 1.0, half-time is .5, and quarter-time is .25.

Full-time Paid Associated Faculty – 50-100% FTE physicians working within (and being paid solely by) the OSU Health System. (see also **Clinical Associated Faculty**)

Joint Appointment – when a faculty member’s FTE (and salary support) is split between one or more academic departments it is considered to be a joint appointment. (see also **Courtesy Appointment**)

Mandatory review – a required 4th year, 8th year, tenure review, or reappointment review

MOU – Memorandum of Understanding – a document between two academic departments expressing how a faculty member’s appointment, time, salary and other resources will be allocated and/or divided. (Used during transfer of TIU and for joint appointments.)

Non-mandatory review – voluntary promotion or tenure review

OAA – Office of Academic Affairs

Peer Review – evaluation of teaching by colleagues. Documentation of peer review is required for the promotion and tenure dossier.

Penultimate year – the next to last year of a contract, used to determine required clinical and research track review dates

Prior Service Credit – Application of years of service at the University in one track or rank applied to another track or rank when a faculty member transfers tracks or is promoted. Prior service credit is not allowed for track transfers; it is automatic for promotions unless turned down. For probationary Tenure-track appointments, prior service credit shortens the length of time that a faculty member has to achieve tenure by the amount of the credit.

Probationary period – the length of time in which a faculty member on the Tenure-track has to achieve tenure (6 years for faculty without clinical service, 11 years for faculty with significant patient clinical service responsibilities). It is also defined as the first contract for faculty on the Clinical faculty or Regular Research Track.

Reappointment Review – the review of a Clinical faculty member in the penultimate year of their contract to determine if the contract will be renewed.

Research faculty– the faculty track for basic scientists who engage exclusively in research-based scholarship.

SEI – Student Evaluation of Instruction

Tenure – permanent employment status only granted to faculty on the Tenure-track when the probationary period is successfully completed

Tenure-track – the faculty track for basic scientists and physicians with a major focus of research-based scholarship.

TIU – Tenure Initiating Unit, usually synonymous with Department. Centers and Institutes are not Tenure Initiating Units (please see Appendix B for the complete list of TIUs)

University Rules – or *Rules of the University Faculty* – The section of the Ohio Revised Code that prescribes the rules and governance of The Ohio State University and its employees.

C. PEER EVALUATION OF TEACHING

The department chair oversees the department's peer evaluation of teaching process.

Peer evaluation of faculty teaching is expected to occur under the direction of the Department's Peer Review of Teaching Committee. The department chair appoints the Peer Review of Teaching Committee with a term of service of one year.

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The responsibilities of the Peer Review of Teaching Committee are as follows:

- to review the teaching of probationary tenure-track and probationary clinical faculty at least twice per year.
- to review the teaching of tenured associate professors and non-probationary associate professors on the clinical faculty at least once per year.

- to review the teaching of tenured professors and non-probationary clinical faculty professors at least once every four years.
- To review, upon the department chair's request, the teaching of any faculty member not currently scheduled for review. Such reviews are normally triggered by low or declining student evaluations or other evidence of the need for providing assistance in improving teaching.
- To review the teaching of a faculty member not currently scheduled for review, upon that individual's request, to the extent that time permits.

Peer evaluation of faculty teaching of medical students, graduate students, residents and fellows may occur in many different venues, as applicable to a faculty member's primary teaching responsibility. Faculty members may be evaluated bedside; giving lectures as part of the residency and fellowship programs; at CME courses, whether at Ohio State or elsewhere; lecturing in formal didactic courses, etc.

The peer reviewer should focus on such issues as the quality and effectiveness of the instructional materials and assessment tools and the appropriateness of the approach relative to current disciplinary knowledge. At the conclusion of the class visits, the reviewer meets with the candidate to give feedback and also submits a written report to the department chair, copied to the candidate. The candidate may provide written comments on this report and the reviewer may respond if he/she wishes. The reports are included in the candidate's promotion and tenure dossier.

D. FACULTY RANK TITLE CODES

This [chart](#) demonstrates the various types of appointments, job codes, job titles, and academic ranks that are available to faculty positions.

E. AAUP STATEMENT ON PROFESSIONAL ETHICS

1. Professors, guided by a deep conviction of the worth and dignity of the advancement of knowledge, recognize the special responsibilities placed upon them. Their primary responsibility to their subject is to seek and to state the truth as they see it. To this end professors devote their energies to developing and improving their scholarly competence. They accept the obligation to exercise critical self-discipline and judgment in using, extending, and transmitting knowledge. They practice intellectual honesty. Although professors may follow subsidiary interests, these interests must never seriously hamper or compromise their freedom of inquiry.
2. As teachers, professors encourage the free pursuit of learning in their students. They hold before them the best scholarly and ethical standards of their discipline. Professors demonstrate respect for students as individuals and adhere to their proper roles as intellectual guides and counselors. Professors make every reasonable effort to foster honest academic conduct and to ensure that their evaluations of students reflect each

student's true merit. They respect the confidential nature of the relationship between professor and student. They avoid any exploitation, harassment, or discriminatory treatment of students. They acknowledge significant academic or scholarly assistance from them. They protect their academic freedom.

3. As colleagues, professors have obligations that derive from common membership in the community of scholars. Professors do not discriminate against or harass colleagues. They respect and defend the free inquiry of associates, even when it leads to findings and conclusions that differ from their own. Professors acknowledge academic debt and strive to be objective in their professional judgment of colleagues. Professors accept their share of faculty responsibilities for the governance of their institution.
4. As members of an academic institution, professors seek above all to be effective teachers and scholars. Although professors observe the stated regulations of the institution, provided the regulations do not contravene academic freedom, they maintain their right to criticize and seek revision. Professors give due regard to their paramount responsibilities within their institution in determining the amount and character of work done outside it. When considering the interruption or termination of their service, professors recognize the effect of their decision upon the program of the institution and give due notice of their intentions.
5. As members of their community, professors have the rights and obligations of other citizens. Professors measure the urgency of these obligations in the light of their responsibilities to their subject, to their students, to their profession, and to their institution. When they speak or act as private persons, they avoid creating the impression of speaking or acting for their college or university. As citizens engaged in a profession that depends upon freedom for its health and integrity, professors have a particular obligation to promote conditions of free inquiry and to further public understanding of academic freedom.

The statement above was originally adopted in 1966. Revisions were made and approved by the Association's Council in 1987 and 2009.

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