

APPOINTMENTS, PROMOTION AND TENURE
Criteria and Procedures for the
Department of Emergency Medicine

Revised April 6, 2016, July 14, 2016, June 4, 2019, December 14, 2020, December 1, 2025

Approved by the Faculty: 12/16/2025

Revision Provisionally Approved by the Office of Academic Affairs: 2/10/2026

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I. PREAMBLE

This document is a supplement to Chapters 6 and 7 of the [*Rules of the University Faculty; the annually updated procedural guidelines for promotion and tenure reviews*](#) in Chapter 3 of the [*Policies and Procedures Handbook*](#), and any additional policies established by the College of Medicine and The Ohio State University (OSU) to which the department and its faculty are subject.

Should the College's and University's rules and policies change, the department will follow the new rules and policies until this document is appropriately updated. In addition, this document must be reviewed, and either reaffirmed or revised, at least every four years on the appointment or reappointment of the department chair.

This document must be approved by the dean of the college and the Office of Academic Affairs before it may be implemented. This 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 as set forth in Section II of this document. The document indicates with specificity how the quality and effectiveness of teaching, the quality and significance of scholarship, and the quality and effectiveness of service are to be documented and assessed. The document also describes the department's procedures for conducting annual performance reviews of faculty and reviews for promotion and tenure. In approving this document, the dean and the Office of Academic Affairs accept the mission and criteria of the department and delegate to it the responsibility to apply high standards in evaluating current faculty and faculty candidates in relation to department mission and criteria.

When establishing its criteria for appointments, reappointments, promotions and tenure, the Department of Emergency Medicine seeks continuous elevation of the standards for faculty achievement. Accordingly, all decisions on promotion and/or tenure must be made in the context of a continuing effort at academic, scholarly and intellectual improvement. Therefore, a decision to promote a faculty member or award tenure cannot be made primarily on the basis of a need for that individual's area of expertise or of service to the Department, the College of Medicine, or the University.

Faculty members are evaluated for their contributions to the multi-partite mission of the 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 Emergency Medicine to make appointments in the following: Tenure-track; Clinical; Research; and the Associated faculty. Herein are described the characteristics and qualifications that distinguish faculty members in these different categories, and guidelines are provided for appointments and promotions consistent with these distinctions.

The Department of Emergency Medicine endorses the University's recognition of the value of differing contributions by individual faculty members toward the realization of the overall mission of the institution. For example, within the Tenure-track 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 Emergency Medicine and the College of Medicine require 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 Emergency Medicine, to the College of Medicine, to the Medical Center and OSU in the context of their assigned position descriptions. Metrics for quality and impact have been carefully determined by the Department of Emergency Medicine and defined in this Appointment, Promotion and Tenure document, and are validated, peer-reviewed and relevant to the chosen/assigned body of work

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 as appropriate to the faculty level and duties, is met.

The faculty and the administration are bound by the principles articulated in Faculty Rule [3335-6-01](#) of the Administrative Code. In particular, all faculty members accept the responsibility to participate fully and knowledgeably in review processes; to exercise the standards established in Faculty Rule [3335-6-02](#) and other standards specific to this department and college; and to make negative recommendations when these are warranted in order to maintain and improve the quality of the faculty.

Decisions considering appointment, reappointment, and promotion and tenure will be free of discrimination in accordance with the university's [policy on equal employment opportunity](#).

II. MISSION

OSU Department of Emergency Medicine **Vision Statement:** Transforming Emergency Medicine Through Innovation

The four-fold **mission** of the Department of Emergency Medicine at The Ohio State University, College of Medicine is:

1. To provide innovative, efficient, safe and compassionate patient care to patients presenting to the Ohio State University Hospital Emergency Departments and advanced urgent cares.
2. To be a leader in the education of medical students, residents and fellows in emergency medical care.
3. To perform cutting edge research and scholarly investigation to identify the causes, treatments, and prevention of emergency medical conditions.
4. To promote faculty development and excellence.

All faculty members are expected to participate in and contribute to the teaching, service, and/or research goals of the department in a manner that is consistent with the nature of their faculty appointment. Faculty members on the Tenure Track are expected to have responsibilities in all aspects of the academic mission, and are expected to have a relative emphasis of their efforts on research or other scholarly accomplishments. Clinical faculty are also expected to have responsibilities in all aspects of the academic mission, with primary emphasis dependent on their Clinical Pathway (i.e. Clinical Excellence, Clinician Educator, or Clinician Scholar). The department strives to enhance the quality of its endeavors by fostering the development and improvement of the faculty members.

III. DEFINITIONS

A. Committee of the Eligible Faculty

The eligible faculty for all appointment (hiring), reappointment, promotion, or promotion and tenure reviews must have their tenure home or primary appointment in the department.

The department chair, the dean and assistant/associate/vice deans of the college, the executive vice president and provost, and the president may not participate as eligible faculty members in reviews for appointment, reappointment, promotion, or promotion and tenure.

1. Tenure-track Faculty

Initial Appointment Reviews

- Appointments (hiring or appointment change from another faculty type) of assistant professors are based on search committee recommendations to the department chair rather than a vote of the eligible faculty.
- For initial appointment (hiring or appointment change from another faculty type) at senior rank (associate professor or professor), a review is performed by all tenured faculty of equal or higher rank than the position requested.
- Clinical and research faculty may not participate in initial appointment reviews of tenure-track faculty.

Advanced Rank Review

- A vote on the appropriateness of the proposed rank must be cast by all tenured faculty of equal or higher rank than the position requested.

Reappointment, Promotion, or Promotion and Tenure Reviews

- For the reappointment and promotion and tenure reviews of assistant professors and the tenure reviews of untenured associate professors, the eligible faculty consists of all tenured associate professors and professors.
- For the promotion reviews of associate professors, the eligible faculty consists of all tenured professors.

2. CLINICAL FACULTY

Initial Appointment Reviews

- Appointments (hiring or appointment change from another faculty type) of assistant clinical professors are based on search committee recommendations to the department chair rather than a vote of the eligible faculty.
- For initial appointment (hiring) at senior rank (associate clinical professor or clinical professor), a review is performed by eligible faculty (all tenured faculty of equal or higher rank than the position requested, and all non-probationary clinical faculty of equal or higher rank than the position requested).

Advanced Rank Review.

- A vote on the appropriateness of the proposed rank must be cast by all tenured faculty of equal or higher rank than the position requested, and all non-probationary clinical faculty of equal or higher rank than the position requested.

Reappointment and Promotion Reviews

- For the reappointment and promotion reviews of assistant clinical professors, the eligible faculty consists of all tenured associate professors and professors, and all non-probationary associate clinical professors and clinical professors.
- For the reappointment and promotion reviews of associate clinical professors, and the reappointment of clinical professors, the eligible faculty consists of all tenured professors, and all non-probationary clinical professors.

3. Research Faculty**Initial Appointment Reviews**

- Appointments (hiring or appointment change from another faculty type) of research assistant professors are based on search committee recommendations to the department chair rather than a vote of the eligible faculty.
- For initial appointment (hiring or appointment change from another faculty type) at senior rank (research associate professor or research professor), a review is performed all tenured faculty of equal or higher rank than the position requested, all non-probationary clinical faculty of equal or higher rank than the position requested, and all non-probationary research faculty of equal or higher rank than the position requested.

Advanced Rank Review

- A vote on the appropriateness of the proposed rank must be cast by all tenured faculty of equal or higher rank than the position requested and all non-probationary research faculty of equal or higher rank than the position requested.

Reappointment and Promotion Reviews

- For the reappointment and promotion reviews of research assistant professors, the eligible faculty consists of all tenured associate professors and professors and all non-probationary research associate professors and professors.
- For the reappointment and promotion reviews of research associate professors and the reappointment/contract renewal reviews of research professors, the eligible faculty consists of all tenured professors and all non-probationary research professors.

4. Associated Faculty**Initial Appointment and Reappointment**

- Initial appointment reviews of associated faculty members at assistant level are based on search committee recommendations to the department chair rather than a vote of the eligible faculty.
- Initial appointments of uncompensated assistant level associated faculty may be made at the discretion of the department chair.
- The eligible faculty for new appointment reviews of **compensated associated faculty** consists of all tenure-track faculty, all clinical faculty, and all research faculty whose primary appointment is in the department.
- Initial appointments at senior rank require a vote by the eligible faculty (all tenured faculty of equal or higher rank than the position requested, all non-probationary clinical faculty of equal or higher rank than the position requested, all non-probationary research faculty of equal or higher rank than the position requested and all senior lecturers and prior approval of the college dean.

Reappointment and Promotion Reviews

- For reappointments, the eligible faculty are all tenured faculty members of equal or higher rank than the candidate, all non-probationary clinical faculty of equal or higher rank than the candidate, and all non-probationary research faculty at or above the rank for which the candidate is being reviewed.
- Associated faculty are eligible for promotion but not tenure if they have adjunct titles, tenure-track titles with service at 49% FTE or below, clinical titles, and lecturer titles.
- For the promotion reviews of associated faculty with adjunct titles, the eligible faculty shall be the same as for tenure-track, clinical, or research faculty, as appropriate to the appointment, as described in Sections III.A.1, 2 or 3 above.
- For the promotion reviews of associated faculty with tenure-track titles, the eligible faculty shall be the same as for tenure-track faculty as described in Section II.A.1 above.
- For the promotion reviews of associated clinical practice faculty, the eligible faculty shall be the same as for clinical faculty as described in Section III.A.2 above.
- The promotion of a lecturer to senior lecturer is decided by the department chair in consultation with a faculty group of all tenured professors and all non-probationary clinical professors and all senior lecturers.

5. Conflict of Interest

Search Committee Conflict of Interest

A member of a search committee must disclose to the committee and refrain from participation in any of the interviews, meetings, or votes that comprise the search process if the member:

- decides to apply for the position;
- is related to or has a close interpersonal relationship with a candidate;
- 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 (e.g., dissertation advisor); or

- has collaborated extensively with the candidate or is currently collaborating with the candidate.

Eligible Faculty Conflict of Interest

A member of the eligible faculty has a conflict of interest when he/she/they are or have been to the candidate:

- a thesis, dissertation, or postdoctoral advisee/advisor;
- a co-author on more than 50% of the candidate's publications since appointment or last promotion, including pending publications and submissions;
- a collaborator on more than 25% of projects since appointment or last promotion, including current and planned collaborations;
- in a consulting/financial arrangement with the candidate since appointment or last promotion, including receiving compensation of any type (e.g., money, goods, or services) or is dependent in some way on the candidate's services; or
- in a family relationship such as a spouse, child, sibling, or parent, or other relationship, such as a close personal friendship, that might affect one's judgment or be seen as doing so by a reasonable person familiar with the relationship.
- Any other personal or professional conflicts with the candidate are ineligible to participate in the discussion and vote.

Prior to the start of a review process, all eligible faculty must be asked to indicate any conflicts to the committee of eligible faculty chair, the Procedures Oversight Designee (POD), or the department chair. Members of the eligible faculty with a conflict of interest must recuse themselves from the promotion review of that candidate. When there is a question about potential conflicts, the committee of the eligible faculty chair, in consultation with the POD, shall determine whether it is appropriate for the faculty members to recuse themselves from a particular review. Based on that determination, faculty members with a conflict of interest who do not voluntarily recuse themselves will be removed by the department chair.

6. 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 Vice Dean for Faculty Affairs, will appoint a faculty member from another TIU within the college.

B. Promotion and Tenure Committee

The Department has a Promotion and Tenure Committee that assists the eligible tenure-track, clinical, and research faculty in managing promotion and tenure issues. Given the highly clinical leaning of the department, the committee consists of 2-4 clinical professors and 2-4 associate clinical professors, and at least 1 tenure track faculty (when eligible tenure track faculty exists at the associate or professor level). The committee's chair and membership are appointed by the Department chair. The term of service is three years, with reappointment possible. All newly promoted/appointed (at senior rank) faculty will be required to serve at least 1 term. The Chair of the Committee of Eligible Faculty also serves as the Chair of this committee. When considering cases involving tenure track faculty, the Promotion and Tenure Committee may be augmented by additional tenure track faculty at the associate or professor level from within or outside of the department. When considering cases involving research faculty, the Promotion and Tenure Committee may be augmented by a non-probationary research faculty member at the rank of associate professor or professor, as appropriate to the case. When considering cases involving associated

faculty, the Promotion and Tenure Committee may be augmented by a non-probationary associated faculty member (not including visiting faculty) at the rank of associate professor or professor, as appropriate to the case. Members of the Committee of Eligible Faculty are welcome to attend Promotion and Tenure Committee meetings as non-voting members.

C. Quorum

The quorum required to discuss and vote on all personnel decisions is a simple majority (greater than 50%) of the eligible faculty not on an approved leave of absence and not declaring or being found to have a conflict of interest. Faculty on approved leave are not considered for quorum unless they declare, in advance and in writing, their intent to participate in all proceedings.

Faculty members who recuse themselves because of a conflict of interest are not counted when determining quorum. Faculty members with a scheduled clinical shift, on FMLA, or on approved University sick-time or vacation at the scheduled meeting time are not counted when determining quorum. Faculty members with any other competing scheduling constraint at the scheduled meeting time are not excused absences and do count as members of the eligible faculty.

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 permitted in this department. Absentee ballots and proxy votes are not permitted (but participating fully in discussions and voting via remote two-way electronic connection are allowed. Faculty who are not present for the entire discussion of a candidate may not cast a vote. Votes must be cast by the end of the business day on which a discussion has taken place.

1. Appointment

A positive recommendation from the eligible faculty for appointment at advanced rank is secured when a simple majority (greater than 50%) of the votes cast are positive.

In the case of a joint appointment, the department must seek input from a candidate’s joint-appointment TIU prior to their appointment.

2. Reappointment, Promotion and Tenure, and Promotion

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

In the case of a joint appointment, the department must seek input from a candidate’s joint-appointment TIU prior to their reappointment, promotion and/or tenure, or contract renewal.

IV. APPOINTMENTS

The Department of Emergency Medicine is committed to making only faculty appointments that enhance or have strong potential to enhance the quality of the department. Important considerations include, but are not limited to, the individual's record to date in teaching, scholarship, clinical work, and service; the potential for professional growth in each of these areas; and the potential for interacting with colleagues and students in a way that will enhance their academic work and attract other outstanding faculty and students to the department. No offer will be extended in the event that the search process does not yield one or more candidates who would enhance the quality of the department. The search is either cancelled or continued, as appropriate to the circumstances.

The appointment of all compensated tenure-track, clinical, research, and associated faculty, irrespective of rank, must be based on a formal search process following the [SHIFT](#) Framework for faculty recruitment.

All faculty positions must be posted in [Workday](#), the university's system of record for faculty and staff. A formal review and selection process, including interviews using pre-designed evaluation rubrics, is required for all positions. Appropriate disposition codes for applicants not selected for a position must be entered in [Workday](#) to enable the university to explain why a candidate was not selected and what stage they progressed to before being removed.

A. 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). Although excellence in teaching and outstanding service to Ohio State is required, these alone are not sufficient for progress on this.

Appointments to this track 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. The appointment process requires the Department to provide sufficient evidence in support of a Tenure-track faculty appointment so as to ensure that the faculty candidate has clearly and convincingly met or exceeded applicable criteria in teaching, scholarship, and service. [See Section VI of this document for examples].

At the time of appointment, probationary Tenure-track faculty members will be provided with a link to the [APT document site](#).

For those with clinical responsibilities, each faculty member must obtain the appropriate Ohio licensure and other required certifications.

a. 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. Procedures for appointment are identical to those for an assistant professor. The department will make every effort to avoid such appointments.

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 beginning 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. Unless there are unique circumstances, the college does not recommend requesting prior service credit. This request must be

approved by the department's eligible faculty, the department chair, the dean, and the Office of Academic Affairs. Faculty members should carefully consider whether prior service credit is appropriate since prior service credit cannot be revoked once granted, except through an approved request to extend the probationary period. In addition, all probationary faculty members have the option to be considered for early promotion.

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.
- 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 B].
- No ongoing negative behaviors such as discrimination, bullying, harassment, retaliation, or promotion of other hostile work conditions.
- 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 College of Medicine.

b. 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 clinical responsibilities, 11th year of appointment for faculty with significant clinical responsibilities). Review for tenure prior to the mandatory review year is possible when the Promotion and Tenure Committee determines such a review to be appropriate. 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](#). For individuals not recommended for promotion and tenure after the mandatory review, the seventh year (12th year for faculty with significant clinical responsibilities) 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. The Department and College discourages these requests because if granted it is irrevocable except through an approved request to exclude time from the probationary period.

Consistent with Faculty Rule [3335-6-09](#), faculty members with significant clinical responsibilities in the College of Medicine 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.

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 B].
- No ongoing negative behavior such as discrimination, bullying, harassment, retaliation or promotion of other hostile work conditions.
- 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 College of Medicine.

c. 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 VI of this document. In general, appointments at the rank of associate professor shall not entail a probationary period unless there are compelling reasons not to offer tenure.

Appointment offers at the rank of Associate Professor with tenure and offers of prior service credit require prior approval of the Office of Academic Affairs.

Offers to foreign nationals require prior consultation with the Office of International Affairs.

d. Appointment: Associate Professor in Advance of Tenure on the Tenure Track

While tenure track faculty appointments to the rank of Associate Professor usually includes tenure, a probationary period can be granted after petition to the Office of Academic Affairs. Appointment at the rank of associate professor normally entails tenure. A probationary appointment at the rank of associate professor is appropriate only under unusual circumstances, such as when the candidate has limited prior teaching experience. A probationary period of up to four years is possible, on approval of the Office of Academic Affairs, with review for tenure occurring in the final year of the probationary appointment. If tenure is not granted, an additional (terminal) year of employment is offered. For faculty with significant clinical responsibilities, the probationary period may not exceed six years. Review for tenure occurs in the final year of the probationary appointment. However, promotion and tenure may be granted at any time during the probationary period when the faculty member's record of achievement so merits. If tenure is not granted, an additional (terminal) year of employment is offered.

Appointment offers at the rank of Associate Professor in advance of tenure, and offers of prior service credit require prior approval the Dean of the College of Medicine, and the Executive Vice President and Provost.

Offers to foreign nationals require prior consultation with the Office of International Affairs.

e. 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 VI of this document.

Appointment offers at the rank of Professor with tenure and offers of prior service credit require prior approval of the Office of Academic Affairs.

Tenure track appointments at the rank of professor without tenure are not possible.

Offers to foreign nationals require prior consultation with the Office of International Affairs.

2. CLINICAL FACULTY

Clinical Faculty are equivalent in importance to the College of Medicine as the Tenure-track. The designation clinical faculty exists for those faculty members whose principal career focus is outstanding teaching, clinical and translational research, and/or 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 for 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, and education, as well as new knowledge discovery. Faculty members appointed as Clinical Faculty may choose to distinguish themselves through a portfolio with a focus on the Clinician-Educator, Clinician-Scholar, or Clinical Excellence pathways.

The primary focus of the clinician educator pathway is clinical or didactic education, but can also be related to clinical, scholarship, or professional service. Excellence is not required in all domains. The clinician educator pathway may reflect effectiveness as an educator of trainees at any level. Alternatively, the clinician educator pathway may reflect an outstanding clinician who has a demonstrated record of educating colleagues and peers, such as through invitations to serve as faculty on national continuing medical education programs.

The clinician scholar pathway reflects excellence in translational science, clinical research, and/or health services (*e.g.*, health care policy and comparative effectiveness research) as measured by publications and grant funding.

The clinical excellence pathway exists for faculty members who focus on exemplary clinical care, unique areas of emphasis in patient management, or outstanding service to a Department, the College of Medicine, and OSU. Faculty members on this typically devote 80% or more of their effort to patient care and/or administrative service.

Clinical Faculty members 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 the *Rules for University Faculty* [3335-7](#). Each new appointment must enhance, or have strong potential to enhance, the quality of the Department. All faculty members have access to all pertinent documents detailing department, College of Medicine, and University promotion and tenure policies and criteria. The most updated documents are located at the University [Office of Academic Affairs](#) website.

Except for those appointed at the rank of instructor, for whom a contract is limited to three years, the initial contract for all other clinical faculty members must be for a period of five years. The initial contract at all ranks is probationary, with reappointment considered annually. A faculty member will be

informed by the end of each probationary year if they 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. Second and subsequent contracts for clinical faculty must be for a period of at least three years and for no more than five years. There is also no presumption that subsequent contracts will be offered, regardless of performance.

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.

a. Appointment: Clinical Instructor

Appointment to the rank of Clinical Instructor is made if all the criteria for the position of Assistant Clinical 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 Clinical 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 Clinical Professor. When an individual is appointed as a Clinical Instructor, the letter of offer should indicate the specific benchmarks and accomplishments that will be necessary for promotion to Assistant Clinical Professor.

Clinical Instructor appointments are limited to three years, with the third year being the terminal year. In such cases, if the clinical instructor has not completed requirements for promotion to the rank of assistant clinical professor by the beginning of the third 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 a Clinical Instructor is promoted to Assistant Clinical Professor, a new letter of offer with a probationary period of three to five years will be issued. Candidates for appointment to the rank of Clinical Instructor will have, at a minimum:

- Anticipated receipt of an earned doctorate or other terminal degree in the relevant field of study.
- Post-doctoral clinical training in an appropriate area.
- Evidence of potential for contributions to scholarship, education, or patient care.
- 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 [Appendix B].
- No ongoing negative behaviors such as discrimination, bullying, harassment, retaliation, or promotion of other hostile work conditions.

b. Appointment: Assistant Clinical Professor

The initial appointment to the rank of Assistant Clinical Professor is always probationary. During a probationary period a faculty member is considered for reappointment annually by the Department Chair.. 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 Clinical 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 compared to the tenure-track. 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 Clinical Professor 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 or potential of contributions to scholarship, education, community engagement or patient care and the 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 [Appendix B].
- No ongoing negative behaviors such as discrimination, bullying, harassment, retaliation or promotion of other hostile work conditions.

c. Appointment: Associate Clinical Professor

The criteria for initial appointment at the rank of Associate Clinical Professor are identical to those criteria for promotion to this rank as outlined in Section VI of this document.

d. Appointment: Clinical Professor

The criteria for initial appointment at the rank of Clinical Professor in the are identical to those criteria for promotion to this rank as outlined in Section VI of this document.

3. Research Faculty

The Research faculty exists for faculty members who focus principally on scholarship. These appointments are intended for individuals who will have faculty-level responsibilities in the research mission. Individuals who serve as laboratory managers or otherwise contribute to the research mission at a level comparable to that of a postdoctoral fellow should not be appointed on the research faculty but rather should be appointed as research scientists. 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 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 the department, Research faculty must comprise no more than twenty per cent (20%) 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.

Tenure is not granted to research faculty.

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 95% salary recovery. It is expected that salary recovery will be entirely derived from extramural funds. While salary support for research faculty may not come from dollars provided to the department from the college, departments may choose to provide funding from individual departmental faculty research funds, start-up funds, and/or department Chair package funds to maintain the faculty member's salary at 100%.

The initial contract is probationary, and a faculty member will be informed by the end of each probationary year as to whether they 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 13 of the [Graduate Student Handbook](#).

a. Appointment: Research Assistant Professor

A candidate for appointment as a Research Assistant Professor has provided clear and convincing evidence they have a demonstrated record of impact and recognition at local or regional level, and has, at a minimum:

- 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.
- No ongoing negative behavior such as discrimination, bullying, harassment, retaliation, or promotion of other hostile work conditions.
- 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 [Appendix B].
- Strong potential for career progression and advancement through the faculty ranks.

b. Appointment: Research Associate Professor

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

c. Appointment: Research Professor

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

4. Associated Faculty

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

Associated Faculty, as defined in the *Rules of the University Faculty* 3335-5-19 (D) include “persons with clinical practice titles, adjunct titles, visiting titles, and lecturer titles; also tenure-track professors, associate professors, assistant professors, and instructors who serve on appointments totaling less than fifty percent service to the university. Persons with tenure-track, clinical, or research faculty titles may not hold associated titles. 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 one to three years.

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

- All associated 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 College of Medicine:
 - 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).
 - d. Clinical care supporting one of the department missions.
 - e. Evidence of activities fostering an welcoming environment within the department.
 - f. No ongoing negative behavior such as discrimination, bullying, harassment, retaliation, or promotion of other hostile work conditions.
 - g. 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 b]

The below titles are used for associated faculty in the Department of Emergency Medicine.

a. Appointment: Adjunct Assistant Professor, Adjunct Associate Professor, Adjunct Professor

Adjunct appointments **are uncompensated** and are given to individuals who volunteer academic service to the department for which a faculty title is appropriate and/or required. Examples of such service could

include but are not limited to serving on graduate student committees or teaching and evaluating medical students. Criteria for appointment at advanced rank are the same as for promotion. Adjunct faculty members are eligible for promotion (but not tenure).

b. Appointment: Clinical Instructor of Practice, Clinical Assistant Professor of Practice, Clinical Associate Professor of Practice, Clinical Professor of Practice

Associated Practice faculty appointments may be compensated or uncompensated. Uncompensated appointments are given to individuals who volunteer uncompensated academic service to the department, for which a faculty title is appropriate. Compensated appointments are given to full time or part-time clinicians who are not appointed to the clinical or tenure-track faculty.

Associated Practice rank is determined by applying the criteria for appointment of clinical faculty. Associated practice faculty members are eligible for promotion (but not tenure) and the relevant criteria for compensated practice faculty are those for promotion of clinical faculty.

c. Appointment: Visiting Instructor, Visiting Assistant Professor, Visiting Associate Professor, Visiting Professor

The titles of visiting professor, visiting associate professor, and visiting assistant professor are used to confer faculty status on individuals who have credentials comparable to tenure-track, clinical or research faculty of equivalent rank who spend a limited period of time on formal appointment and in residence at this institution for purposes of participating in the instructional and research programs of the university. Visiting faculty appointments may either be compensated or uncompensated. Visiting faculty members on leave from a regular academic appointment at another institution are appointed at the rank held in that position. Otherwise, the rank at which these individuals are appointed is determined by applying the criteria for appointment of faculty on a similar track.

Visiting faculty appointments may also be used for new senior rank candidates for whom the appointment process is not complete at the time of their employment. In that case the visiting rank is determined by the criteria for the appointment to which they will be ultimately employed.

Visiting faculty members are not eligible for tenure or promotion while remaining in visiting status. A visiting appointment cannot exceed three continuous academic years of service.

d. Appointment: Lecturer and Senior 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, but may be promoted to senior lecturer if they meet the criteria for appointment at that rank. The initial appointment for a lecturer should generally not exceed one year. Second and subsequent contracts for lecturers cannot exceed three years.

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. The initial appointment for a senior lecturer cannot exceed one year. Second and subsequent contracts for senior lecturers cannot exceed three years.

e. Returning Retiree – faculty who have retired from the University and return in any paid appointment at the University. Approvals are only for one year and must cover their salary and associated costs. All

reemployed retiree faculty appointments must be approved by the department chair, Dean and University Office of Academic Affairs. Reemployment as a retiree is not an entitlement. The appointment is based on the needs of the unit rather than the desire of the individual, with particular attention to the ways the reappointment can benefit the university. Refer to the [APT Required Documents and Process](#) site for more information (policy, required documents, and tip sheet).

f. Appointment to Associated Tenure Track Assistant Professor, Associate Professor, Professor with FTE below 50%

Appointment at tenure-track titles is for individuals at 49% FTE or below, either compensated (1-49% FTE) or uncompensated (0% FTE). The rank of associated faculty with tenure-track titles is determined by applying the criteria for appointment of tenure-track faculty. Associated faculty members with tenure-track titles are eligible for promotion (but not tenure) and the relevant criteria are those for promotion of tenure-track faculty.

g. Appointment: Associated Faculty at Advanced Rank

Associated faculty may be compensated or uncompensated, and typically provide service to the department in the areas of research, clinical care, or education. For both uncompensated and compensated associated faculty who are principally focused on patient care, the appointment at advanced rank criteria and procedures will be identical to those for the clinical excellence pathway. For both uncompensated and compensated associated faculty who contribute principally through educational activities or scholarship, the appointment at advanced rank criteria and procedures will be identical to those for the clinician-educator or clinician-scholar pathway as appropriate to the faculty member. For both uncompensated and compensated associated Tenure-track faculty, the appointment at advanced rank criteria and procedures will be identical to those for the Tenure-track pathway,

5. Emeritus Faculty

Emeritus faculty status is an honor given in recognition of sustained contributions to the university as described in Faculty Rule [3335-5-36](#). Full-time tenure track, clinical, or research or full-time associated faculty may request emeritus status upon retirement or resignation at the age of sixty or older with ten or more years of service or at any age with twenty-five or more years of service.

Faculty will send a request for emeritus faculty status to the Department Chair outlining academic performance and citizenship. The Committee of Eligible faculty (tenured and non-probationary clinical associate professors and professors) will review the application and make a recommendation to the Department Chair. The Department Chair will decide upon the request, and if appropriate submit it to the dean. If the faculty member requesting emeritus status has in the 10 years prior to the application engaged in serious dishonorable conduct in violation of law, rule, or policy and/or caused harm to the university's reputation or is retiring pending a procedure according to Faculty Rule [3335-05-04](#), emeritus status will not be considered. See the OAA [Policies and Procedures Handbook](#) Volume 1, Chapter 1, for information about the types of perquisites that may be offered to emeritus faculty, provided resources are available. Should the department head deny the request, the faculty member may appeal the decision to the dean.

Emeritus faculty may not vote at any level of governance and may not participate in promotion and tenure matters.

6. Courtesy Appointments

A non-salaried appointment for a tenure-track, clinical, or research faculty member from another TIU is considered a courtesy appointment with a 0% FTE. An individual with an appointment in one TIU may request a courtesy appointment in another TIU when that faculty member's clinical, scholarly and/or academic activity overlaps significantly with the discipline represented by the second unit. Such appointments must be made using the same title, as that offered in the primary TIU. Courtesy appointments are warranted only if they are accompanied by substantial involvement in the clinical, academic and scholarly work of the Department. These appointments do not require Annual Reviews.

7. Joint Appointments

Joint appointments are created to leverage a faculty member's unique expertise to advance the mission areas of the academic units involved and promote cross-disciplinary collaboration. To establish a joint faculty appointment, a [memorandum of understanding \(MOU\)](#) is developed by all affected TIUs, centers, and/or institutes. The MOU will clearly define the distribution of the faculty member's time commitment to the different units. The MOU will also state the sources of compensation directed to the faculty member, distribution of resources, the planned acknowledgement of the academic units in publications, the manner in which credit for any grant funding will be attributed to the different units, and the distribution of grant funds among the appointing units. Unless other arrangements are specified in the MOU, the TIU in which the faculty member's FTE is greater than 50% will be considered that faculty member's TIU. Joint-appointed faculty may vote on promotion and tenure cases only in their TIU. These appointments do require Annual Reviews.

B. Procedures

The appointment of all compensated faculty, irrespective of appointment type or rank, must be based on a formal search process following the [SHIFT](#) Framework for faculty recruitment.

The SHIFT (Strategic Hiring Initiative for Faculty Talent) Framework was designed to identify and recruit broad, qualified applicant pools of extraordinary scholars who are leaders in their respective fields. Deans, department chairs, and search committee members work in partnership with the Office of Faculty Affairs and other key stakeholders in adherence to this framework to ensure a thorough, fair, and consistent faculty search process. The framework consists of four distinct phases—each of which includes a series of core requirements (must-do action steps) and optimal practices (aspirational action steps)—followed by a fifth phase focused on preboarding and onboarding.

This department adheres in every respect to the Framework requirements as detailed at [SHIFT](#).

All faculty positions must be posted in [Workday](#), the university's system of record for faculty and staff. A formal review and selection process, including interviews using pre-designed evaluation rubrics, is required for all positions. Appropriate disposition codes for applicants not selected for a position must be entered in [Workday](#) to enable the university to explain why a candidate was not selected and what stage they progressed to before being removed.

In addition, see the [Policy on Faculty Recruitment and Selection](#) and the [Policy on Faculty Appointments](#) for information on the following topics:

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

Any faculty appointment forwarded from the department for approval by the College of Medicine must have been made consistent with SHIFT processes, and other relevant policies, procedures, practices, and standards established by: (1) the College of Medicine, (2) the *Rules of the University Faculty*, (3) the University 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 reviewed and approved by the Vice Dean for Faculty Affairs of the College of Medicine. The draft letter of offer will be reviewed for consistency with the essential components required by the University Office of Academic Affairs [Policies and Procedures Handbook](#), and by the College. Letters of offer are managed through the approved online contract management system.

The following sections provide general guidelines for searches in the different faculty categories.

1. Tenure-track Faculty

A national search is required to ensure a differentiated pool of highly qualified candidates for all tenure-track positions. The only exception is for dual career partners, as described in Chapter 5, section 4.1 of the [Policies and Procedures Handbook](#). Exceptions to this policy must be approved by the college and the Office of Academic Affairs in advance. Search procedures must entail substantial faculty involvement and be consistent with the OAA [Policy on Faculty Recruitment and Selection](#). Searches for tenure-track faculty proceed as follows:

The Dean or designee provides approval for the Department to commence a search. This approval may or may not be accompanied by constraints with regard to salary, rank, and field of expertise.

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.

Prior to any search, members of all search committees must undergo the trainings identified in the [SHIFT Framework](#) for faculty recruitment. In addition, all employees/faculty involved in the hiring and selection process must review and acknowledge the EEO Recruitment and Selection Guidelines in the BuckeyeLearn system.

It is **required** that all candidates for tenure track positions make a presentation to the faculty, students and/or residents on their scholarly activity. All candidates interviewing for a particular position must follow the same interview format and relevant accommodations for disability/impairment should be provided.

Unless otherwise required by the rules of the university faculty, letters of reference will not be required of applicants. This is distinct from external letters of evaluation for advanced rank candidates (see below). References will be checked by committee members using a standardized process and form. This will be requested to be by phone call or virtual meeting. However, the references may submit their evaluation in writing if they so desire.

The Search Committee presents its findings and makes its recommendations to the Department Chair, who then determines whether to proceed with the offer of an appointment. In certain cases due to timing of the need for an offer, competing offers, or other vagaries of scheduling/candidate characteristics, the department chair may make a decision on a candidate prior to a formalized meeting of the recruitment committee. In all such cases, the department chair will consult with the committee co-chairs and provide the recruitment committee members an opportunity to provide feedback via email or other means prior to making such a decision.

If the offer involves senior rank (Associate Professor or above), solicitation of external letters of evaluation are required for appointment at the advanced rank and follow the same guidelines as for promotion reviews. The eligible faculty members (see Section III.A above) must also vote on the appointment. If the offer involves prior service credit, the eligible faculty members vote on the appropriateness of such credit. Appointment offers at the rank of associate professor or professor, with or without tenure, and/or offers of prior service credit require prior approval of the Office of Academic Affairs.

In the event that more than one candidate achieves the level of support required to extend an offer, the department chair decides which candidate to approach first. The details of the offer, including compensation, are determined by the department chair.

This department will discuss potential appointment of a candidate requiring sponsorship for permanent residence or nonimmigrant work-authorized status with the Office of International Affairs. An [MOU](#) must be signed by faculty eligible for tenured positions who are not U.S. citizens or nationals, permanent residents, asylees, or refugees.

2. CLINICAL FACULTY

Searches for initial appointments on the Clinical Faculty pathway 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 virtual/on-campus interview. A national search is required to ensure a differentiated pool of highly qualified candidates for all clinical positions. The only exception is for dual career partners, as described in Chapter 5, section 4.1 of the [Policies and Procedures Handbook](#). Exceptions to this policy must be requested in advance from the Dean of the College of Medicine or designee. In the case of approval of waiver for a search, the department must complete a full review, the department chair must provide a recommendation, and the dean must approve the hire. As above, faculty appointed to the clinical faculty should evidence a career consistent with the values of determination, empathy, sincerity, ownership, & innovation of the college and aligned with its cultures.

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. The candidate is **required** to make a presentation during the virtual/on-campus interview. A national search is required to ensure a differentiated pool of highly qualified candidates for all research positions. The only exception is for dual career partners, as described in Chapter 5, section 4.1 of the [Policies and Procedures Handbook](#). Exceptions to this policy must be requested in advance from the Dean of the College of Medicine or designee. As above, faculty appointed to the research faculty should evidence a career consistent with the values of determination, empathy, sincerity, ownership, & innovation of the college and aligned with its cultures.

4. Transfers: Track

Transfers between appointment types are permitted only under the strict guidelines detailed in the paragraphs below, per University Rules [3335-7-09](#) and [3335-7-10](#). Furthermore, transfer of an individual to an appointment with more limited expectations for scholarship may not be used as mechanism for retaining underperforming faculty members. An engaged, committed, and productive faculty should be the ultimate goal of all appointments. A transfer request must be approved by the department chair, dean,

and executive vice president and provost. The first appointment to the clinical or research faculty is probationary; and tenure, or the possibility thereof, is revoked

Tenure-track faculty may transfer to a clinical or research track 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 the clinical or research faculty 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. Transfers: TIU

Following consultation with the TIU chairs and college dean(s), a tenure-track faculty member may voluntarily move from one TIU to another upon approval of a simple majority of the eligible faculty in the receiving TIU. The eligible faculty in such cases are the tenure-track faculty eligible to vote on faculty appointments at the transferee's rank. See Section III.A.1 above.

The transfer must be approved by the Office of Academic Affairs and is dependent on the establishment of mutually agreed-upon arrangements among the affected TIU heads, college dean(s), and the faculty member. An MOU signed by all parties, including the Office of Academic Affairs, must describe in detail the arrangements of the transfer. Administrative approval will be dependent on whether satisfactory fiscal arrangements for the change have been made. Since normally the transferring faculty member will fill an existing vacancy in the receiving unit, the MOU will describe the resources supporting the position, including salary, provided by the receiving unit.

The Office of Academic Affairs can provide guidance to non-tenure-track faculty about the process for transferring from one TIU to another.

6. Associated Faculty

The appointment of compensated associated faculty members follows a formal search following the [SHIFT](#) Framework, which includes a job posting in [Workday](#) (see Section IV.B above) and candidate interviews. The appointment is then decided by the department chair based on recommendation from the search committee. The reappointment of all compensated associated faculty members is decided by the department chair.

Appointments to non-compensated positions in the Associated Faculty require no formal search process.

Compensated associated appointments are generally made for a period of one to three years. All associated appointments expire at the end of the appointment term and must be formally renewed to be continued.

Visiting appointments may be made for one term of up to three years or on an annual basis for up to three consecutive years.

Lecturer and senior lecturer appointments are made on an annual basis and rarely semester by semester. After the initial appointment, and if the department's curricular needs warrant it, a multiple year appointment may be offered.

All associated appointments expire at the end of the appointment term and must be formally renewed to be continued.

7. Courtesy Appointments

Any TIU faculty member may propose a 0% FTE (courtesy) appointment for a tenure-track, clinical, or research faculty member from another Ohio State tenure-initiating unit. A proposal that describes the uncompensated academic service to this TIU justifying the appointment is considered at a regular faculty meeting. If the proposal is approved by the eligible faculty, the TIU head extends an offer of appointment. The TIU head reviews all courtesy appointments every three years to determine whether they continue to be justified, and takes recommendations for nonrenewal before the faculty for a vote at a regular meeting.

8. Joint Appointment

A TIU may propose a joint appointment for a faculty member from another OSU TIU as described in Section IV.A.7. The potential for a joint appointment is typically evaluated during the recruitment process and, as such, is subject to all criteria outlined above for each faculty category.

Approval of the joint appointment by the Office of Academic Affairs is dependent on establishing a mutually agreed-upon arrangement between the participating TIU heads, center and/or institute directors, college dean(s), and the faculty member. An [MOU](#) signed by all parties, including the Office of Academic Affairs, must describe in detail the arrangements of the joint appointment. Administrative approval will be dependent on whether satisfactory fiscal arrangements have been made.

V. ANNUAL PERFORMANCE AND MERIT REVIEW

The department follows the requirements for annual reviews as set forth in the [Faculty Annual Review, Post-tenure review, and reappointment Interim University Policy](#) which stipulates that such reviews must include a scheduled opportunity for a face-to-face meeting for all probationary faculty, an opportunity for a face-to-face meeting for all other compensated faculty members, as well as a written assessment.

According to the policy, "Annual reviews of faculty serve to monitor and support progress toward tenure, promotion, reappointment, and ongoing outcomes, and are to be comprehensive and include standardized, objective, and measurable performance metrics." Written performance reviews serve to assist faculty in improving professional productivity, establish goals against which faculty performance will be assessed, determine salary increases and other resource allocations, define progress toward reappointment and/or promotion, and, in the event of poor performance, establish and explain the need for remedial steps, up to and including a post-tenure review or other disciplinary action.

A post-tenure review, in accordance with Faculty Rule [3335-5-04.5](#), will be initiated if a tenured faculty member receives a "does not meet performance expectation" rating in the same evaluative category in at least two of the past three consecutive annual reviews. A faculty member who retains tenure following a post-tenure review will be subject to an additional post-tenure review if they receive a "does not meet performance expectations" rating in any area of their annual review in the two years subsequent to a post-tenure review. The department chair, dean, or provost may require an immediate and for cause post-tenure review at any time for a faculty member who has a documented and sustained record of significant underperformance outside of the faculty member's annual performance evaluation. For this purpose, for

cause may not be based on a faculty member's allowable expression of academic freedom as defined by the university or Ohio law

Per University policy, the Department Chair may designate the responsibility for annual performance and merit reviews to Vice Chairs or division directors. Other senior leaders in the department may be delegated to provide an initial meeting with faculty and provide a written assessment to the Department Chair, but such a meeting is not the annual review meeting. Per University Policy, The Department Chair will schedule a face-to-face meeting with all probationary faculty as part of the review. An opportunity for a face-to-face meeting with the Department Chair or the Department Chair's designee will be provided to all tenured and non-probationary faculty. In all cases, accountability for the annual review process resides with the Department Chair. The dean must assess an annual performance and merit review when the department has submitted (1) a Report of Non-Renewal of Probationary Appointment of Faculty; (2) the fourth-year review of a probationary tenure track faculty member; or (3) a Report of Contract Renewal or Non-Renewal for clinical faculty or research faculty. In each of these cases, the decision of the dean is final.

A. Review period and unit level completion period

Annual reviews will be conducted on an academic year (fiscal year) basis which is July 1 through June 30. Annual reviews will be completed by the end of the term following the review period (i.e. end of autumn semester). Annual reviews are due to the College of Medicine Office of Faculty Affairs by September 1st.

B. Assessment Scale and criteria

Faculty will be assessed in the following **categories**: clinical care, teaching and mentoring, scholarship, and service. For each annual review area faculty will be rated as “exceeds expectations,” “meets expectations,” “performing,” “does not meet expectations,” or “not applicable (<5% effort devoted to mission or not required by track).” Due to the varied nature of duties, rank, and expectations of department faculty, the Department does not use a specific rubric. Consistent performance at the “meets expectations” or “exceeds expectations” level will be considered as appropriate performance to be considered for promotion in conjunction with criteria laid out in the relevant sections of this document.

In each category, determination of assessment rating will account for relevant components in aggregate while modifying expectations for the factors noted below in this section and will consider both quantitative and qualitative measures where relevant.

- Exceeds Expectations:
 1. Consistently contributes well beyond role expectations, department mean/median and/or national mean/median metrics to make a significant impact on organizational/department/unit goals AND
 2. Serves as a role model of behaviors consistent with our mission and values.
- Meets Expectations:
 1. Consistently delivers adequate to strong results in all or virtually all role expectations, department mean/median and/or national mean/median metrics that contribute meaningfully to the organizational/department/unit goals AND
 2. Regularly displays behaviors consistent with our values contributing positively to our culture.

- Performing
 1. Successfully meeting some role expectations, department mean/median and/or national mean/median metrics, with potential for continued growth and development AND
 2. Failing to meet other role expectations, department mean/median and/or national mean/median metrics. This may include failing to meet several such metrics and/or falling substantially below expectations in a single metric AND/OR
 3. May require increased focus on relational and communication skills to align with our values and culture.
- Does Not Meet Expectations:
 1. Meeting few or none of the expected results based on role expectations, department mean/median, and/or national mean/median metrics AND/OR
 2. Failing to improve on a continued assessment of performing AND/OR
 3. Does not demonstrate behaviors that reflect our values.
- Not applicable
 - Categories in which <5% effort devoted to mission or not required by track and/or pathway.

Factors/general principles which will be considered when assessing performance expectations in each category are listed below. Due to the variety of tasks performed by department faculty, examples below are meant to be illustrative and not inclusive. Each category will be looked at holistically, using a combination of quantitative and qualitative data (where available) to identify a performance category. Not all metrics below apply to all faculty members based on rank, track, and job duties.

- i. Faculty rank and time in rank
- ii. Faculty track (and pathway, if applicable)
- iii. Faculty time at OSU
- iv. Faculty CART (time spent in each mission area)
- v. FMLA, pregnancy, and lactation
- vi. Expected scope, effort, and funding of a faculty member's duties in a particular area
- vii. Leadership in each category consistent with faculty member's rank and track/pathway is particularly valued
- viii. Particularly egregious behavior or failure to meet expectations may result in a ranking of "does not meet expectations" even in categories where other portions of the metric was met.
- ix. Likewise, particularly meritorious behavior in a single or few areas may result in a ranking of "exceeds expectations" in a particular category

In general, meritorious performance in clinical care teaching, scholarship, and service is assessed in accordance with the same criteria that form the basis for promotion decisions. However, assessment factors are not limited to those items noted to form the basis for promotion decisions.

Criteria - Clinical care

Assessment in clinical care will take into account quantitative and qualitative metrics modified as appropriate by the factors/general principles listed above. In particular, clinical metrics will be interpreted with consideration for department averages, national averages, years of clinical experience, years at OSU, shift distribution (sites and times), FMLA/pregnancy/lactation, and presence of an adequate number of data points to draw valid conclusions.

Quantitative metrics include, but are not limited to: RVUs/hour in the emergency departments and advanced urgent cares, patient satisfaction scores in the emergency department and advanced urgent cares, adequacy of documentation, and performance on annual quality metrics.

Qualitative considerations include, but are not limited to: clinical service in non-traditional ED spaces, acceptance of voluntary overtime, professionalism, adequacy of documentation, clinical awards, exceptional patient accolades, and development/management of clinical programs and clinical quality improvement programs.

Criteria - Teaching

Assessment of teaching and mentoring will include bedside teaching for those with clinical responsibilities. It will also include other areas listed below for those whose track or funding expects additional teaching and mentoring contributions. Teaching will be broadly defined to include, but not be limited to, undergraduates, medical and other health-sciences related students, doctoral students, post-doctoral researchers, residents and fellows. It can include both OSU and non-OSU learners.

Quantitative metrics include, but are not limited to: bedside teaching scores for fellows, residents, and medical students, completion rate of assigned fellow, resident, and medical student evaluations, completion of at least one faculty peer evaluation, and meeting or exceeding EVU (educational value unit) targets for faculty who receive direct educational funding.

Qualitative metrics include: comments from teaching scores of learners, quality of feedback to learner, mentorship numbers and success (adjusted for rank and track), teaching awards, curriculum development, external teaching presentations, delivery of lectures to OSU and non-OSU learners, and mentorship and sponsorship of learners.

Criteria - Scholarship

Scholarship is broadly defined as the discovery and dissemination of new knowledge. Assessment will include both quantitative and qualitative components. Given variation in faculty rank, duties, and responsibilities, specific targets are not set, but are modified based on the factors listed above.

Metrics include, but are not limited to:

- Publications: Both the quantity and quality of publications will be considered. Metrics will include but are not limited to number of publications, the number of citations of their publications, the relative proportion of first/senior authorships, journal impact factor or importance in the field, and alternative metrics (e.g., social media penetration, blog subscription, Altmetrics score, non-academic invited presentations).
- Funding: The funding agency, type of funding, amount, submission of funding applications, awarding of funding, continuation of funding, and faculty member's role in the funding will be considered.
- External presentations of scholarship
- Entrepreneurship: 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.
- Research awards

- Impact of scholarship
- Research mentorship (quantity and quality)

Criteria - Service/Administration

Service will be evaluated qualitatively and will be broadly defined. Service includes, but is not limited to, 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 within the institution can include but is not limited to, appointment or election to Department, College of Medicine, hospital, and/or University committees, working groups, or leadership of programs. Evidence of professional service to the faculty member's discipline or public and private entities beyond the University can include but is not limited to journal editorships, ad hoc journal reviews, editorial boards, or editorships; grant reviewer for national funding agencies; elected or appointed offices held and other service to local and national professional societies; service on panels and commissions; and professional consultation to industry, government, education, and non-profit organizations. Similarly, innovative programs that advance the mission of the university can be considered service activities.

Other considerations

The annual review letter may also comment on other factors relevant to the faculty member's performance as determined by the Department Chair. The annual review letter will include goals for the coming year and, where relevant, an assessment of the faculty member's progression towards promotion, any additional assignments and goals specific to the individual.

b. Procedures for Tenure-track, Clinical Faculty, Research Faculty, and Full-time Compensated Associated Faculty

The Department will follow its formal mechanism for the review of all faculty members during the course of each academic year. For their annual performance and merit review, faculty members must submit the following documents to the Department Chair no later than end of academic/fiscal year:

- Office of Academic Affairs dossier outline or
- Updated documentation of performance and accomplishments through a department Annual Evaluation Form, which will be made available to all faculty in an accessible place.

Under no circumstances should faculty solicit evaluations from any party for purposes of the annual performance and merit review, as such solicitation places its recipient in an awkward position and produces a result that is unlikely to be candid.

A face-to-face meeting with the Department Chair or appropriate designee will be conducted. The Department Chair or designee will supply each faculty member with a written evaluation of their performance in clinical, teaching, scholarship, and service/administration domains. Clinical metrics and teaching scores (see Section IX) are to be provided to the faculty member at regular intervals by administrative and education staff. Other metrics are self-reported to the Department Chair.

The Department Chair is required (per Faculty Rule [3335-3-35](#)) to include a reminder in the annual performance and merit 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. All annual review letters are sent to each faculty member and kept in their files.

If a faculty member wishes to appeal a decision in their annual review, they must submit an appeal to the college dean or designee within 14 days of the date of the written evaluation as set forth in the OAA Policies and Procedures Handbook. In presenting an appeal, a faculty member must demonstrate that the final evaluation contains substantive factual error, inconsistently applies the established criteria of the department, or otherwise does not align with those criteria.

Appeals will be reviewed by the college dean or designee, who must issue a decision in writing as to whether to approve or modify the annual review. If the college dean or designee modifies any rating in the annual review, the annual review will be automatically appealed to the provost for review and final determination. In this event, the faculty member will have 14 days from the date of the dean or designee's decision to submit any written materials to the provost that they want the provost to consider in issuing a final determination in line with the categories for appeal noted above. If the dean or designee does not modify any rating in the annual review, the review will be submitted to the provost for review only.

Joint appointments: The heads or designees of the joint appointment units are responsible for completing the annual review for those faculty. The heads or designees of the joint appointment units must co-author the written evaluation. If the joint appointment unit heads or designees and dean are not in agreement regarding the evaluation, the provost will have final decision authority.

D. Annual review procedures: Probationary Tenure-Track Faculty

Every probationary tenure-track faculty member is reviewed annually by the chair who meets with the faculty member to discuss their 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 chair shares this improvement plan via written and verbal communication with the faculty member. 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 they choose).

If the department chair recommends nonrenewal, the Fourth-Year Review process (per Faculty Rule [\(3335-6-03\)](#)) 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 solicited, and the dean (not the department chair) makes the final decision regarding renewal or nonrenewal of the probationary appointment. 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.

External evaluations are solicited only when either the department chair or the eligible faculty determine that they are necessary to conduct the Fourth-Year Review. This may occur when the candidate's

scholarship is in an emergent field, is interdisciplinary, or the eligible faculty do not feel otherwise capable of evaluating the scholarship without outside input.

For the fourth-year review of probationary tenure track faculty, the eligible faculty conducts a review of the candidate. On completion of the review, the eligible faculty votes by written ballot on whether to renew the probationary appointment. The eligible faculty forwards a record of the vote and a written performance review to the department chair, who conducts an independent assessment of performance and prepares a written evaluation that includes a recommendation on whether to renew the probationary appointment. At the conclusion of the department review, the formal comments process (per Faculty Rule [3335-6-04](#)) is followed and the case is forwarded to the college for review, regardless of whether the department chair recommends renewal or nonrenewal.

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's Promotion and Tenure 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 or their designee 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. Extension of the Tenure Clock

[Faculty Rule 3335-6-03 \(D\)](#) sets forth the conditions under which a probationary tenure-track faculty member may extend the probationary period. [Faculty Rule 3335-6-03 \(E\)](#) does likewise for reducing the probationary period. A faculty member remains on duty regardless of extensions or reductions to the probationary period, and annual reviews are conducted in every probationary year regardless of time extended or reduced. Approved extensions or reductions do not limit the department's right to recommend nonrenewal of an appointment during an annual review.

E. Annual Review Procedures: Tenured Faculty

Associate professors with tenure are to be reviewed annually by the Department Chair or designee. The department chair or designee meets with each faculty member to discuss their performance and future plans and goals; and prepares a written evaluation in narrative format. The faculty member may provide written comments on the review.

Professors with tenure are reviewed annually by the Department Chair or designee, who meets with the faculty member to discuss his or her performance and future plans and goals. The annual review of professors is based on their having achieved sustained excellence in the discovery and dissemination of new knowledge relevant to the mission of the department, as demonstrated by national and international recognition of their scholarship; ongoing excellence in teaching; and outstanding service to the department, the university, and their profession, including their support for the professional development of assistant and associate professors. Professors are expected to be role models in their academic work, interaction with colleagues and students, and in the recruitment and retention of junior colleagues. As the

highest-ranking members of the faculty, the expectations for academic leadership and mentoring for professors exceed those for all other members of the faculty.

If an associate professor or professor has an administrative role, the impact of that role and other assignments will be considered in the annual review.

The Department Chair or designee prepares a written evaluation of performance against these expectations. The faculty member may provide written comments on the review.

F Annual Review and Reappointment Procedures: Clinical Faculty

The annual performance and merit review process for clinical probationary and non-probationary faculty is identical to that for tenure-track probationary and tenured faculty respectively, except that non-probationary clinical faculty may participate in the review of clinical faculty of lower rank.

In the penultimate contract year of a Clinical Faculty member's initial appointment, a formal performance review is necessary to determine whether the faculty member will be offered reappointment. This review involves the solicitation of an updated CV or dossier and a vote by the committee of eligible faculty. External letters of evaluation are not solicited. There is no presumption of reappointment. If the position will not continue, the faculty member is informed that the final contract year will be a terminal year of employment. The standards of notice set forth in Faculty Rule [3335-6-08](#) must be observed.

For subsequent reappointments, in the penultimate year of the reappointment, the faculty member will have a dossier or CV solicited and undergo a vote of the eligible faculty. Procedures set forth in the [Faculty Annual Review, Post-tenure review, and reappointment Interim University Policy, III, A-G](#) will be observed. There is no presumption of renewal of contract.

For both initial and subsequent appointments, the eligible faculty forwards a record of the vote to the department chair, who determines whether to renew the probationary appointment. At the conclusion of the department review, if the position will not continue, the faculty member is informed that the final contract year will be a terminal year of employment. The standards of notice set forth in Faculty Rule [3335-6-08](#) will be observed.

G. Annual review procedures: Research Faculty

The annual review process for research probationary and non-probationary faculty is identical to that for tenure-track probationary and tenured faculty respectively, respectively, except that non-probationary research faculty may participate in the review of research faculty of lower rank.

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. If the position will not continue, the faculty member is informed that the final contract year will be a terminal year of employment. The standards of notice set forth in Faculty Rule [3335-6-08](#) must be observed.

For faculty in one- and two-year appointment terms, this department will ensure these faculty receive the appropriate review and notification according to their term.

H. 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 their 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 their performance, future plans, and goals. The Department Chair's recommendation on reappointment is final.

When considering reappointment of uncompensated associated faculty members, at a minimum, their contribution to the Department must be assessed on a three-year basis and documented for the individual's personnel file. This may take the form of self-evaluation. Neither a formal written review nor a meeting is required.

I. Salary Recommendations

The Department chair makes annual salary recommendations to the dean, who may modify them. The recommendations are based on the current annual performance and merit review as well as on the performance and merit reviews of the preceding 24 months. For Clinical Faculty in the Faculty Group Practice (FGP), salary recommendations are under the auspices of the FGP Compensation Plan.

Merit salary increases and other rewards made by the Department will be made consistent with this APT document requirements and other relevant policies, procedures, practices, and standards established by: (1) the College, (2) the Faculty Rules, (3) the Office of Academic Affairs, and (4) the Office of Human Resources.

As a general approach to formulating salary recommendations for non-clinical (non-FGP) faculty, the Department Chair will consider continuing productivity as well as market and internal equity issues. Salary increases should be based upon these considerations. For Clinical Faculty salary and raises are determined according to the Faculty Group Practice (FGP) Compensation plan.

Faculty members who wish to discuss dissatisfaction with their salary increase with the Department Chair should be prepared to explain how their salary (rather than the increase) is inappropriately low, since increases are solely a means to the end of an optimal distribution of salaries.

Faculty who fail to submit the required documentation (see Section V.A above) for an annual performance and merit review at the required time may 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.

VI. PROMOTION AND TENURE, AND PROMOTION REVIEWS

Faculty Rule [3335-6-02](#) provides the following context for promotion and tenure and promotion reviews

In evaluating the candidate's qualifications in teaching, scholarship, and service, reasonable flexibility shall be exercised, balancing, where the case requires, heavier commitments and responsibilities in one area against lighter commitments and responsibilities in another. In addition, as the university enters new fields of endeavor, including interdisciplinary endeavors, and places new emphases on its continuing activities, instances will arise in which the proper work of faculty members may depart from established

academic patterns. In such cases care must be taken to apply the criteria with sufficient flexibility. In all instances superior intellectual attainment, in accordance with the criteria set forth in these rules, is an essential qualification for promotion to tenured positions. Clearly, insistence upon this standard for continuing members of the faculty is necessary for maintenance and enhancement of the quality of the university as an institution dedicated to the discovery and transmission of knowledge.

A. Criteria and Evidence that Supports Promotion

Outlined below are the Department of Emergency Medicine's formal criteria for academic advancement and awarding of tenure. 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 is demonstrated, for example, by participation in faculty governance and community outreach; activities related to the University's [Shared Values](#); adherence to principles of the responsible conduct of research; constructive conduct and ethical behavior during the discharge of responsibilities and authority; and the exercise of rights and privileges consistent with the [American Association of University Professors' Statement on Professional Ethics](#). (Appendix B).

Annually, the OSU Office of Academic Affairs establishes specific guidelines, procedures, and schedules for the review of candidates for promotion and tenure. The College of Medicine Office of Faculty Affairs 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 College of Medicine Office of Faculty Affairs will submit the dossier to the College's Appointments, Promotion and Tenure Advisory Committee for formal review. The committee will review the dossier, consistent with responsibilities described in Section VI.B.2 of this document, 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 to Associate Professor with Tenure

Faculty Rule [3335-6-02](#) provides the following general criteria for promotion to associate professor with tenure:

The awarding of tenure and promotion to the rank of associate professor must be based on convincing evidence that the faculty member has achieved excellence as a teacher, as a scholar, and as one who provides effective service; and can be expected to continue a program of high-quality teaching,

scholarship, and service relevant to the mission of the academic unit(s) to which the faculty member is assigned and to the university.

Tenure is not awarded below the rank of associate professor at The Ohio State University. Achievement of a national recognition and impact is a prerequisite for promotion to Associate Professor with tenure. National recognition and impact is to be broadly understood and defined. Evidence of impact may include, but is not limited to the following: evidence of sustained or multiple external peer-reviewed grant support; invitations to participate in multicenter research activities; invited presentations at national/international scientific sessions; sustained, highly cited publication history; visiting lectures and presentations at peer institutions; invitations to serve on editorial boards, study sections, grant review sections, guideline committee, white paper working groups; leadership positions in national organizations; social media portfolios; authorship/editorial duties or professional media engagement on scholarly topics.

a. Scholarship: Scholarship is broadly defined as the discovery and dissemination of new knowledge. Demonstration of national recognition and impact for a thematic independent program of scholarship is an essential requirement for promotion to associate professor and the award of tenure. Independence must be reflected in the record of scholarship, e.g. reflected by dissemination of new knowledge evidenced by publications and extramural funding.

Publications: Achievement of excellence in scholarship is demonstrated by 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, among many potential others.

While individual circumstances may vary, both the quantity and quality of publications should be considered. Metrics that are useful in assessing a candidate's record of scholarship include, but are not limited to, the total number of publications since their appointment as an assistant professor, the number of citations of their publications, the trajectory of the publication and/or citation record, and the relative proportion of first/senior authorships. The impact factor of a journal may or may not reflect the quality of the scholarship. For example, in some areas of research the best journal in that area may have a relatively low impact factor but may be highly cited. Conversely, publication in journals with very high impact factors is a reflection of broader interest but does not in and of itself demonstrate the impact of research. Impact may be demonstrated through non-traditional metrics. This can include but is not limited to social media penetration, blog subscription, Altmetrics score, non-academic invited presentations, collaborations that advance the mission of the university or the field, and interviews by reputable national media outlets on scholarly topics. However, this does not in and of itself demonstrate the impact of research. A sustained record of scholarly productivity, reflected by both quality and quantity, as an assistant professor is required for promotion to the rank of associate professor.

For promotion to Associate Professor with Tenure in Emergency Medicine, candidates should ideally have 15 or more peer-reviewed publications in journals with a mean impact factor of at least 1.5 or have an H index of 11 or greater. 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.

For faculty with significant clinical responsibilities seeking tenure, in accordance with Faculty Rule [3335-6-02](#), in evaluating the candidate's qualifications in teaching, scholarship, and service, reasonable flexibility shall be exercised. The clinician's heavier proportion of commitment to clinical duties will be considered when considering the expectations for publication numbers and H index as compared to non-clinician faculty seeking tenure.

The dossier will require the demonstration of impact, not just the potential for impact. Although review articles may form a portion of the publication list (typically less than 30%), and may be used to indicate that a faculty member is considered to be an expert in the field, a successful dossier will contain primarily peer-reviewed research articles; book chapters or reviews alone or in majority will not be sufficient for promotion.

Considered together, demonstration of impact and a national reputation of an independent program of research is required for promotion to associate professor and awarding of tenure. Participation in collaborative, multidisciplinary research and team science is highly valued. In cases where a faculty member's collaborative scholarship results primarily in middle authorship, the recognition and impact of their scholarship will be reflected through other indicators such as, but not limited to, the indispensability of the candidate's role and contribution in generating the publication(s), invitations to serve on editorial boards, study sections, national invitations to speak, etc.

Funding: Evidence of sustained or multiple grant support is another crucial indicator of expertise in the field with expectations varying based on clinical responsibilities.

Candidates without significant clinical responsibilities

Candidates for promotion to Associate Professor with Tenure who are without significant clinical responsibilities must have (required) obtained NIH (or comparable) funding as a principal investigator (PI) or Multiple Principal Investigator (MPI) on a R01, P01, U54, or other comparable funding, including but not limited to NSF, DoD, USDA, AHRQ, DARPA, RWJF, Commonwealth Fund, or Kaiser Family Foundation. They must (required) demonstrate sustainability of their research program by renewal of the award and/or by garnering a second distinct nationally competitive, peer reviewed grant as a principal investigator (PI) or Multiple Principal Investigator (MPI). In addition to entities above, the latter may include significant support from prominent national charitable foundations (e.g., American Heart Association, American Lung Association, American Diabetes Association, American Cancer Society, the Lupus Foundation, the March of Dimes, etc.), a major investigator-initiated industry grant, or other federal entities such as the Centers for Disease Control and Prevention, Department of Defense and the National Science Foundation or a K level award. In some circumstances, (e.g. specific techniques) faculty member's expertise may not justify PI level status. In such cases serving as a co-investigator on multiple grants will satisfy the requirement for extramural funding.

Candidates with significant clinical responsibilities

Candidates for promotion to Associate Professor with Tenure who have significant clinical responsibilities are required to obtain *sustained* extramural NIH or comparable funding as defined in the previous paragraph as a PI or MPI to support their research program. Competitive, peer-reviewed career development award funding, such as an NIH K award or significant national foundation career development or other award, is acceptable. Depending on the extent of clinical responsibilities, significant, sustained funding through pharmaceutical or instrumentation companies for investigator-initiated proposals may be acceptable. Serving only as the site-PI for multicenter trials (whether industry or non-industry) alone would not satisfy the expectation for extramural funding on the tenure track, but can provide additional supporting evidence of expertise. Similarly, faculty members who generate support for their research programs through creation of patents that generate licensing income or spin-off companies would meet the equivalent criteria of extramural funding.

Program Development: 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 these appointments.

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 College of Medicine 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.

b. Teaching and Mentoring

A strong and consistent record of effective teaching and mentoring is required for promotion and tenure. Peer evaluation is required on a recurring basis for all faculty members. Effectiveness may be demonstrated by consistently positive evaluations by students, residents, fellows, local colleagues and/or national peers. Teaching awards and other honors are also highly supportive of teaching excellence, but are not required. Teaching effectiveness may also be documented by documented impact on teaching and training programs, including curricular innovation, new teaching modalities or methods of evaluating teaching, and program or course development, although these are not required. Development of impactful, innovative programs that integrate teaching, research and patient care are valued.

Mentorship expectations while at rank of assistant professor are less than for those at advanced rank. Teaching and mentoring effectiveness may be demonstrated by participation in career development or scholarship of mentees.

Presentations at other academic institutions, presentations or tutorials at scientific conferences or meetings, presentations at other medical centers or hospitals, and the like are valued teaching activities demonstrating national reputation and impact.

c. 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 within the institution can include but is not limited to, appointment or election to Department, College of Medicine, hospital, and/or University committees, working groups, or leadership of programs. Evidence of professional service to the faculty member's discipline or public and private entities beyond the University can include but is not limited to journal editorships, ad hoc journal reviews, editorial boards, or editorships; grant reviewer for national funding agencies; elected or appointed offices held and other service to local and national professional societies; service on panels and commissions; and professional consultation to industry, government, education, and non-profit organizations. Similarly, innovative programs that advance the mission of the university can be considered service activities.

Service will be evaluated both quantitatively and qualitatively. Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion. Written evaluations of service may be solicited by the Committee of Eligible Faculty at the candidate's request.

These are different and separate from the External Evaluation Letters that will be solicited for the candidate's dossier and may come from any member of their community that can speak to their service.

2. Promotion to Associate Professor in Advance of Tenure

Promotion to associate professor in advance of tenure is available to faculty members with significant clinical responsibilities who have 11-year probationary periods. The criteria for promotion requires 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. Specifically, the candidate must demonstrate evidence of an emerging national recognition with activities as described under Promotion to Associate Professor with tenure. In addition, the Promotion and Tenure Committee or administrators (Chair or Dean) may determine that a faculty member's accomplishments do not merit tenure and may recommend promotion in advance of tenure even if a faculty member has requested promotion with tenure. Promotion in advance of tenure may only occur if a candidate is not in the mandatory review year. If a clinician candidate is promoted in advance of tenure, the tenure review must occur within six years, and no later than the mandatory review year, whichever comes first.

a. Scholarship

Publications: Evidence (substantial progress toward the establishment) of a thematic program of scholarship as reflected by a consistent and increasing number of peer reviewed publications as first or senior author must be demonstrated. Candidates for promotion to associate professor in advance of tenure should ideally have 10 or more peer-reviewed publications since their appointment as an assistant professor. These publications should have an average impact factor of 1.5 or greater or an H-index of 9 or above. In general, the approach to assessment of scholarship will be consistent with that described for promotion to associate professor with tenure substituting the thresholds described in this section.

Funding: Extramural funding is required for promotion to associate professor in advance of tenure with additional evidence of a promising funding trajectory. Criteria for a promising trajectory in extramural funding includes but is not limited to serving as a PI on an R21, R03, K awards, or equivalent grants (including but not limited to NSF, DoD, USDA, AHRQ, DARPA, RWJF, Commonwealth Fund, or Kaiser Family Foundation), co-I with a significant role on an R01 NIH grant award, or as PI on foundation or other extramural grants, or patent/inventorship. Foundation or extramural grants may include but are not limited to support from prominent national charitable foundations (e.g., American Heart Association, American Lung Association, American Diabetes Association, American Cancer Society, the Lupus Foundation, the March of Dimes, etc.), a major industry grant, or other federal entities such as the Centers for Disease Control and Prevention, Department of Defense and the National Science Foundation. In some circumstances, (e.g. specific techniques) faculty member's expertise may not justify PI level status. In such cases serving as a co-investigator on multiple grants will satisfy the requirement for extramural funding. Performance below the above stated range/criteria does not preclude a positive promotion decision and evidence of scholarship above the specified range does not guarantee a favorable promotion decision.

b. Teaching and Mentoring

A record of effective teaching and mentoring is required for promotion in advance of tenure. Peer evaluation is required on a recurring basis for all faculty members. Effectiveness may be demonstrated by consistently positive evaluations by students, residents, fellows, local colleagues and/or national peers. Teaching awards and other honors are also highly supportive of teaching excellence, but are not required. Teaching effectiveness may also be documented by documented impact on teaching and training programs, including curricular innovation, new teaching modalities or methods of evaluating teaching, and program or course development, although these are not required. Development of impactful, innovative programs that integrate teaching, research and patient care are valued.

Mentorship expectations while at rank of assistant professor are less than for those at advanced rank. Teaching and mentoring effectiveness may also be demonstrated by participation in career development or scholarship of mentees.

Presentations at other academic institutions, presentations or tutorials at scientific conferences or meetings, presentations at other medical centers or hospitals, and the like are valued teaching activities demonstrating national reputation and impact.

c. Service

Evidence of service within the institution can include but is not limited to, appointment or election to Department, College of Medicine, hospital, and/or University committees or working groups, or leadership of programs. Evidence of professional service to the faculty member's discipline or public and private entities beyond the University can include but is not limited to journal editorships, ad hoc journal reviews, editorial boards, or editorships; grant reviewer for national funding agencies; elected or appointed offices held and other service to local and national professional societies; service on panels and commissions; and professional consultation to industry, government, education, and non-profit organizations.

Similarly, innovative programs that advance the mission of the university can be considered service activities.

Service will be evaluated both quantitatively and qualitatively. Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion. Written evaluations of service may be solicited by the Committee of Eligible Faculty at the candidate's request. These are different and separate from the External Evaluation Letters that will be solicited for the candidate's dossier and may come from any member of their community that can speak to their service.

3. Promotion to Professor with Tenure

Awarding promotion to the rank of professor with tenure must be based upon convincing, unequivocal evidence (required) that the candidate has a sustained eminence in their field with a record of achievement recognized by national leadership and/or international recognition and impact. 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. It is expected that the faculty member will have a consistent record of high-quality publications and funding with demonstrated impact well beyond that required for promotion to associate professor.

a. Leadership

Examples of evidence of national leadership or an international reputation are to be broadly understood and defined. Examples include, but are not limited to, election or appointment to a leadership position in a national or international societies, service as a national committee or task force leadership role, regular membership on an NIH study section, peer recognition or awards for research, editorial boards or editorships of scientific journals, invited lectures at hospitals or universities or at meetings of national or international societies, evidence of sustained or multiple external peer-reviewed grant support; invitations to participate in multicenter research activities; sustained, highly cited publication history; social media portfolios; authorship/editorial duties or professional media engagement on scholarly topics.

b. Scholarship

As listed above for promotion to the rank of associate professor, scholarship is also broadly defined for promotion to professor. 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.

Publications: Candidates for promotion to professor should ideally have 50 or more papers with a mean impact factor of 1.5 or greater and/or an H- index of 15 or more. Ideally there should be 25 or more peer-reviewed journal papers since promotion to associate professor. It is expected that the pattern of scholarship will include a substantial proportion (at least 6) of publications as senior or corresponding author. While individual circumstances may vary, both the quantity and quality of publications should be considered.

Metrics that are useful in assessing a candidate's record of scholarship include but are not limited to the total number of publications since their appointment as an associate professor, the number of citations of their publications, the trajectory of the publication and/or citation record, and the relative proportion of first/senior authorships. The impact factor of a journal may or may not reflect the quality of the scholarship. For example, in some areas of research the best journal in that area may have a relatively low impact factor but may be highly cited. Conversely, publication in journals with very high impact factors is a reflection of broader interest but does not in and of itself demonstrate the impact of research. Impact may be demonstrated through non-traditional metrics. This can include but is not limited to social media penetration, blog subscription, Altmetrics score, non-academic invited presentations, collaborations that advance the mission of the university or the field, and interviews by reputable national media outlets on scholarly topics. However, this does not in and of itself demonstrate the impact of research. A sustained record of scholarly productivity, reflected by both quality and quantity, as an associate professor is required for promotion to the rank of professor.

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. As with promotion to associate professor, participation in collaborative, multidisciplinary research and team science is highly valued.

For clinicians seeking promotion to professor with tenure, in accordance with Faculty Rule [3335-6-02](#), in evaluating the candidate's qualifications in teaching, scholarship, and service, reasonable flexibility shall be exercised. The clinician's heavier proportion of commitment to clinical duties will be considered when considering the expectations for funding, publication numbers, and H index as compared to non-clinician faculty seeking promotion.

The dossier will require the demonstration of impact, not just the potential for impact. Although review articles may form a portion of the publication list (typically less than 30%), and may be used to indicate that a faculty member is considered to be an expert in the field, a successful dossier will contain primarily peer-reviewed research articles; book chapters or reviews alone or in majority will not be sufficient for promotion. Considered together, demonstration of impact and a national reputation of an independent program of research is a prerequisite for promotion to professor with tenure. Participation in collaborative, multidisciplinary research and team science is highly valued. In cases where a faculty member's collaborative scholarship results primarily in middle authorship, the recognition and impact of their scholarship will be reflected through other indicators such as, but not limited to, the indispensability of the candidate's role and contribution in generating the publication(s), invitations to serve on editorial boards, study sections, national invitations to speak, etc.

Funding: Candidates for promotion are required to have led, developed and maintained nationally competitive and current peer reviewed extramural funding to support their research program including sustained funding.

Candidates without significant clinical responsibilities: At a minimum, candidates for promotion to professor without clinical responsibilities must be a PI or multiple-PD/PI on at least one NIH funded R01, P01, U54 or equivalent grant (e.g. but not limited to NSF, DoD, USDA, AHRQ, DARPA, RWJF, Commonwealth Fund, or Kaiser Family Foundation) with a history of at least one competitive renewal and another nationally competitive grant, or be PI/MPI on a total of two NIH R01 level awards. Other competitive grants may include support from prominent national charitable foundations (e.g., American Heart Association, American Lung Association, American Diabetes Association, American Cancer Society, the Lupus Foundation, the March of Dimes, etc.), a major industry grant, or other federal entities such as the Centers for Disease Control and Prevention, Department of Defense and the National Science Foundation. In some circumstances, (e.g. specific techniques) faculty member's expertise may not justify PI level status. In such cases serving as a co-investigator on multiple NIH grants will satisfy the requirement for extramural funding.

Candidates with significant clinical responsibilities: Candidates for promotion to professor who have significant clinical responsibilities are expected to obtain extramural NIH or comparable funding as a PI or multiple-PD/PI on at least one NIH funded R01, P01, U54 or equivalent grant (e.g. but not limited to NSF, DoD, USDA, AHRQ, DARPA, RWJF, Commonwealth Fund, or Kaiser Family Foundation). There should be additional funding from at least one more competitive grant which could be NIH or support from prominent national charitable foundations (e.g., American Heart Association, American Lung Association, American Diabetes Association, American Cancer Society, the Lupus Foundation, the March of Dimes, etc.), a major industry grant, or other federal entities such as the Centers for Disease Control and Prevention, Department of Defense and the National Science Foundation. Depending on the extent of clinical responsibilities, sustained funding through large national organizations, pharmaceutical or instrumentation companies for investigator-initiated proposals may be acceptable. Serving as the site-PI for a multi-center trial would not satisfy the expectation for extramural funding on the tenure track. Similarly, faculty members who generate support for their research programs through creation of patents that generate licensing income or spin-off companies would meet the equivalent criteria of extramural funding. In some circumstances, (e.g. specific techniques) faculty member's expertise may not justify PI level status. In such cases serving as a co-investigator on multiple NIH grants will satisfy the requirement for extramural funding.

Program Development: 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 these appointments.

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 College of Medicine 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.

c. Teaching and Mentoring

A continued strong and consistent record of effective teaching and mentoring is required for promotion. Peer evaluation is required on a recurring basis for all faculty members. Evidence may include, but is not limited to consistently positive student, resident, fellow, local colleague, and/or national peer course evaluations. Active participation as a mentor in training grants such as NIH T32 or K- awards is highly valued as a teaching and mentoring activity demonstrating effectiveness. Teaching awards or consistently positive teaching evaluations or positive lecture evaluations from national audiences or T32 or K-award mentorship are all evidence of teaching effectiveness. Other avenues to demonstrate effectiveness include course or workshop leadership and design, a training program directorship, teaching awards, and organization of national programs, although these are not required. Mentorship of junior faculty is expected (required) for candidates for promotion to professor. It is presumed that this will take the form of a primary mentoring relationship, and not just ad hoc career coaching. Candidates should provide evidence of the impact of their mentorship including names, accomplishments (particularly including successful publications/projects completed with the mentor), and career trajectory of mentees.

d. 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. Promotion to the rank of professor requires service to the COM, OSU, and to national or international professional societies. Evidence of service within the institution can include but is not limited to, appointment or election to Department, College of Medicine, hospital, and/or University committees or working groups, or leadership of programs. Evidence of professional service to the faculty member's discipline or public and private entities beyond the University can include but is not limited to journal editorships, ad hoc journal reviews, editorial boards, or editorships; grant reviewer for national funding agencies; elected or appointed offices held and other service to local and national professional societies; service on panels and commissions; and professional consultation to industry, government, education, and non-profit organizations.

Similarly, innovative programs that advance the mission of the university can be considered service activities.

Service will be evaluated both quantitatively and qualitatively. Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion. Written evaluations of service may be solicited by the Committee of Eligible Faculty at the candidate's request. These are different and separate from the External Evaluation Letters that will be solicited for the candidate's dossier and may come from any member of their community that can speak to their service.

4. 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 these appointments, and less emphasis on traditional scholarship.

The department places value on contributions to teaching, research, patient care, administration, and behavior that fosters excellence, integrity, respect, compassion, accountability, and a commitment to altruism in all our work interactions and responsibilities.

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 Department, College and the University are best served when all faculty members strive for continued improvement in all academic areas as measured by meeting or exceeding the requirements for promotion to the next faculty rank.

The awarding of promotion to the rank of Associate Clinical Professor must be based upon convincing evidence that the candidate has developed a national level of impact (with the exception of the clinical excellence pathway) and recognition since being appointed to the rank of Assistant Clinical Professor and has a trajectory of continued contributions (required).

The awarding of promotion to the rank of Clinical Professor must be based upon convincing evidence that the candidate has developed a national level of leadership and recognition since being appointed to the rank of Associate Clinical Professor or significantly contributed to the national reputation of the College of Medicine/Ohio State University (required). Again, a trajectory of continued contribution is required. Though international service/leadership is considered within the promotion process, in general, higher value is placed on national leadership within the general discipline of Emergency Medicine.

All Clinical Faculty have a requirement for licensure as required by the state of Ohio. Teaching areas will be assigned by the Department Chair.

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

a. Assistant Clinical Professor, Any Pathway

For promotion to Assistant Clinical Professor, a faculty member must complete their doctoral degree and meet the required licensure/certification in their specialty and be performing satisfactorily in teaching, professional practice, and service. Promotion will entail generation of a renewed contract. There is no presumption of a change in contract terms.

b. Associate Clinical Professor, Clinician Educator Pathway

The awarding of promotion to the rank of Associate Clinical Professor on the Clinician-Educator Pathway must be based upon convincing evidence that the candidate has developed a national level of impact and recognition as a clinician educator since being appointed to the rank of Assistant Clinical Professor and is demonstrating a continued trajectory for success (required). National recognition and impact is to be broadly understood and defined, although it is most often related to the primary focus of this pathway (clinical or didactic education). Evidence of impact may include, but is not limited to the following: evidence of sustained or multiple external peer-reviewed grant support; invitations to participate in multicenter research or educational innovation activities; invited presentations at national/international scientific sessions; creation and dissemination of novel curricula and educational techniques; sustained, cited publication history; visiting lectures and presentations at peer institutions; invitations to serve on editorial boards, study sections, grant review sections, guideline committee, or white paper working groups; leadership positions in national organizations; social media portfolios; authorship/editorial duties or professional media engagement on scholarly or educational topics. Evidence of national recognition and impact may also reflect an outstanding clinician who has demonstrated a sustained record of educating colleagues and peers, such as through invitations to serve as faculty on national medical education programs. This advancement may reflect expertise as an educator of trainees at any level.

The individual also must have a scholarly focus. For faculty in this pathway, the scholarly focus is often the scholarship of teaching and the scholarship of integration but can include original investigation and content expertise. Dissemination of scholarly work can include presentations at regional and national forums, and digital or traditional publications. These pathways include but are not limited to curriculum innovation and development, leadership (including service leadership), dissemination of content

expertise, lectureships, teaching, academically productive mentorship, scholarship, or social media dissemination in high-impact and recognized outlets.

A clinician educator can achieve external leadership or national reputation through many different venues. The candidate must have clear and convincing evidence of expertise in at least one venue, as well as dissemination of scholarly activity. The candidate must present a portfolio with acceptable and favorable accomplishments in multiple pathways, although superior performance in all domains is not required.

i. Teaching and Mentoring

A strong and consistent record of effective teaching and mentoring is required for promotion. Peer evaluation is required on a recurring basis for all faculty members. Effectiveness is demonstrated by consistently positive evaluations by students, residents, fellows, local colleagues or national peers. Peer evaluation is required on a recurring basis for all faculty members. Evaluations may include but are not limited to bedside teaching, classroom teaching, procedural teaching, small group sessions and lectures. Teaching awards and other honors are considered evidence as recognition of teaching effectiveness but are not required. Nominations for teaching awards, which are adjudicated by a group of peers, may be viewed as recognition of teaching accomplishment, but are not required.

Candidates may also demonstrate educational excellence by favorable impact on teaching and training programs, including curriculum innovation, curriculum design and implementation, innovative teaching practices, modules and publications, new teaching modalities or new methods of evaluating teaching, and program or course development. In all cases, evidence of improved educational process or outcomes (i.e. impact) is required. Clinician educators may demonstrate national impact through invitations to serve as faculty on national continuing medical education programs or other national activities.

Development of impactful, innovative programs that integrate teaching, research and patient care are particularly valued.

Mentorship and sponsorship of faculty, fellows, residents and students is a highly valued activity. Evidence of mentorship may include active participation in a formal mentorship program or development of long-term relationships which provides guidance, motivation, emotional support, and/or role-modeling for the purpose of personal or professional development. Activities that demonstrate sponsorship include providing junior faculty, residents, and students with educational opportunities such as speaking engagements or publications. This mentorship should be above and beyond the typical advising or coaching done as standard departmental citizenship, as defined by core educator duties.

ii. Service

Service is broadly defined to include administrative service to the University, exemplary patient care program development relating to clinical, administrative, leadership, professional service to the faculty member's discipline, peer reviews of manuscripts and grant applications, serve on editorial boards, service to the community as it pertains to Emergency Medicine, leadership positions in professional societies, and the provision of professional expertise to public and private entities beyond the University. Evidence of service can include membership on department, College, Medical Center, or University committees.

Service will be evaluated both quantitatively and qualitatively. Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion. Written evaluations of service may be solicited by the Committee of Eligible Faculty at the candidate's request. These are different and separate from the External Evaluation Letters that will be solicited for the candidate's dossier and may come from any member of their community that can speak to their service.

iii. Scholarship

Publications: The candidate should demonstrate contributions to scholarship as reflected by a number of peer- or editor reviewed (or similarly refereed) publications with national impact. Typically, the minimum number should be 10 (ten) or greater since appointment as an assistant clinical professor. Publications in journals with a high Impact Factor may alter the number needed. Quality metrics of all publications must be reported and considered by the committee. This information should be provided to help the committee understand comparative impact and distribution numbers for digital resources. Acceptable publications may include traditional manuscripts, digital resources such as web-based or video-teaching modules, book chapters, invited submissions and scholarly review articles, innovative teaching techniques or content development. Impact may be demonstrated through non-traditional metrics. This can include but is not limited to social media penetration, blog subscription, Altmetrics score, non-academic invited presentations, collaborations that advance the mission of the university or the field, and interviews by reputable national media outlets on scholarly topics. Primary or senior author positions should be demonstrated in at least three of the ten works. As reflected in the College of Medicine APT document, meaningful scholarship may not be uniformly represented by first or senior authorship positions given current trends of team and collaborative scholarship. However, dossiers with the exception to a reasonable percentage of key author positions on papers should be adequately explained and delineation of authorship clearly explained. Although pedagogic publications are highly valued, they are not required for promotion in the clinician educator pathway. Content expertise suffices as subject matter for academic publications.

Funding: Serving as the local lead of at least one nationally funded or multi-institutional educational or research project is encouraged but not required. It should be noted that collaboration is valued by the department regardless of authorship order, with increasing value attributed from departmental to institutional to multi-institutional projects. The dossier is viewed holistically by evaluating committees and the preceding guidelines do not represent an inflexible requirement for promotion.

c. Clinical Professor, Clinician Educator Pathway

The awarding of promotion to the rank of Clinical Professor on the Clinician-Educator pathway must be based upon convincing evidence that the candidate has developed a national level of leadership in education since being appointed to the rank of Associate Clinical Professor and is demonstrating a continued trajectory for success. International recognition is considered and valued, but national leadership is paramount. A leader is defined as someone who has disseminated educational work product and is considered an expert in an area, such as curriculum innovation and development, lectureships, teaching or social media influencing, national educational policy creation or revision, or contribution to national level assessment and evaluation tools and is asked to provide input and education to others in the field. Excellence is not required in all domains. Impact of leadership should be evidenced by documentation that the candidate's work has been incorporated by others in the field to enhance patient care, build on their educational scholarship, or enhance the education, evaluation, or assessment of others (i.e., learners or teachers).

i. Teaching and Mentoring

A sustained record of excellence in teaching and mentoring is required for promotion. Peer evaluation is required on a recurring basis for all faculty members. Effectiveness is demonstrated by consistently positive evaluations by students, residents, fellows, local colleagues or national peers. Evaluations may include but are not limited to bedside teaching, classroom teaching, procedural teaching, small group sessions and lectures.

Teaching awards and other honors are considered evidence as recognition of teaching excellence, but are not required. Nominations for teaching awards which are adjudicated by a group of peers may be viewed as recognition of teaching accomplishment. Candidates must (required) demonstrate the impact of their teaching and mentoring on teaching and training programs, including curriculum innovation, curriculum

design and implementation, innovative teaching practices, modules and publications, new teaching modalities or new methods of evaluating teaching, and program or course development.

Candidates must demonstrate evidence of mentorship or other career development activities for other faculty members (required). This may take place internal or external to the department. Development of multiple impactful, innovative programs that integrate teaching, research and patient care are valued. National education leadership may also be demonstrated through leadership roles in highly selective positions focused on education. Examples include but are not limited to election to specialty boards such as the Review Committees of the Accreditation Council for Graduate Medical Education, American Board of Emergency Medicine, United States Medical Licensing Examination, Association of American Medical Colleges or similar selective nationally recognized service. An example of leadership of academic specialty organizations include elected positions in Council of Residency Directors and others which may be content and not educational based but which have similar competitiveness and national prominence.

Mentorship and sponsorship of faculty, in addition to residents or students, is expected for advancement to clinical professor (required). Evidence of mentorship may include active participation in a formal mentorship program or development of long-term relationships which provides guidance, motivation, emotional support, and/or role-modeling for the purpose of personal or professional development. Activities that demonstrate sponsorship include providing junior faculty with educational opportunities such as speaking engagements or publications. This mentorship should be above and beyond the typical advising or coaching done as standard departmental citizenship. Outcomes of mentorship/sponsorship should be concrete and demonstrated throughout the dossier.

ii. Service

Service is broadly defined to include administrative service to the University; program development relating to clinical, administrative, or research areas; leadership; 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 or mentoring activities. Evidence of professional service to the faculty member's discipline should include journal editorships, offices held, and/or other service to national professional societies.

Service will be evaluated both quantitatively and qualitatively. Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion. Written evaluations of service may be solicited by the Committee of Eligible Faculty at the candidate's request. These are different and separate from the External Evaluation Letters that will be solicited for the candidate's dossier and may come from any member of their community that can speak to their service.

iii. Scholarship

Publications: The candidate should demonstrate contributions to scholarship as reflected by a number of peer- or editor reviewed (or similarly refereed) publications with national impact. Typically, the minimum number should be 10 (ten) or greater since appointment as an assistant clinical professor and 25 (twenty-five) total. Publications in journals with a high Impact Factor may alter the number needed. Acceptable publications may include traditional manuscripts, digital resources such as web-based or video-teaching modules, book chapters, invited submissions and scholarly review articles, innovative teaching techniques, or content development. Impact may be demonstrated through non-traditional metrics. This can include but is not limited to social media penetration, blog subscription, Altmetrics score, non-academic invited presentations, collaborations that advance the mission of the university or the field, and interviews by reputable national media outlets on scholarly topics. Primary or senior author positions should be demonstrated in at least six of the 15 works. As reflected in the College of Medicine APT

document, meaningful scholarship may not be uniformly represented by first or senior authorship positions given current trends of team and collaborative scholarship. However, dossiers with the exception to a reasonable percentage of key author positions on papers should be adequately explained and delineation of authorship clearly explained.

The impact of these publications must be documented. Quality metrics of all publications must be reported and considered by the committee. This information should be provided to help the committee understand comparative impact and distribution numbers for digital resources. Although pedagogic publications are highly valued and preferred, they are not required for promotion in the clinical educator pathway. Content expertise suffices as subject matter for academic publications.

Funding: Serving as the lead of at least one nationally funded or multi-institutional educational or research project is encouraged, but not required. It should be noted that collaboration is valued by the department regardless of authorship order, with increasing value attributed from departmental to institutional to multi-institutional projects. The dossier is viewed holistically by evaluating committees and the preceding guidelines do not represent an inflexible requirement for promotion.

d. Associate Clinical Professor, Clinician Scholar Pathway

The awarding of promotion to the rank of Associate Clinical Professor on the Clinician Scholar pathway must be based upon convincing evidence that the candidate has developed a national level of impact and recognition as a clinician scholar since being appointed to the rank of Assistant Clinical Professor and is demonstrating a continued trajectory for success (required). Evidence of national recognition and impact should be related to the primary focus of this pathway (scholarship), but can also be related to clinical, educational, or professional service but is not required in all domains. National recognition and impact is to be broadly understood and defined. Evidence of impact may include, but is not limited to the following: evidence of sustained or multiple external peer-reviewed grant support; invitations to participate in multicenter research activities; invited presentations at national/international scientific sessions; sustained, highly cited publication history; visiting lectures and presentations at peer institutions; invitations to serve on editorial boards, study sections, grant review sections, guideline committee, white paper working groups; leadership positions in national organizations; social media portfolios; authorship/editorial duties or professional media engagement on scholarly topics.

i. Teaching and Mentoring

A strong and consistent record of effective teaching and mentoring is required for promotion. Peer evaluation is required on a recurring basis for all faculty members. Effectiveness is demonstrated by consistently positive evaluations by students, residents, fellows, local colleagues and national peers. Teaching evaluations may be based on presentations internally or at other academic institutions, bedside teaching scores, presentations or tutorials at scientific conferences or meetings, and/or presentations at other medical centers or hospitals. Formal teaching is not required for clinician scholars but is of value to the Department and the University. Teaching awards and other honors are also supportive of teaching excellence but are not required.

Mentoring may be of students, residents, fellows, or faculty colleagues and may be evidenced by joint authorship on abstracts, papers and/or grants.

ii. Scholarship

Publications: The candidate must demonstrate contributions to scholarship as reflected by primary, senior, or corresponding 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 (required). A general guideline of ≥ 10 peer-reviewed publications should be attained for promotion to associate clinical professor on the clinician scholar pathway. The impact of these publications can influence the

total number produced. For example, 10 peer review publications in journals with an average impact factor of 1.5 or 8 publications in journals with an average impact factor of 2 would satisfy this threshold. The recognition of the publication by peers can be adjudged by calculation of the H- index. Here 5 publications cited at least 5 times would be a reasonable target. Impact may be demonstrated through non-traditional metrics. This can include but is not limited to social media penetration, blog subscription, Altmetrics score, non-academic invited presentations, collaborations that advance the mission of the university or the field, and interviews by reputable national media outlets on scholarly topics.

Although review articles may form a minority portion of the publication list (typically less than 30%), and may be used to indicate that a faculty member is considered to be an expert in the field, a successful dossier will contain primarily peer-reviewed research articles; book chapters or reviews alone or in majority will not be sufficient for promotion.

Participation in collaborative, multidisciplinary research and team science is highly valued even though it may result in “middle” authorship, if the faculty member’s unique contribution can be discerned. Primary or senior authorship is valued and a significant proportion of publications should demonstrate this author position.

Funding: Faculty on this pathway should have acquired external funding in support of their program of scholarship as principal investigators, MPIs, or site principal investigators. Candidates should have a sustained track record (minimum 3 projects) of being investigators in foundation, industry or NIH or other federal studies. Co-investigator status alone, while valued, is not sufficient to meet these criteria (note that serving as site PI of a multicenter trial does meet these criteria). Entrepreneurship and inventorship are also evidence of scholarly activity, as described in Section VI [Criteria for promotion to Associate Professor with tenure] above and will be viewed most favorably.

iii. 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. Examples of evidence of service include but are not limited to membership on department, COM, hospital, and/or University committees and mentoring activities, service on editorial boards, and leadership positions in professional societies.

Service will be evaluated both quantitatively and qualitatively. Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion. Written evaluations of service may be solicited by the Committee of Eligible Faculty at the candidate’s request. These are different and separate from the External Evaluation Letters that will be solicited for the candidate’s dossier and may come from any member of their community that can speak to their service.

e. Clinical Professor, Clinician Scholar Pathway

The awarding of promotion to the rank of Clinical Professor on the Clinician-Scholar pathway must be based upon convincing evidence that the candidate has developed national leadership as a clinician scholar since being appointed to the rank of Associate Clinical Professor and is demonstrating a continued trajectory of success (required). Evidence of national leadership or international recognition and impact should be related to the primary focus of this pathway (scholarship), but can also be related to clinical, educational, or professional service but is not required in all domains. National recognition and impact is to be broadly understood and defined. Evidence of impact may include, but is not limited to the following: evidence of sustained or multiple external peer-reviewed grant support; invitations to participate in multicenter research activities; invited presentations at national/international scientific sessions; sustained, highly cited publication history; visiting lectures and presentations at peer

institutions; invitations to serve on editorial boards, study sections, grant review sections, guideline committee, white paper working groups; leadership positions in national organizations; social media portfolios; authorship/editorial duties or professional media engagement on scholarly topics.

i. Teaching and Mentoring

A strong and consistent record of effective teaching and mentoring is required for promotion to Professor. Peer evaluation is required on a recurring basis for all faculty members. Effectiveness may be demonstrated by consistently positive evaluations by students, residents, fellows, local colleagues and national peers. Teaching evaluations may be based on presentations internally or at other academic institutions, presentations or tutorials at scientific conferences or meetings, presentations at other medical centers or hospitals, etc.

Teaching awards and other honors are also supportive of a strong teaching record but are not required. Peer evaluation is required on a recurring basis for all faculty members.

Mentorship of junior faculty is an expectation for faculty being considered to the rank of Professor (required). It is presumed that this will take the form of a primary mentoring relationship, and not just ad hoc career coaching. Candidates must demonstrate evidence of mentoring or other career development activities for other faculty members. 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.

ii. Service

Promotion to the rank of Professor requires service to the department, OSU, and in a national context. The faculty member should have made new and impactful service contributions as an Associate Clinical Professor. Candidates may have led the development of new and innovative clinical or clinical research programs which received national recognition. Professional service could include, but is not limited to, peer reviews of manuscripts and grant applications, serve on editorial boards, and leadership positions in professional societies. In addition, invitations to serve as external evaluators for promotion candidates from peer institutions is a reflection of national reputation.

Service will be evaluated both quantitatively and qualitatively. Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion. Written evaluations of service may be solicited by the Committee of Eligible Faculty at the candidate's request. These are different and separate from the External Evaluation Letters that will be solicited for the candidate's dossier and may come from any member of their community that can speak to their service.

iii. Scholarship

Publications: 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 (required). A general guideline of ≥ 30 publications since time of appointment to Assistant Clinical Professor and >15 since time of promotion to Associate Clinical Professor should be attained for promotion to clinical professor. The impact of these publications can influence the total number produced. For example, 20 peer review publications in journals with an average impact factor of 1.5 or 15 publications in journals with an average impact factor of 3 would satisfy this threshold. The recognition of the publication by peers can alternatively be adjudged by calculation of the H-index. Here 12 publications cited at least 12 times each would be a reasonable target. Impact may be demonstrated through non-traditional metrics. This can include but is not limited to social media penetration, blog subscription, Altmetrics score, non-academic invited presentations, collaborations that advance the mission of the university or the field, and interviews by reputable national media outlets on scholarly topics.

Funding: Faculty being considered for promotion to Professor on this pathway should have acquired external funding in support of their program of scholarship. Candidates should have a sustained track record of being principal investigators or site PIs in foundation, industry or NIH studies. PI, or multiple-PD/PI on a major national peer reviewed grant or site principal-investigator status on multiple clinical trials or other national grants; or patents is required. Entrepreneurship and inventorship are also evidence of scholarly activity, and will be viewed favorably.

f. Associate Clinical Professor, Clinical Excellence Pathway

In the circumstance where individuals are assigned major responsibilities for clinical care, clinical administrative activities, and other activities related to their defined area of clinical expertise, faculty members may seek promotion on the clinical excellence pathway.

Major responsibility is defined as 80% time dedicated to the clinical mission. Exceptions to the 80% may be granted by the chair in isolated circumstances. The clinical time commitment of these individuals may not allow the achievement of personal recognition for their accomplishments; however, their unique contributions serve to enhance the recognition of the Medical Center, the Department of Emergency Medicine, or their assigned hospital. These faculty are recognized for the scholarship of clinical practice or novel contributions to the advancement of the practice in their field. For these individuals, their contribution to the regional and national recognition of the Medical Center or University may serve as a proxy for individual regional or national recognition. Personal National recognition is not required for promotion to associate clinical professor on this pathway.

On the Clinical Excellence pathway, there must be individual evidence and a continued trajectory of high-quality patient care, which may include subjective and objective markers such as clinical quality metrics; recognition from patients, colleagues, or other team members; letters of support from colleagues; teaching awards; consistently positive student and resident evaluations; or departmental and other clinical awards. Peer evaluation of teaching is required on a recurring basis for all faculty members. Teaching evaluations may be based on presentations internally or at other academic institutions, bedside teaching scores, presentations or tutorials at scientific conferences or meetings, or presentations at other medical centers or hospitals.

The metrics for such a promotion will vary according to position, focus of clinical expertise, and workload. Therefore, it is understood that there is an inherent flexibility in our review criteria and such promotions are determined on a case-by-case basis.

There should be clear, sustained evidence demonstrating novel contributions and expertise outside of the expected clinical work of an Emergency Physician and a continued trajectory of accomplishments. This may include clinical innovation or program development. For our discipline, this would include but is not limited to clinical operations, hyperbaric medicine, administration, wound care, toxicology, EMS, wilderness medicine, sports medicine, global health, or ultrasound. Alternatively, the faculty member may demonstrate novel contributions and impact in non-clinical areas including teaching and scholarship. The candidate must present a portfolio with acceptable and favorable accomplishments as outlined in the more than one of the example areas below, although superior performance in all areas is not required.

Examples of evidence that may support promotion include:

- i. Establishment or enhancement of quality improvement program(s) or system-based changes that result in the enhancement of care provided to Medical Center patients. Examples may include but are not limited to major ED physical design changes or the addition and development of new clinical care delivery models that enhance and impact the system-wide care of our patients.

- ii. A sustained track record of exemplary clinical leadership and unique program development within the institution. This may include clinical or administrative work to support specific programs and missions of the Medical Center such as prehospital, critical care, trauma, stroke, STEMI, sepsis, pediatrics, geriatrics, oncology emergency patients, or other programs. This should be supported by written documentation of the individual's contribution. It is essential that multiple letters of evaluation from sources external to the department, including referring/collaborating interdisciplinary colleagues, physicians, or other Medical Center personnel be included as evidence of external validation of the program.
- iii. Demonstration or dissemination of data and expertise. This could include, but is not limited to Grand Rounds, clinical practice guidelines, seminars, podcasts, websites, small group activities, and internal benchmarking. Impact may be demonstrated through non-traditional metrics. This can include but is not limited to social media penetration, blog subscription, Altmetrics score, non-academic invited presentations, collaborations that advance the mission of the university or the field, and interviews by reputable national media outlets on scholarly topics.
- iv. Demonstration of sustained collaboration with researchers and/or educators in the department and beyond that result directly or indirectly in excellent patient care and/or significantly advance the educational or research missions.
- v. Evidence of a high-level of clinical quality. It is expected that multiple lines of evidence supporting excellence in clinical performance, include clinical measures such as quality indicators, mortality metrics, complication rates, and patient satisfaction rates where such measures can readily be internally and externally benchmarked for excellence be documented. Superior performance in clinical quality alone is not sufficient for promotion.

The awarding of promotion to the rank of Associate Clinical 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's scope or sphere of influence. This level of excellence should be supported by letters of evaluation of the faculty's work product/effort/excellence by those outside of the department who can speak to the clinician's impact. These may include faculty in other departments, nursing leadership, community outreach, financial directors and others. Promotion will not be granted purely on the bases of length of service to the institution or satisfactory job performance.

g. Clinical Professor, Clinical Excellence Pathway

Continued recognition of sustained clinical excellence by patients, team members and others is an expectation of the candidate, and a continued trajectory of these characteristics.

Specific criteria for advancement to the rank of clinical professor are mirrored in the associate clinical professor criteria outlined above, but with broader scope and recognition of expertise.

The awarding of promotion to the rank of Clinical Professor on the Clinical Excellence Pathway should demonstrate that the candidate has meaningfully contributed to the national reputation of the medical center or individually achieved a sustained national reputation as an excellent clinician or clinical administrator (required). These contributions will have a sustained positive impact on patient care and require more advanced and sustained quantity, quality and impact than that required for promotion to Associate Clinical Professor. Alternatively, the faculty member may demonstrate similar level of contributions and impact in non-clinical areas including teaching and scholarship.

This level of excellence should be supported by letters of evaluation of the faculty's work product/effort/excellence by those outside of the department who can speak to the clinician's impact. These may include faculty in other departments, nursing leadership, community outreach, financial directors and others. Promotion will not be granted purely on the bases of length of service to the institution or satisfactory job performance.

Metrics such as state, or national recognition for clinical excellence and innovation are clear indicators of individual achievement; however, due to the unique and team-based nature of the care provided by emergency medicine physicians, an individual's contributions that result in recognition of the entire department or the medical system constitute another mechanism of demonstrating impact.

Additional metrics of national recognition include invited national lectures regarding innovation, program development and clinical excellence, recruitment/invitation on national committees focused on clinical care, and leadership at a national level. Impact may be demonstrated through non-traditional metrics. This can include but is not limited to social media penetration, blog subscription, Altmetrics score, non-academic invited presentations, collaborations that advance the mission of the university or the field, and interviews by reputable national media outlets on scholarly topics.

Development, facilitation, or oversight of policies, programs, or procedures that result in improvements for patient outcomes, more efficient or value-based care, or more effective means of delivering care may support promotion on this pathway, if they are demonstrated to enhance the reputation of the department and the medical center. This may be evidenced in many ways, including, but not limited to, national positive citation of Ohio State Emergency Medicine as developing best practices, adoption by other health centers of Ohio State Emergency Medicine methods, guidelines or processes, inquiries and site visits from other health centers, and increases in Emergency Medicine rankings or programs to which Emergency Medicine makes a significant contribution.

Mentoring of junior faculty/trainees is required for the promotion to Clinical Professor on the Clinical Excellence pathway in this department. Given the unique nature of the Clinical Excellence pathway mentoring should be interpreted broadly including but not limited to career advising, faculty development assistance, clinical improvement assistance, advising junior faculty on mechanics of fulfilling their positions, or leadership recruitment/training to ensure sustained success of innovative or novel clinical improvement programs.

5. Promotion of Research Faculty

The criteria for promotion focus entirely on the category of research. Since research faculty typically have a supportive role in research programs, the expectations for scholarship are quantitatively and qualitatively different than those for faculty on the tenure track.

a. Research Associate Professor

Candidates for promotion to research associate professor are expected to demonstrate the beginnings of a national recognition of their expertise (required). This may be reflected by (but not limited to) invitations to review manuscripts or grant applications, invitations to lecture at scientific societies or other universities, consultation with industry or governmental agencies, requests for collaboration from other universities, request to serve in central roles on multi-center studies, etc.

Research faculty typically are **not** expected to establish an independent program of research. Promotion to research associate professor requires documentation of a sustained and substantial record of scholarship based upon their expertise. Candidates typically should have 20-25 peer reviewed journal publications since their appointment as research assistant professors. First, senior, or corresponding authorships are typically not expected. 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. 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. It is

expected that the successful candidate will have a sustained record of 95% salary recovery from extramural sources.

Research faculty typically serve as Co-Investigators, and independent extramural funding (Principal Investigator or Multiple Principal Investigator) is not required.

b. Research Professor

The awarding of promotion to the rank of research professor must be based upon convincing evidence that the candidate has established a national level of recognition and impact beyond that which was established for promotion to research associate professor (required). This may be reflected by (but not limited to) invitations to review manuscripts or grant applications, invitations to lecture at scientific societies or other universities, consultation with industry or governmental agencies, requests for collaboration from other universities, request to serve in central roles on multicenter studies, etc. Research faculty typically are not expected to establish an independent program of research.

Promotion to professor requires documentation evidence of a sustained and substantial record of scholarship. Candidates should have 25-35 peer reviewed journal publications since their appointment as research associate professor. Some first, senior, or corresponding authorships are expected. 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. 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. It is expected that the successful candidate will have a sustained record of 95% salary recovery from extramural sources.

Research faculty typically serve as Co-Investigators, and independent extramural funding (Principal Investigator or Multiple Principal Investigator) is not required.

6. Associated Faculty

a. Promotion to Adjunct Associate Professor and Adjunct Professor (Uncompensated Associated Faculty)

For uncompensated associated faculty, promotion should reflect contributions to the Department or College that exceed the activities that represent the basis for their faculty appointment, in most cases related to the educational mission. At the Associate Professor level this could include service on departmental and or college committees, contributions to medical student curriculum development or other evidence of contributions to the educational or scholarly mission of the department or college. For promotion to Professor, the level of contribution must demonstrate sustained and enhanced engagement or leadership.

Required documentation for considering promotion of associated faculty:

- Submission of an updated CV, including a biographical narrative which addresses the candidate's service to the Department and the College of Medicine
- Letters from two people, including the faculty member's immediate supervisor (i.e., division director or clerkship director), who can attest to the associated faculty member's contributions to the Department and the College of Medicine
- Teaching evaluations if available
- Letter from the committee of eligible faculty including the vote

- Letter from the chair
- Review and approval by the College of Medicine Office of Faculty Affairs

b. Promotion to Clinical Associate Professor of Practice and Clinical Professor of Practice
(Compensated Associated Faculty)

For compensated associated faculty (paid through OSU, OSUP, or NCH) who are principally focused on patient care, the promotion criteria will be identical to those for the clinical excellence pathway, except that the decision of the Dean is final. For compensated associated faculty (paid through OSU, OSUP, or NCH) who contribute principally through educational activities, the promotion criteria will be identical to those for the clinician educator pathway, except that the decision of the Dean is final.

c. Promotion to Associate Professor and Professor with FTE below 50%.

Promotion criteria for the appropriate track or pathway for a 1.0 FTE applies to faculty with an FTE below 50%.

Promotion to Senior Lecturer. Lecturers may be promoted to senior lecturer if they meet the criteria for appointment at that rank as described in Section IV.A.4.

Promotion of Visiting Faculty. Visiting faculty members are not eligible for promotion.

B. Procedures for Tenure-Track, Clinical, and Research Faculty

The Department's procedures for promotion and tenure and promotion reviews are fully consistent with those set forth in Faculty Rule [3335-6-04](#) and the Office Academic Affairs annually updated procedural guidelines for promotion and tenure reviews found in Chapter 3 of the [Policies and Procedures Handbook](#). The following sections, which state the responsibilities of each party to the review process, apply to all faculty in the Department.

1. Candidate Responsibilities

Candidates for promotion and tenure or promotion are responsible for (1) submitting a complete, accurate dossier, and (2) providing a copy of the APT under which they wish to be reviewed. If external evaluations are required, candidates are responsible for (3) reviewing the list of potential external evaluators compiled for their case according to departmental guidelines.

- **Dossier**

Every candidate must submit a complete and accurate dossier that follows the Office of Academic Affairs [dossier outline](#). Candidates should not sign the Office of Academic Affairs [Candidate Checklist](#) without ascertaining that they have fully met the requirements set forth in the Office of Academic Affairs core dossier outline including, but not limited to, those highlighted on the checklist.

While the Promotion and Tenure Committee makes reasonable efforts to check the dossier for accuracy and completeness, the candidate bears full responsibility for all parts of the dossier that are to be completed by them. Please refer to the [APT Toolbox](#) for a wealth of information on completing a dossier.

It is the responsibility of the Department to evaluate and verify this documentation.

The [time period for teaching documentation](#) to be included in the dossier for probationary faculty is the start date of employment of the faculty at OSU to present. For tenured or non-probationary faculty it is

the date of last promotion or the last five years, whichever is less (and excluding any information that may have been considered for a previous promotion), to present. The department's eligible faculty may allow a candidate to include information prior to the date of last promotion if it believes such information would be relevant to the review. Any such material should be clearly indicated.

The time period for scholarship documentation to be included in the dossier is the entire duration of the faculty's academic career (including doctoral, residency, and post-doctoral training). For faculty being considered for promotion to the rank of Associate Professor, the weight of the review is from the date of the initial faculty appointment (including time on faculty at another institution) to the present. For faculty being considered for promotion to the rank of Professor, the weight of the review is from the date of the dossier submission for the promotion to Associate Professor to present. All scholarship outcomes will be reviewed for increasing independence over time. There should also be an increasing trajectory of significant scholarly outcomes over time for tenure track, clinical scholar, and research tracks.

The time period for service documentation to be included in the dossier for probationary faculty is the start date to present. For tenured or non-probationary faculty it is the date of last promotion to present. The eligible faculty may allow a candidate to include information from before the date of last promotion if it believes such information would be relevant to the review. Where included, the candidate should clearly indicate what material is work completed since the date of the mandatory review, and what material is from prior to the mandatory review.

This department may allow a dossier appendix to augment evidence for teaching, clinical excellence or scientific achievement if the Appointments, Promotion and Tenure Committee feels this information enhances understanding of a candidate's career achievements. This appendix, however, will not be forwarded to the Executive Vice President and Provost for final review.

The complete dossier is forwarded when the review moves beyond the Department. The documentation of teaching is forwarded along with the dossier. The documentation of scholarship and service is for use during the department review only, unless reviewers at the college and university levels specifically request it.

- **Appointments, Promotion, and Tenure (APT) Document**

Candidates must also submit a copy of the APT under which they wish to be reviewed. Candidates may submit the department's current APT document; or, alternatively, they may elect to be reviewed under either (a) the APT document that was in effect on their start date, or (b) the APT document that was in effect on the date of their last promotion (or last reappointment in the case of clinical and research faculty), whichever of these two latter documents is the more recent. However, for tenure track faculty, the current APT document must be used if the letter of offer or last promotion, whichever is more recent, was more than 10 years before April 1 of the review year. The APT document must be submitted when the dossier is submitted to the department.

If a candidate wishes to be reviewed under an APT other than the current approved version available [here](#), a copy of the APT document under which the candidate has elected to be reviewed must be submitted when the dossier is submitted to the department.

- **External Evaluations** (see also External evaluations below)

As noted above, if external evaluations are required, candidates are responsible for reviewing the list of potential external evaluators developed according to departmental guidelines. The candidate may add no more than two additional names (one for clinical excellence and clinician educator), 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.

2. Promotion and Tenure Committee Responsibilities

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

- To review this APT 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 or dossier 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 faculty member may be denied a formal promotion review under Faculty Rule [3335-6-04A\(3\)](#) only once. Faculty Rules [3335-7-08](#) and [3335-7-36](#) make the same provision for non-probationary clinical and research faculty, respectively. 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 their dossier. This meeting is not an occasion to debate the candidate's record.
- Consider the interdisciplinary work of a candidate across multiple units as part of the whole work, especially if the candidate has a joint appointment in another unit or is a member of a Discovery Theme.
- 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.
- Provide a written evaluation and recommendation to the department chair in the case of joint appointees whose tenure-initiating unit is another department. The full eligible faculty does not vote on these cases since the department's recommendation must be provided to the other tenure-initiating unit substantially earlier than the committee begins meeting on this department's cases.

3. 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.
- The Chair of the Promotion and Tenure Committee and the Committee of the Eligible Faculty will be the Vice Chair of Academic Affairs or designee.

4. Department Chair Responsibilities

The responsibilities of the department chair are as follows:

To determine whether a candidate is authorized to work in the United States and whether a candidate now, or in the future, will require sponsorship for an employment visa or immigration status. For tenure-track assistant professors, department chairs are to confirm that candidates are eligible to work in the U.S. Candidates who are not U.S. citizens or nationals, permanent residents, asylees, or refugees will be required to sign an [MOU](#) at the time of promotion with tenure.

- To charge each member of the Eligible Faculty Committee to conduct reviews free of bias and based on criteria.
- **Late Spring Semester:** 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 review faculty with budgeted joint appointments whose primary appointment is in this department. The department chair will seek a letter of evaluation from the TIU head of the joint appointment unit. The input should be in the form of a narrative commenting on faculty duties, responsibilities, and workload; on any additional assignments; and on impact of the work of the individual in the field of the joint unit.
- To make each candidate's dossier available in an accessible place for review by the eligible faculty at least two weeks before the meeting at which specific cases are to be discussed and voted.
- 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.
- Following receipt of the letter of the eligible faculty's completed evaluation and vote, to provide an independent written evaluation and conclusion regarding whether a candidate's dossier meets the criteria for promotion and/or tenure. In the interest of an independent evaluation, the College of Medicine discourages the department chair from attending the committee of eligible of faculty deliberations.
- **Mid-Autumn Semester:** 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. The letter is accompanied by a form that the candidate returns to the department chair, indicating whether or not they expect to submit comments.
- 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.
- To receive the Promotion and Tenure Committee's written evaluation and recommendation of candidates who are joint appointees from other tenure-initiating units, and to forward this material, along with the department chair's independent written evaluation and recommendation, to the head of the other tenure-initiating unit by the date requested.

5. Procedures for Associated Faculty

Associated faculty for whom promotion is a possibility follow the promotion guidelines and procedures detailed in Section VI.B above, with the exception that the review does not proceed to the college level if the department chair's recommendation is negative (a negative recommendation by the department chair is final in such cases), and does not proceed to the executive vice president and provost if the dean's recommendation is negative.

6. External Evaluations

External (to OSU) evaluations are obtained for all promotion and/or tenure reviews in which scholarship must be assessed. These include all tenure-track promotion and tenure or promotion reviews, all research appointment promotion reviews and all clinician educator and clinician scholar pathway promotion 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. In the event that the person(s) suggested by the candidate do not agree to write, neither the Office of Academic Affairs nor this department requires that the dossier contain letters from evaluators suggested by the candidate.

In keeping with the national standing of The Ohio State University, the Department of Emergency Medicine will ask for evaluations from faculty in programs that are nationally recognized in emergency medicine or other specialties related to the candidates area of expertise. Because emergency physicians have a wide range in areas of expertise and multidisciplinary work with expertise varying between departments of emergency medicine and because evaluations are often provided from faculty in departments other than emergency medicine due to the multidisciplinary nature of our faculty's work, it is not appropriate to devise a specific list of institutions or programs from which to obtain evaluations.

A minimum of five credible and useful evaluations must be obtained (three for clinical excellence and clinician educator pathways). 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. For promotions with tenure, all evaluations must be provided by faculty members with tenure at their institution. In the case of an assistant professor seeking promotion to associate professor with tenure, a minority of the evaluations may come from associate professors with tenure.
- 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 (three for clinical excellence and clinician educator pathways) result from the first round of requests.

The department follows the Office of Academic Affairs suggested format for letters requesting external evaluations. A sample letter for tenure-track and research faculty can be found [here](#). A sample letter for clinical faculty can be found [here](#).

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.

VII. PROMOTION AND TENURE AND REAPPOINTMENT APPEALS

Faculty members who believe they have been evaluated improperly for tenure, promotion, or reappointment may appeal a negative decision to the University Senate Committee on Academic Freedom and Responsibility.

Performance that is adequate for annual reappointment may not be adequate for the granting of promotion or tenure with promotion for faculty on the tenure track or, in the case of clinical or research faculty, for securing a reappointment.

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.

VIII. 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 department chair, and may not come from the faculty member themselves. Details of the criteria and procedures for a review in the final year of probation are described in [University Rule 3335-6-05](#).

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 Policies and Procedures Handbook and (4) the Office of Human Resources.

IX. PROCEDURES FOR STUDENT AND PEER EVALUATION OF TEACHING

A. Student Evaluation of Teaching

Medical Student Evaluations: These evaluation forms are designed by the College of Medicine to be both formative and summative, and are anonymous to the faculty member. These evaluations are electronic in nature and the results are collated and transmitted to the Emergency Department chair and the faculty member. The chair's staff medical student liaison will provide this information to the faculty member. A sampled balanced compendium of narrative comments will be included in the dossier prior to external review. The candidate may appeal the inclusion of specific comments but may not affect the balance of negative and positive assessments.

Resident Evaluations: These are to be both formative and summative, and are anonymous to the faculty member. These evaluations are web-based and designed by the departmental GME leadership and the results are collated by the Graduate Medical Education Staff and transmitted to the Emergency Department chair and to the faculty member. A sampled balanced compendium of narrative comments will be included in the dossier prior to external review. The candidate may appeal the inclusion of specific comments but may not affect the balance of negative and positive assessments.

B. Peer Evaluation of Teaching

An evaluation of a faculty member's teaching activity will be made on an annual basis by a member of the Emergency Medicine faculty or by an external reviewer. The faculty member may be evaluated on the basis of classroom instruction (including lectures or simulation), clinical teaching, and/or course materials such as syllabi, examinations and/or instructional materials.

The department chair or designee oversees the department's peer evaluation of teaching process. A minimum of 1 peer evaluation per year is required.

Peer evaluation of teaching may occur in many different venues, as applicable to a faculty member's primary teaching responsibility. The College broadly considers teaching medical students, graduate students, residents and fellows. 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.

At the conclusion of the evaluation, the reviewer submits a written report to the department chair. The candidate may provide written comments on this report and the reviewer may respond if they wish. The reports are included in the candidate's promotion and tenure dossier.

APPENDICES

a. Glossary of Terms

Adjunct Faculty – The titles of adjunct professor, adjunct associate professor, and adjunct assistant professor, and adjunct instructor are used individuals who have credentials comparable to tenure-track, clinical/teaching/practice, or research faculty of equivalent rank, who provide significant, service to the Clinical instructional and/or research programs of the university and who need a faculty title to perform that service. An adjunct appointment is not the same as a

APT – Appointments, Promotion and Tenure

Appointments, Promotion and Tenure Committee – the body of faculty that makes 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 – Associated Faculty include “persons with clinical practice titles, adjunct titles, visiting titles, and lecturer titles; also professors, associate professors, assistant professors, and instructors who serve on appointments totaling less than fifty percent 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 Practice Faculty The titles of clinical professor of practice, clinical associate professor of practice, clinical assistant professor of practice, and clinical instructor of practice shall be used to confer faculty status on individuals who have credentials comparable to Clinical Practice Faculty of equivalent rank and who either provide significant, uncompensated service for which a faculty title is needed or compensated service to the clinical instructional programs in the colleges of the health sciences. Clinical practice appointments are made for the period in which the service is provided.

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

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

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 review dates

Prior Service Credit –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 or Research faculty.

Reappointment Review – the review of a Clinical/Teaching/Professional Practice Faculty member in the penultimate year of their contract to determine if the contract will be renewed.

Clinical Faculty –physicians who primarily engage in clinical teaching and practice.

Research Faculty–basic scientists who engage exclusively in research-based scholarship.

Tenure-track Faculty–basic scientists and physicians with a major focus of 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

TIU – Tenure Initiating Unit, usually synonymous with Department. Centers and Institutes are not Tenure Initiating Units.

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.

b. 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.