Appointments, Promotion, and Tenure Criteria and Procedures for The Ohio State University College of Medicine Department of Pediatrics

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DEPARTMENT OF PEDIATRICS
APPOINTMENTS, PROMOTION AND TENURE DOCUMENT

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1. 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 University Office of Academic Affairs *Procedures and Guidelines Handbook* and other policies and procedures of the College and University to which the Department of Pediatrics and the faculty are subject.

Should those rules and policies change, the Department of Pediatrics will follow the new rules and policies until such time as it can update this document to reflect the changes. 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 of Medicine and the University Office of Academic Affairs before it may be implemented. It sets forth the department's mission and, in the context of that mission and the mission of the College of Medicine and the University, its criteria and procedures for faculty appointments and for faculty promotion, tenure and rewards, including salary increases. In approving this document, the dean of the College of Medicine and University Office of Academic Affairs accepts the mission and criteria of the Department of Pediatrics and delegate to it the responsibility to apply high standards in evaluating current faculty and faculty candidates in relation to the department's mission and criteria.

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 College; and to make negative recommendations when warranted in order to maintain and improve the quality of the faculty.

Decisions considering all appointment, reappointment, and promotion and tenure will be free of discrimination in accordance with the University's policy on equal employment opportunity. *"Ohio State does not discriminate on the basis of age, ancestry, color, disability, ethnicity, gender, gender identity or expression, genetic information, HIV/AIDS status, military status, national origin, pregnancy, race, religion, sex, sexual orientation, or veteran status, or any other bases under the law, in its employment, which includes hiring and selection practices*."

This document describes the procedures by which the department's faculty appointments, reappointments, promotion, and tenure actions are reviewed for approval and defines in qualitative and in some instances quantitative terms the Department of Pediatrics' criteria for promotion for tenure track, clinical, research, and associated faculty.

II. MISSION

The mission of the Department of Pediatrics is to promote excellence in teaching, research, academics, advocacy, and administrative service and to provide the most effective, efficient, and compassionate medical care, promoting equal access to health care.

The Department assures that its Policy on Faculty Duties and Responsibilities, included in its Patterns of Administration, is consistent with this mission and its criteria for appointments, promotion, and tenure, merit salary, and other rewards.

III. VALUES

Shared values are the commitments made by the College's community regarding how work will be conducted. Our values in the College of Medicine include:

- Inclusiveness
- Determination
- Empathy
- Sincerity
- Ownership
- Innovation

We also embrace Nationwide Children's Hospital's values. As One Team we:

- Do the right thing
- Create a safe day every day
- Promote health and well being
- Are agile and innovative
- Get results

The Department of Pediatrics operates on the premise that all faculty and staff have unique talents that contribute to the pursuit of excellence and further our ambition. Faculty, staff, and trainees are expected to set a high example of collegiality in the workplace. They must avoid behaviors that interfere with or adversely affect a community member's ability to learn, carry out research, care for patients or fulfill the individual's professional responsibilities. This interaction may be seen in the creation of our learning environment, research collaborations, co-authorship of publications, team approach to clinical practice including health and wellness, sharing of innovative ideas in committee meetings, community, and industry outreach. Faculty members are expected to offer mentorship within the entire learning community, including mentorship to faculty colleagues.

The Department of Pediatrics support the free exchange of ideas and opinion and expects faculty, staff, and students promote these values and apply them in a professional manner in all academic endeavors and interactions within and representing the College.

All faculty, staff, and trainees should work toward establishing and maintaining a team culture and an enriching and supporting intellectual working and learning environment. The department is committed to evaluating the practice of these core values as part of all performance evaluations.

Policy and program decisions will be made by the Chair, with consultation and discussion with the Vice Chairs, the Division Chief, Center Directors, by the Department as a whole, and with the advice of standing or ad hoc Departmental committees. Departmental decision making seeks to strike a balance between assuring active and meaningful involvement of the faculty in governance and recognizing that the Chair, on behalf of the College of Medicine and Nationwide Children's Hospital, has ultimate responsibility for the Department's administration. Whenever possible, policy and program decisions in the Department will be based on the principle of majority rule.

IV. DEFINITIONS

A. COMMITTEE OF THE ELIGIBLE FACULTY

The Department of Pediatrics Appointments, Promotion and Tenure Committee represents the eligible faculty of the Department of Pediatrics, as approved by the University Office of Academic Affairs, to make recommendations to the chair regarding promotion and tenure cases. The faculty serving on the

Appointments, Promotion, and Tenure Committee for all appointment (hiring), reappointment, promotion, or promotion and tenure reviews must have their tenure home or primary appointment in the Department of Pediatrics. The department chair, the dean and assistant/associate/vice deans of the College of Medicine, 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. Appointments, Promotion and Tenure Committee Leadership

The Vice Chair for Academic Affairs serves as chair of the committee and presides over committee meetings, assigns reviewers, and oversees committee voting. If the Vice-Chair for Academic Affairs is a non-tenure track professor, a tenure track professor will serve as co-chair and share responsibility for committee leadership.

2. Appointments, Promotion and Tenure Committee (APT) Composition

The committee consists of a minimum of 30 rotating faculty members from the clinical faculty and the tenure track. Members must have their tenure home or primary appointment in the department. Members will consist of faculty on both the tenure and clinical faculty at the rank of professor in the Department of Pediatrics, with the majority being on the tenure track. All clinical and tenure track faculty at the rank of professor in the Department of Pediatrics are eligible and may self-nominate or be asked by the committee chair to serve on the committee. Faculty members are appointed for a 3-year period and may serve two consecutive terms. All eligible faculty will review and vote to confirm the members of the committee. For voting purposes, the eligible faculty are (1) all tenured professors, who may vote on any candidate for service on the Appointments, Promotion and Tenure Committee; and (2) all non-probationary clinical professors, who may vote on clinical faculty candidates for service on the Appointments, Promotion and Tenure Committee.

Only tenured professors participate in assessment of eligibility for award of tenure and promotion on the tenure track and in the appointment of tenure-track faculty and research faculty at the rank of associate professor or professor. Tenured professors and non-probationary clinical professors participate in assessment of eligibility for promotion of clinical and associated faculty and in the appointment of clinical and associated faculty at the rank of associate professor or professor. A positive recommendation is secured when a simple majority (greater than 50%) of the votes cast are positive.

3. Conflict of Interest

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

B. Appointment, Promotion, and Tenure Committee (APT) Conflict of Interest:

A conflict of interest exists when a member of the Department's Appointments, Promotion and Tenure Committee is or has 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
- 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

Such faculty members will be expected to withdraw from a search committee or from promotion review of that candidate.

In addition, an individual who has had personal or professional conflicts with the candidate is ineligible to participate in the discussion and vote. It is the responsibility of the Department chair to remove any member of the APT committee from the review of a candidate when the member has a conflict of interest but does not voluntarily withdraw from the review.

4. Minimum Composition

In the event that the Department of Pediatrics does not have at least three faculty members who are eligible to conduct the review, the Department of Pediatrics chair, after consulting with the Vice Dean for Faculty Affairs, will identify an appropriate faculty member from another tenure initiating unit within the college.

B. QUORUM

The quorum required to discuss and vote on all personnel decisions is a simple majority (greater than 50%) of the entire appointment, promotion, and tenure committee not on an approved leave of absence. Those on approved University leave (e.g., medical, business, parental) are not considered for quorum unless they declare, in advance and in writing, their intent to participate in all proceedings for which they are eligible during the leave.

Faculty members who recuse themselves because of a conflict of interest are not counted when determining quorum. Faculty members with a competing scheduling constraint at the scheduled meeting time are not excused absences and do count as members of the eligible faculty.

C. RECOMMENDATION FROM THE APPOINTMENTS, PROMOTION AND TENURE COMMITTEE

1. Appointment

In the SHIFT Framework for faculty recruitment, search committees make their recommendations to the Department Chair.

- A positive recommendation from the APT committee for appointment is secured when a simple majority (greater than 50%) of votes are in the affirmative.
- In the case of a joint appointment, the department chair must seek input from a candidate's joint appointment TIU prior to their appointment.

2. Reappointment, Promotion and Tenure, Promotion

- A positive recommendation from the committee for reappointment, promotion and tenure, and promotion is secured when a simple majority (greater than 50%) of votes are in the affirmative.

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

A. Tenure-track Faculty

Appointment Reviews

Initial Appointment Review. For an appointment (hiring) review of an assistant professor, associate professor, or professor, the eligible faculty on the APT committee consists of all tenure-track faculty. The recommendation to the Department chair is the responsibility of the search committee.

Rank Review. A vote on the appropriateness of the proposed rank must be cast by all tenured faculty on the APT Committee 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 on the APT committee. For the promotion reviews of associate professors, the eligible faculty consists of all tenured professors on the APT committee.

B. Clinical Faculty

Appointment Reviews

Initial Appointment Review. For an appointment (hiring or appointment change from another faculty type) review of an assistant clinical professor; an associate clinical professor; or a clinical professor, the eligible faculty on the APT committee consists of all tenure-track faculty and all clinical faculty. The recommendation to the Department chair is the responsibility of the search committee.

Rank Review. A vote on the appropriateness of the proposed rank must be cast by all tenured faculty on the APT Committee who hold equal or higher rank than the position requested, and all nonprobationary clinical faculty on the APT Committee who hold 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 on the APT committee consists of all tenured associate professors and professors, all nonprobationary associate clinical professors, and all nonprobationary clinical professors.

For the reappointment and promotion reviews of associate clinical professors, and the reappointment reviews of clinical professors, the eligible faculty on the APT Committee consists of all tenured professors and all nonprobationary clinical professors.

C. Research Faculty

Appointment Reviews

Initial Appointment Review. For an appointment (hiring or appointment change from another faculty type) review of a research assistant professor, research associate professor, or research professor, the eligible faculty consists of all tenure-track faculty, all clinical faculty, and all research faculty on the APT Committee. The recommendation to the Department chair is the responsibility of the search committee.

Rank Review. A vote on the appropriateness of the proposed rank must be cast by all tenured faculty on the APT Committee who hold equal or higher rank than the position requested and all nonprobationary research faculty on the APT Committee who hold 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 nonprobationary research associate professors and professors on the APT Committee.

For the reappointment and promotion reviews of research associate professors and the reappointment reviews of research professors, the eligible faculty consists of all tenured professors and all nonprobationary research professors on the APT Committee.

D. Associated Faculty

Initial Appointment and Reappointment
The eligible faculty on the APT Committee for new appointment reviews of associated faculty consists of all tenure-track faculty whose tenure resides in the Department, all clinical faculty whose primary appointment is in the Department, and all research faculty whose primary appointment is in the Department. The recommendation to the Department chair is the responsibility of the search committee.

Initial appointments at senior rank require a vote by the eligible faculty on the APT committee (all tenured faculty, all non-probationary clinical faculty of equal or higher rank than the position requested) and prior approval of the college dean and the university Office of Academic Affairs.

The eligible faculty for reappointment reviews of associated faculty consists of all tenured faculty on the APT Committee at or above the rank for which the candidate is being reviewed and all non-probationary clinical faculty on the APT Committee at or above the rank for which the candidate is being reviewed.

Promotion Reviews
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 III.A.1.

For the promotion reviews of associated clinical faculty, the eligible faculty shall be the same as for clinical faculty as described in Section IIII.A.2 above.

For the promotion of a lecturer to senior lecturer, the eligible faculty shall be all tenure-track and non-probationary clinical faculty at the rank of associate professor and professor.

In all votes taken on personnel matters, only “yes” and “no” votes are counted. Abstentions are

not votes. Faculty members are strongly encouraged to consider whether they are participating fully in the review process when abstaining from a vote on a personnel matter.

Absentee ballots and proxy votes are not permitted but participating fully in discussions and voting via remote two-way electronic connection are allowed.

V. APPOINTMENTS

The *Rules of the University Faculty* permit the Department of Pediatrics and the College of Medicine to make appointments to the: tenure track; clinical faculty; research faculty; and to the associated faculty. The latter includes uncompensated (unpaid) and compensated (paid) associated faculty. The appropriate faculty initial appointment must be aligned with the expectations and responsibilities of the faculty member and be consistent with their short-term and long-term career plans.

The Department of Pediatrics is committed to making only faculty appointments that enhance or have strong potential to enhance the quality of the faculty. Important considerations include an individual's record to date in teaching, scholarship, and service; the potential for professional growth in each of these areas; evidence of activities that foster department, College of Medicine, and University values including inclusivity; and the potential for interacting with colleagues and students in a way that enhances their academic work and attracts other outstanding faculty and students to the department. Offers will only be extended to individuals who engage in behavior consistent with department and College values and not to those individuals who promote a hostile work environment. No offer will be made if the search does not yield one or more candidates who enhance quality of the faculty. 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.

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

A. APPOINTMENT CRITERIA

1. Tenure Track Faculty

The tenure track exists for those faculty members who primarily strive to achieve sustained excellence in the discovery and dissemination of new knowledge, as demonstrated by national and international recognition of their scholarship and successful competition for extramural funding.

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 of Pediatrics. Faculty members who are appointed to the tenure track will receive a sufficient allocation of time, space, and resources to meet the expectations and requirements for tenure track

appointments. The appointment process requires the Department of Pediatrics provide evidence in support of a tenure track faculty appointment to ensure the faculty candidate has clearly and convincingly met or exceeded applicable criteria in teaching, scholarship, and service. [See Section VII. of this document for examples]. Each candidate for appointment undergoes an appropriate review by the Appointments, Promotions and Tenure Committee, as described in this document.

All faculty members have access to all pertinent documents detailing the Department of Pediatrics, College of Medicine, and University promotion and tenure policies and criteria. The most updated documents can be located at the University Office of Academic Affairs website and the Nationwide Children's Hospital intranet site.

Each appointee must obtain the appropriate Ohio licensure and other required certifications if required for successful execution of their faculty responsibilities.

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. Procedures for appointment are identical to those for an assistant professor. The Department of Pediatrics will make every effort to avoid such appointments. Appointments at the rank of instructor are appropriate for individuals who need time to establish a research program and position themselves to begin progress toward tenure. Appointments to this rank may also be made if all 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 will indicate the specific benchmarks and achievements required for promotion to assistant professor.

Procedures for appointment are identical to those for an assistant professor. An appointment at the instructor level is limited to three years. Promotion to assistant professor occurs without review the semester following completion of the required credentialing. An instructor must be approved for promotion to assistant professor by the beginning of the third year of appointment. The appointment cannot be renewed beyond the end of the third year. When an instructor has not met the expectations for moving from instructor 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 Department and College recommend against requesting prior service credit. This request must be approved by the Department's eligible faculty on the Appointment, Promotion, and Tenure Committee, the department chair, the dean of the College of Medicine, and the University Office of Academic Affairs and if approved is irrevocable 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.

Appointment to the rank of instructor requires meeting the following criteria.

- Anticipated receipt of an earned doctorate or other terminal degree in the relevant field of study or possession of equivalent experience. Individuals who have completed all the requirements of their terminal degree, but who have not obtained the

final degree at the time of initial employment will be appointed as an instructor. In addition, appointment at the rank of instructor is appropriate for individuals who, at the time that they join the faculty, do not have the requisite skills or experience to fully assume the full range of responsibilities of an assistant professor. In some instances, a fellow who has completed residency training or a post-doctoral fellow may be appointed as instructor.

- 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.
- No ongoing negative behaviors 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 [see Appendix C]**.**
- In aggregate, accomplishments related to the above criteria should be sufficiently compelling that the appointee is judged to have significant potential to attain tenure and a distinguished record as a faculty member in the Department of Pediatrics and 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 no later than the mandatory review year (6th year of appointment for faculty without significant clinical responsibilities, 11th year of appointment for faculty with significant clinical service responsibilities); however, promotion and tenure may be granted at any time during the probationary period when the faculty member's record of achievement so merits. Similarly, a probationary appointment may be terminated at any time subject to the provision of University Rule 3335-6-08 and the provision of paragraphs (F) and (G) of University Rule 3335-6-03.

Consistent with Faculty Rule, 3335-6-03 faculty members without clinical service responsibilities are reviewed for promotion & tenure no later than the 6th year as to whether promotion and tenure will be granted at the beginning of the 7th year. For individuals not recommended for promotion and tenure after the mandatory review, the 7th year will be the final year of employment. Consistent with Faculty Rule 3335-6-09, faculty members with significant clinical service responsibilities are granted an extended probationary period of up to 11 years, including prior service credit, depending on the pattern of research, teaching, and service workload. An assistant professor with an extended probationary period is reviewed for promotion and tenure no later than the 11th year. For individuals not recommended for promotion and tenure after the mandatory review, the 12th year will be the final year of employment.

For appointments at the rank of assistant professor, prior service credit of up to three years may be granted for work experience at the time of the initial appointment. The granting of prior service credit, which requires approval by the eligible faculty on the Appointment, Promotion, and Tenure Committee, the department chair, the dean of the College of Medicine and the Office of Academic Affairs, may reduce the length of the

probationary period, but is strongly discouraged as it cannot be revoked once granted except through an approved request to extend the probationary period.

Appointment to the rank of assistant professor requires meeting the following criteria.

- An earned doctorate or other terminal degree in the relevant field of study or possession of equivalent experience. This is the minimum requirement for appointment at the rank of assistant professor.
- 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 or leadership within a productive research program as well as a strong likelihood of independent extramural research funding or extramural funding through team science work.
- 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 [see Appendix C]**.**
- 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

Appointments at the rank of associate professor, with or without tenure, and offers of prior service credit, require prior approval of the University Office of Academic Affairs. Criteria for appointment to the rank of associate professor with tenure are identical to the criteria for promotion to associate professor with tenure, as detailed in Section VII of this document.

In general, appointments at higher rank do not entail a probationary period unless there are compelling reasons not to offer 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 or has taught only in a foreign country. 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.

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 appointments to the rank of associate professor on the tenure-track typically include tenure, a probationary period can be granted after petition to the University Office of Academic Affairs. The Department will exercise care in making these appointments and provide the metrics that must be achieved to be awarded tenure. For faculty without significant clinical service responsibilities the probationary period may not exceed four years. For faculty with significant clinical service responsibility, the probationary period may not exceed six years. Requests for such appointments require the approval of the Dean of the College of Medicine, and the Executive Vice President and Provost.

An appointment to the rank of associate professor in advance of tenure is probationary.

During a probationary period, a faculty member does not have tenure and is considered for reappointment annually. Criteria for appointment to the rank of associate professor in advance of tenure are identical to the criteria for promotion to associate professor in advance of tenure, as detailed in Section VII of this document.

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

e. Appointment: Professor with Tenure on the Tenure Track
Appointment offers at the rank of professor require prior approval of the University Office of Academic Affairs. Criteria for initial appointment to the rank of professor with tenure are identical to the Department of Pediatrics and College of Medicine's criteria for promotion to professor with tenure, as detailed in Section VII of this document.

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

In the Department of Pediatrics, clinical faculty are equivalent in importance to tenure track faculty. Clinical faculty pathways exist for those whose principal career focus is outstanding teaching, clinical, translational, population health, educational, or quality improvement/implementation science research, and delivery of exemplary clinical service. Clinical faculty members will generally not have sufficient time to meet the scholarship requirements of the tenure track within a defined probationary period. For this reason, the nature of scholarship for the clinical faculty differs from the tenure track and may be focused on a mixture of academic pursuits including the scholarship of practice, integration, clinical informatics, community engagement, advocacy and education, and discovery of new knowledge. Faculty members appointed to the clinical faculty may choose to distinguish themselves in patient care, teaching, innovative educational program development, or research (scholarship). Faculty members appointed to the clinical faculty may choose to distinguish themselves by accomplishment through Clinician Educator, Clinician Scholar, and Clinical Excellence Pathways. Clinical faculty members are not eligible for tenure and may not participate in promotion and tenure matters of tenure track faculty.

Faculty on the Clinician Educator Pathway focus on education and teaching and may distinguish themselves by a record of educating trainees at various levels, along with colleagues and peers. Faculty on the Clinician Educator Pathway may also participate in academic work in areas such as (but not limited to) basic science, clinical research, translational science, population health, quality improvement, or advocacy.

Faculty on the Clinician Scholar Pathway have an academic focus in areas such as basic science, translational science, clinical research, health services research, public health care policy, or outcomes and comparative effectiveness research. Faculty on this pathway may participate in teaching and education although those areas will not be the primary focus for promotion metrics.

The Clinical Excellence Pathway exists for faculty members who focus on exemplary clinical care, unique areas of emphasis in patient management, or clinical program development or improvement. These faculty members may serve as preferred providers developing a regional or national reputation for clinical service expertise. Faculty members on this pathway typically devote 80-90% or more of their effort to patient care or administrative service.

All appointments of faculty members to the clinical faculty are made in accordance with Chapter 7 of the *Rules for University Faculty* 3335-7. Each new appointment must enhance, or have strong potential to enhance, the quality of the Department of Pediatrics, and the mission and values of the Department, College of Medicine and University. All faculty members have access to all pertinent documents detailing Department of Pediatrics, College of Medicine, and University promotion and tenure policies and criteria. The most updated documents can be located at the University Office of Academic Affairs website and the Nationwide Children's Hospital intranet.

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, and 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.

Furthermore, each appointee must obtain the appropriate Ohio licensure and other required certifications, including medical staff privileges, if required for successful execution of their faculty responsibilities.

The Patterns of Administration of the Department of Pediatrics describes the governance rights to be extended to its clinical faculty.

The following paragraphs outline the basic criteria for initial appointments to the clinical faculty.

a. Appointment: Instructor on the Clinical Faculty

Appointment to the rank of instructor is made if all the criteria for the position of assistant professor have been met with the exception that the candidate will not have completed the terminal degree, or other relevant training, at the time of the appointment.

When an individual is appointed as an instructor, the letter of offer will indicate the specific benchmarks and accomplishments that will be necessary for promotion to assistant professor.

Instructor appointments are limited to three years, with the third year being the terminal year. When an instructor meets the criteria for promotion to assistant professor on the clinical faculty, a new letter of offer with a probationary period of five years will be issued.

In the event the instructor has not completed requirements for promotion to the rank of assistant professor by the end of the penultimate year of the three-year contract period, a new contract will not be considered even if performance is otherwise adequate and the position itself will continue.

Candidates for appointment to the rank of instructor on the clinical faculty will have, at a minimum, met the following criteria.

- Anticipated receipt of an earned doctorate or other terminal degree in the relevant field of study or anticipated completion of clinical residency and/or fellowship.
- Evidence of potential for contributions to scholarship, education, or patient care.
- Post-doctoral clinical training where appropriate.
- 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 C]**.**
- No ongoing negative behaviors such as discrimination, bullying, harassment, retaliation, or promotion of other hostile work conditions.

b. Appointment: Assistant Professor on the Clinical Faculty

Candidates for appointment at this rank are expected to have earned a doctorate or appropriate terminal degree, to have completed all relevant training, including residency and fellowship where appropriate, consistent with the existing or proposed clinical or educational program goals of the Department of Pediatrics. Assistant professor is the appropriate level for initial appointment of persons holding the appropriate terminal degree and the relevant clinical training.

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

Candidates for appointment to the rank of assistant professor on the clinical faculty will have at a minimum the following criteria:

- 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 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 [see Appendix C]**.**
- No ongoing negative behaviors such as discrimination, bullying, harassment, retaliation, or promotion of other hostile work conditions.

c. Appointment: Associate Professor on the Clinical Faculty

The criteria for initial appointment at the rank of associate professor to the clinical faculty are identical to those criteria for promotion to this rank as outlined in Section VII of this document.

d. Appointment: Professor on the Clinical Faculty

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

3. Research Faculty

Research faculty appointments exist for individuals who focus primarily on research. These appointments are intended for individuals who will have faculty level responsibilities in the research mission, comparable to the level of a co-investigator. 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.

Appointments to the Research faculty are made in accordance with Chapter 7 of the *Rules of the University Faculty* 3335-7. Each new appointment must enhance, or have strong potential to enhance, the quality of the Department. Unless otherwise authorized by a majority vote of the tenure track faculty, research faculty may comprise no more than twenty percent of the number of tenure track faculty in the Department of Pediatrics. 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.

Tenure is not granted to research faculty.

Contracts are 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 generally be derived from extramural funds. While salary support for research faculty may not come from dollars provided to the departments from the College, departments may choose to provide funding from individual departmental faculty research funds, start-up funds, Department Chair package and/or Research Institute 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 regarding reappointment 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. If 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 The Ohio State University committees and task forces but not on 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 School Handbook.

a. Appointment: Assistant Professor on the Research faculty

Criteria for appointment at the rank of assistant professor on the research faculty are as follows:

- Earned doctorate or other terminal degree in the relevant field of study, or possession of equivalent experience.
- Completion of sufficient research training to provide the basis for specific expertise for contributing to the research mission.
- An initial record of scholarship that indicates effective collaboration and contribution to peer-reviewed research, reflected by co-authorship of peer-reviewed publications, participation in team science initiatives, or funded effort on

peer-reviewed grants that strongly indicate the ability to sustain an independent, externally funded research program.

- 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 [see Appendix C]**.**
- Strong potential for career progression and advancement through the faculty ranks.

b. Appointment: Associate Professor on the Research faculty

The criteria for initial appointment to the rank of associate professor on the research faculty are identical to those criteria for promotion to this rank as outlined in Section VII of this document.

c. Appointment: Professor on the Research faculty

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

4. Associated Faculty

Associated Faculty, 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." Persons with a tenure-track faculty title on an appointment of less than 50% FTE are associated faculty. 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 may be as short as a few weeks to assist with a focused project, a semester to teach one or more courses, or for up to three years when a longer contract is useful for long-term planning and retention. Associated faculty may be reappointed. The below titles are used for associated faculty in the Department and the College of Medicine.

a. Adjunct Assistant Professor, Adjunct Associate Professor, Adjunct Professor.

Adjunct appointments are **uncompensated** and are given to individuals who volunteer academic service to the Department of Pediatrics 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. The adjunct faculty rank is determined by applying the criteria for appointment of tenure-track, clinical, or research faculty, as appropriate to the appointment. Adjunct faculty members are eligible for promotion, but not tenure and the relevant criteria are those for promotion of tenure-track, clinical, or research faculty, as appropriate to the appointment.

b. 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 of Pediatrics, for which a faculty title is appropriate. Compensated appointments are given to full time clinicians who are not appointed to the tenure track or clinical faculty.

This category of associated faculty will have a paid appointment at The Ohio State University, Ohio State Physicians, Inc., or the Pediatric Academic Association and requires a faculty appointment (e.g., for clinical credentialing or teaching a course). They may have another paid appointment at The Ohio State University, but their faculty appointment can be unpaid. This may be appropriate to use for faculty appointments that are expected to be less than three years or for faculty who are paid through The Ohio State University, Ohio State Physicians, Inc. or the Pediatric Academic Association but are 100% deployed in the community.

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. **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. Exceptions to the graduate degree requirement need to be approved by the university Office of Academic Affairs and will require, at minimum, a bachelor's degree, demonstration of appropriate professional credentials for the subject matter to be taught, or years of industry or professional experience in the field. 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 cannot exceed one year. Second and subsequent contracts for lecturers cannot exceed three years.

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

e. **Tenure Track Assistant Professor, Associate Professor, and Professor with FTE below 50%.** An earned terminal degree is the minimum requirement for appointment of tenure-track titles at 49% FTE or below. 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.

f. **Visiting Instructor, Visiting Assistant Professor, Visiting Associate Professor, Visiting Professor.** Visiting faculty appointments may either be compensated or not compensated. Faculty members on temporary leave from another academic institution are appointed as a visiting faculty at the same rank held in that other institution. 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. Visiting faculty appointments may be renewed annually for only three consecutive years.

g. Returning Retiree – Faculty who have retired from the University and return in any paid appointment at the University are considered associated faculty. Approvals are only for one year and must cover their salary and associated costs. All re-employed retiree faculty appointments must be approved by the Department Chair, Dean, and University Office of Academic Affairs. Re-employment 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).

At a minimum, all candidates for associated faculty appointments must meet the following criteria:

- Associated clinical faculty with clinical responsibilities must be a licensed physician or health care provider if required for successful execution of their faculty responsibilities.
- Associated faculty must have significant and meaningful interaction in at least one of the following mission areas of the College of Medicine.
- Teaching medical students, residents, clinical fellows, undergraduate and graduate students, and postdoctoral 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.
- These faculty members may collaborate with a Department of Pediatrics, College of Medicine, or The Ohio State University research project or others scholarly activity.
- Service to the Department of Pediatrics or the College of Medicine, including participation in committees or other leadership activities.
- 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 [see Appendix C].

h. Appointment: Associated Faculty at Advanced Rank

Associated faculty may be compensated or uncompensated and typically provide service to the College in the areas of research, clinical care, or education. For compensated 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 compensated 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 Pathway.

5. Emeritus Faculty

Emeritus faculty status is an honor given in recognition of sustained academic contributions to the University as described in Faculty Rule 3335-5-36. Full-time tenure track, clinical, research, or 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 chair of the Department of Pediatrics outlining their academic performance and citizenship. The chair will decide upon the request, and if appropriate submit it to the dean. If the faculty member requesting emeritus status has in the ten 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.

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

6. **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) (see Faculty Appointments Policy, Section 1.B) 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.

7. Courtesy Appointments

A non-salaried appointment for a The Ohio State University faculty member from another department is considered a courtesy (0% FTE) appointment. An individual with an appointment in the Department of Pediatrics may request a courtesy appointment in another department when that faculty member's scholarly and academic activity overlaps significantly with the discipline represented by the second unit. Such appointments must be made in the same faculty rank/track, using the same title, as that offered in the Department of Pediatrics. Courtesy appointments are warranted only if they are accompanied by substantial involvement in the academic and scholarly work of the Department of Pediatrics. Staff are not eligible for courtesy faculty appointments.

B. APPOINTMENT PROCEDURES

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.

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, TIU heads, 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 Faculty Appointments, Faculty Workload, Tenure, and Retrenchment policy for information on the following topics:

- Recruitment of tenure track, clinical, 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
- Letter of offer

Any faculty appointment forwarded from the Department of Pediatrics for approval by the College of Medicine must have been made consistent with this Appointments, Promotion and Tenure document, and other relevant policies, procedures, practices, and standards established by: the College of Medicine; the *Rules of the University Faculty*; the University Office of Academic Affairs, including the University Office of Academic Affairs Procedures and Guidelines Handbook, and 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 for review and approval. The draft letter of offer will be reviewed for consistency with the essential components required by the University Office of Academic Affairs Procedures and Guidelines 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 complete pool of highly qualified candidates for all tenure track positions. This includes all external candidates for all faculty positions. The only exception is for dual career partners, as described in Chapter 5, section 4.1 of the *Procedures and Guidelines Handbook*. Exceptions to this policy must be approved by the College of Medicine and the University Office of Academic Affairs in advance. The search must include faculty input sufficient to reflect the perspective of all those who will collaborate and share the work environment with the candidate and be consistent with the OAA Policy on Faculty Recruitment and Selection.

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

If the offer involves appointment at senior rank (associate professor or above), solicitation of external letters of evaluation is required and must follow the same guidelines as for promotion reviews. The Appointments, Promotions and Tenure Committee representing the eligible faculty must also vote on the appointment. If the offer letter provides for prior service credit towards the award of tenure, the eligible faculty members on the Appointments, Promotion and Tenure Committee vote on the appropriateness of such credit. Appointment offers at the rank of associate professor with or

without tenure, professor with tenure, and/or offers of prior service credit require prior approval of the University 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 of Chair.

The department is advised to 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 in the clinical faculty will follow the same procedures as those utilized for the tenure-track faculty, except that the candidate is not required to give a presentation. A national search is required to ensure a complete pool of highly qualified candidates. As above, faculty appointed to this appointment type should evidence a career consistent with the values of the College and aligned with its cultures.

3. Research Faculty

Searches for initial appointments in the research faculty will follow the same procedures as those used for tenure track faculty. As for candidates for appointment to the tenure-track faculty, it is recommended that research faculty candidates make a presentation to learners and faculty regarding their scholarship. A national search is required to ensure a robust pool of highly qualified candidates for all research faculty positions. As above, faculty appointed to this track should evidence a career consistent with the values of the college and aligned with its cultures.

4. Transfers: Tracks and Tenure Initiating Units

Transfers between faculty categories are permitted only under the strict guidelines detailed in the paragraphs below according to University Rules 3335-7-09 and 3335-7-10 and the *Procedures and Guidelines Handbook*. transfer to a different appointment type should be motivated by a clear change in a faculty member's career orientation and goals. An engaged, committed, and productive faculty should be the goal of all appointments.

a. Transfer: Tenure Track to Clinical Faculty

If faculty members' activities become more aligned with the criteria for appointment to the clinical faculty, they may request a transfer. A transfer request must be approved by the Department Chair, the dean of the College of Medicine, and Executive Vice President and Provost. The first appointment to the new clinical faculty is probationary. Tenure, or the possibility thereof, is revoked.

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. The letter requesting transfer from the tenure track must explicitly acknowledge the loss of tenure eligibility or the revocation of tenure.

The new letter of offer must outline a new set of expectations for the faculty member aligned with the new responsibilities.

b. Transfer: Tenure Track to Research Faculty

If faculty members wish to engage exclusively in research, without the multiple demands

required of the tenure track, they may request a transfer. A transfer request must be approved by the Department Chair, the dean of the College of Medicine, and the Executive Vice President and Provost. The first appointment to the new research faculty is probationary; and tenure, or the possibility thereof, is revoked.

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. The letter requesting transfer from the tenure track must explicitly acknowledge the loss of tenure eligibility or the revocation of tenure.

The new letter of offer must outline a new set of expectations for the faculty member aligned with the new responsibilities.

c. Transfer: Clinical, or Research, Associated to Tenure Track

Transfer from the clinical, research, or associated faculty to the tenure track is not permitted, but clinical, research, and associated faculty are eligible to apply for tenure track positions through a competitive national search.

The new letter of offer must outline a new set of expectations for the faculty member aligned with the new responsibilities.

Transfers across the clinical, research, and associated faculty are permitted. Such transfers must follow the process delineated in Chapter 5, Section 4 of the OAA *Procedures and Guidelines Handbook*

d. Transfer: Tenure Initiating Unit (TIU Transfer)

Following consultation with relevant TIU chairs and College dean(s), a faculty member may voluntarily move from one TIU to another upon approval of a simple majority of eligible faculty in the receiving TIU (e.g., if an associate clinical professor is transferring, the eligible faculty would be all tenured associate professors and professors and all non-probationary associate clinical professors and clinical professors).

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. 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.

5. Associated Faculty

The appointment of compensated associated faculty members follows a formal search following the SHIFT Framework, which includes a job posting in Workday and candidate interviews. The appointment is then decided by the Department Chair based on recommendation from the search committee.

If an offer involves senior rank (e.g., senior lecturer), the eligible faculty members on the Appointments, Promotions and Tenure Committee vote on the appropriateness of the proposed rank. They then make a recommendation on the appropriateness of the proposed rank to the Department Chair.

The reappointment of all compensated associated faculty members is decided by the Department Chair in consultation with the Appointment, Promotion, and Tenure Committee.

Compensated associated appointments are generally made for a period of one to three years.

Appointments to an unpaid associated faculty position require no formal search process.

Appointment and reappointment of uncompensated adjunct or visiting faculty may be proposed by any faculty member in the department and are decided by the Department Chair in consultation with the Pediatric Vice Chairs including the Vice Chair for Faculty Affairs.

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

6. **Joint Appointments**

The Department of Pediatrics may propose a joint appointment for a faculty member from another Ohio State University TIU as described in Section IV.A (7). These appointments must be approved by the Department of Pediatrics Appointments, Promotion and Tenure Committee and will be reviewed every three years for renewal.

Approval of the joint appointment by University Office of Academic Affairs is dependent on the establishment of mutually agreed upon arrangements between the administrators of the affected TIUs, including the department chairs, College dean(s), and the faculty member. An MOU (see Faculty Appointments Policy, Section 1.B) signed by all parties, including University Office of Academic Affairs, must describe in detail the arrangements of the joint appointment. Administrative approval will be dependent on whether satisfactory fiscal arrangements for the change have been made.

7. Courtesy Appointments

Any Department of Pediatrics faculty member may propose a 0% FTE (courtesy) appointment for a faculty member (tenure-track, clinical, research, or associated) from another Ohio State University tenure initiating unit. A proposal that justifies the uncompensated academic service must be approved by the chair in consultation with the faculty member. If the proposal is approved by the eligible faculty on the APT committee, the Department Chair extends an offer of appointment. The Department Chair 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.

VI. ANNUAL PERFORMANCE REVIEW PROCEDURES

The Department follows the requirements for the annual performance review as set forth in the policy on Faculty Annual Review, Post Tenure Review, and Reappointment, which stipulates that such reviews must include a scheduled 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, the purposes of the review are to:

- Monitor and support progress toward tenure, promotion, reappointment, and ongoing outcomes;
- Be comprehensive and include standardized, objective, and measurable performance metrics;
- Assist faculty in improving professional productivity through candid and constructive feedback and through the establishment of professional development plans;
- Establish the goals against which a faculty member's performance will be assessed in the foreseeable future; and
- Document faculty performance in the achievement of stated goals in order to determine salary increases and other resource allocations, progress toward promotion, and, in the event of poor performance, 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.

The annual performance review of a faculty member is the responsibility of the chair of the Department of Pediatrics or the chair's designees, typically the division chief or vice chair. The designee or a subcommittee of the Appointments, Promotion, and Tenure Committee may provide a written assessment to the Department Chair. The Department Chair or designee must 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 designee must be provided to all other faculty.

This must be a thorough review that accurately reflects the faculty member's performance in the previous year. If a designee conducts the annual review, the Chair will receive a copy of the annual review. Faculty annual performance and merit reviews cover the period from July 1 to June 30 and are due to the College of Medicine Office of Faculty Affairs by September 1 each year.

In all cases, accountability for the annual review process resides with the Department Chair.

- The review must include the Department's and College of Medicine's expectation for collegiality. Faculty are expected to set a high example of collegiality in the workplace.
- Meritorious performance in teaching, scholarship, and service is assessed in accordance with the same criteria that form the basis for promotion decisions.
- The written annual review must include the faculty member's projected work effort distribution for the next year, be compliant with the university's Faculty Workload Standards and Guidelines, and specify and justify any change in distribution from the year prior.
- Per Faculty Rule 3335-3-35, the Department Chair is required to include a reminder in annual review letters that all faculty have the right according to 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. Per the Policy on Faculty Annual Review, Post-Tenure-Review, and Reappointment, the Department Chair must also describe the appeal procedure if the faculty member disagrees with the annual review.

- For faculty with joint appointments, the TIU heads or designees of the joint appointment units are responsible for completing the annual review. The TIU heads or designees of the joint appointment units must co-author the written evaluation.

As noted above, the Department of Pediatrics follows the requirements for annual performance and merit reviews as set forth in the Policy on Faculty Annual Review, Post Tenure Review, and Reappointment. This review is consistent with the Department's Appointments, Promotion and Tenure document and other relevant policies, procedures, practices, and standards established by: (1) the College of Medicine, (2) the Faculty Rules, (3) the Office of Academic Affairs, and (4) the Office of Human Resources.

The Dean of the College of Medicine must assess an annual performance and merit review when the Department of Pediatrics has submitted (1) a Report of Non-Renewal of Probationary Appointment of Faculty; (2) the fourth-year review of a probationary 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. DOCUMENTATION

For their annual performance, compensated faculty members must submit the following documents to the Chair of the Department of Pediatrics, or a designee, no later than July 30:

- Office of Academic Affairs core dossier outline (*required for assistant and associate professors*) or updated documentation of performance and accomplishments (*professors*)
- Most updated NCH CV, teaching evaluations, and self-evaluation in RPT (Interfolio) prior to the in-person meeting with the chair of the Department of Pediatrics, or a designee (*all faculty)*
- If applicable, faculty may submit peer reviews in RPT to review prior to the annual review meeting

Other documentation for the annual performance review will be the same as that for consideration for promotion and/or tenure. That documentation is described in Section VII of this document.

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.

B. REVIEW CRITERIA

An annual review is based on expected performance in any area of work for which the faculty member is assigned 5% or greater workload, including (as applicable) teaching, research, service, clinical care, administration, and any other categories set by the Department Chair and/or articulated in this APT document. Student evaluations must account for at least 25% of the teaching component where applicable. Faculty will be reviewed using the following criteria:

Clinical care
COM faculty with clinical responsibilities (e.g., tenure-track, clinical, and associated faculty) engage in patient care. This includes patient care in university and university-affiliated hospitals,

outpatient facilities and other settings. The scope and nature of clinical workload vary based on the type of faculty appointment and faculty members' workload with respect to teaching, research, and service.

For clinical and associated faculty, patient care workload and responsibilities are established in their letters of offer and expectations are discussed at every annual review.

Assessment in clinical care will consider quantitative and qualitative metrics modified as appropriate by the factors/general principles listed above. In particular, clinical metrics will be interpreted with consideration for clinical expectations, division medians, national medians, years of clinical experience, years at NCH, and presence of an adequate number of data points to draw valid conclusions.

Quantitative metrics include but are not limited to completion of expected clinical time (sessions, shifts, or hours), patient satisfaction scores, adequacy and timeliness of documentation, and performance on annual quality metrics.

Qualitative considerations include, but are not limited to professionalism, team leadership/collaboration, clinical awards, exceptional patient accolades, development/management of clinical programs, and participation in or leadership of clinical quality improvement programs.

Teaching

Classroom Teaching:

COM faculty classroom-based teaching includes but is not limited to:

- Teaching assigned courses for credit
- Revising materials for an existing course or developing materials for a new course
- Advising (e.g., meeting with students) and grading
- Chairing or serving on committees for student theses and dissertations
- Supervising and mentoring student, fellow, and post-doctoral scholar research projects, independent studies, practical experiences, and other academic activities
- Academic advising for students
- Mentoring, including mentoring for individual training, career development, and other awards
- Other activities that support the success of students, trainees, and faculty (e.g., individual longitudinal career mentoring, coaching, etc.)

Some COM faculty also have administrative educational roles that involve or include classroom-based teaching. These efforts must also be considered in the teaching workload. Examples of such administrative educational roles include, but are not limited to:

- Residency or fellowship program director
- Research center or institute education director
- Vice chairs and/or associate chairs for education
- Course directors (i.e., Parts I-IV of the medical student curriculum)
- Admissions directors
- Directors of unit undergraduate or graduate programs
- Directors of institutional research training awards
- Leadership roles in COM educational units (e.g., Biomedical Sciences Graduate Program, Doctor of Medicine Program)
- Other administrative educational roles that support learners

Clinical-Based Teaching

Clinical teaching occurs when faculty with clinical responsibilities (e.g., tenure track, clinical, and

associated faculty) teach, precept, supervise, or evaluate learners in the clinical setting. This includes medical students, residents, fellows, and other health sciences students/trainees. In general, clinical teaching can constitute approximately 10%-40% of a faculty member's *clinical workload*. However, the workload for clinical teaching for COM faculty with clinical responsibilities will vary based on the type of faculty appointment and nature and scope of their clinical responsibilities.

Research-Based Teaching:
Research-based teaching for faculty engaged in research occurs when faculty teach and mentor learners during research activities. This includes undergraduate students, graduate students, medical students, post-doctoral scholars, and other learners. For example, many faculty engaged in research serve as the Principal Investigator of a research laboratory or lead a research center where they teach and mentor learners in the context of research. In general, research-based teaching can constitute approximately 10%-30% of a faculty member's *research workload*. However, the workload for research-based teaching for COM faculty engaged in research will vary based on the type of faculty appointment and the nature and scope of their research responsibilities.

Quantitative metrics include but are not limited to teaching scores from fellows, residents and medical students, completion rate of fellow, resident, and medical student evaluations assigned to the faculty member, completion of faculty peer evaluations, participation in trainee committees such as program review committees, scholarly oversight committees, and clinical competency committees as well as involvement in medical student, resident or fellow interviews.

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

Scholarship
The COM broadly defines scholarship (i.e., research) as the discovery and dissemination of new knowledge. COM faculty engage in research ranging from basic science to clinical and translational research, scholarship of education, and other areas relevant to the mission of the COM and/or the Department. Research includes but is not limited to leading or collaborating on research studies, disseminating research findings (e.g., publishing peer-reviewed articles, presenting research at meetings and conferences, invited research presentations), preparing and submitting applications for research funding from federal, private, industry, institutional, and other sources, leading research laboratories and teams, directing research activities at research institutes and centers, developing intellectual property, and other activities.

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 factors such as faculty track, pathway, time in rank, and time at OSU.

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)

Service/Administration
Faculty may engage in service to the Department, the COM, the university, their research and/or clinical disciplines, and the broader community. Examples of faculty service to the Department, the COM, and the university include but are not limited to committees, working groups, and task forces that advance the academic mission of these respective groups. Examples of faculty service to their research and/or clinical disciplines include service to academic and professional societies (e.g., leadership roles, committees), peer review activities (e.g., for journals, grant applications, fellowship applications), advisory roles for government agencies and clinical organizations, and other service activities. Additional examples of relevant faculty service activities are captured above in the Department's criteria and examples of evidence for promotion.

COM faculty members also take on administrative workload and leadership responsibilities that constitute service. These include but are not limited to:

- Roles such as Department Chair, Vice Chair, and Associate Chair
- Division roles, such as Division Director, Division Chief, and Section Chief
- COM roles, such as Vice Dean, Associate Dean, and Assistant Dean
- Program Director
- Center/Institute Director

Typically, assumption of such administrative responsibilities requires commensurate reduction of expectations for teaching, clinical care, research, and/or other service based on the nature and scope of administrative responsibilities and appointment type.

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.

In assessing the above areas, the reviewer(s) should distill the major accomplishments in these areas, address any opportunities for improvement, summarize goals and strategies, and provide focused action steps to meet future goals and expectations, including for promotion and/or reappointment.

C. EVALUATION SCALE

The following scale will be used in each area to measure achievements. A summative evaluation will also be given. The expected standard for faculty performance in each area in which they are evaluated is "Meets Expectations."

- *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.
2. Serves as a role model of behaviors consistent with the department's mission and values.

- *Meets Expectations:*
    1. Consistently delivers adequate to strong results in role expectations, department mean/median and/or national mean/median metrics that contribute meaningfully to the organizational/department/unit goals.
    2. Regularly displays behaviors consistent with the department's values contributing positively to the department's culture.

- *Performing*
    1. Successfully meeting some role expectations, department mean/median and/or national mean/median metrics, with potential for continued growth and development.
    2. May require increased focus on relational and communication skills to align with the department's values and culture.

- *Does Not Meet Expectations:*
    1. Meets few or none of the expected results based on role expectations, department mean/median, and/or national mean/median metrics.
    2. Does not demonstrate behaviors that reflect the department's values.

- *Not Applicable:*
    1. 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.

1. Faculty rank and time in rank
2. Faculty track (and pathway, if applicable)
3. Faculty time at OSU
4. FMLA, pregnancy, and lactation
5. Expected scope, effort, and funding of a faculty member's duties in a particular area
6. Leadership in each category consistent with faculty member's rank and track/pathway is particularly valued
7. 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.
8. 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

The Dean of the College of Medicine must assess an annual performance and merit review when the Department of Pediatrics has submitted (1) a Report of Non-Renewal of Probationary Appointment of Faculty; (2) the fourth-year review of a probationary 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.

D. PROBATIONARY TENURE TRACK FACULTY

Every probationary tenure track faculty member is reviewed annually by the Department Chair or their designee (see Section VI above), who meets with the faculty member to discuss their performance, future plans, and goals; and prepares a written annual review using the OAA Annual Review Template that includes a determination of whether the faculty member at minimum exceeds expectations, meets expectations, or does not meet expectations, as well as a recommendation on whether to renew the probationary appointment.

If the Department Chair recommends renewal of the appointment, this recommendation is final. The annual review letter to the faculty member renews the probationary appointment for another year and includes content on future plans and goals. The faculty member may provide written comments on the review. The review letter along with any faculty member's comments is forwarded to the Dean of the College of Medicine. The faculty member has the ability to appeal any of the rating decisions of the Department Chair or designee to the Dean, and then to the Executive Vice President and Provost. Upon full review of the written annual review, it, as well as any comments, appeals, and responses become part of the cumulative dossier for promotion and tenure.

If the Department Chair recommends nonrenewal, the Fourth-Year Review process according to Faculty Rule 3335-6-03) is invoked. Following completion of the comments process, the complete dossier is forwarded to the College of Medicine for review, and the dean of the College of Medicine makes the final decision on renewal or nonrenewal of the probationary appointment.

1. Fourth Year Review

Each tenure-track faculty member in the fourth year of probationary service must undergo a mandatory review utilizing the same process as the mandatory review for tenure and promotion with two exceptions: external letters of evaluation will not be required, and the Dean of the College of Medicine, 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. Review by the College of Medicine Promotion and Tenure Committee is not mandatory when both the Department Chair and the Dean approval the renewal of the appointment.

A separate annual review must also be completed following the procedures outlined in the Faculty Annual Review, Post-Tenure-Review, and Reappointment policy.

External evaluations are solicited only when either the Department Chair or the Department of Pediatrics' Appointments, Promotion and Tenure Committee determine 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.

The Appointments, Promotion and Tenure Committee conducts a review of the candidate. On completion of the review, the committee votes by written ballot or electronic ballet on whether to renew the probationary appointment.

The Appointments, Promotion and Tenure Committee 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 departmental 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.

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, as described below. Additional procedures and guidelines can be found in the University Office of Academic Affairs *Procedures and Guidelines Handbook*. 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 or a fourth- or eighth-year review process.

E. ANNUAL REVIEW PROCEDURES: TENURED FACULTY

Annual review of tenured associate professors and professors may be conducted by the Department Chair or a designee who submits a written performance review to the Department Chair along with comments on the faculty progress toward promotion, if applicable. A subcommittee of the Appointments, Promotion and Tenure Committee may provide a written review if asked by the Department Chair or appropriate designee. Accountability for the annual review process resides with the Department Chair.

Associate professors are reviewed annually in a face-to-face meeting by the Department Chair or designee, who prepares a written annual review using the OAA Annual Review Template that includes a determination of whether the faculty member at minimum exceeds expectations, meets expectations, or does not meet expectations in any area of work with 5% or greater workload allocation. The faculty member may provide written comments on the review and has the opportunity to appeal ratings to the dean and/or executive vice president and provost.

Professors are also reviewed annually by the Department Chair or their designee, in a face-to-face meeting to discuss their performance, collegiality, and future plans and goals. The Department Chair or designee will prepare a written annual review using the OAA Annual Review Template that includes a determination of whether the faculty member at minimum exceeds expectations, meets expectations, or does not meet expectations in any area of work with 5% or greater workload allocation. The faculty member may provide written comments on the review and has the opportunity to appeal ratings to the dean and/or executive vice president and provost. The annual review of professors is based on their having achieved sustained excellence and ongoing outcomes in the discovery and dissemination of new knowledge relevant to the mission of the Department of Pediatrics as demonstrated by ongoing national and international recognition of

their scholarship, ongoing excellence in teaching, mentoring students or junior faculty, and ongoing outstanding service to the Department of Pediatrics, the College of Medicine, The Ohio State University, the community and the profession.

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 that has 5% or greater workload assigned, the impact of that role and other assignments will be considered in the annual review. The faculty member may provide written comments on the review.

In accordance with Faculty Rule 3335-5-04.5, tenured faculty must undergo a post-tenure review if one of three conditions is met:

- A tenured faculty member receives a rating of "does not meet expectations" in the same area on their annual performance evaluation in at least two of the past three consecutive annual reviews;
- A tenured faculty member receives a rating of "does not meet expectations" in any area on their annual performance evaluation in the two years following the conclusion of a previous post-tenure review; or
- The Department Chair, Dean, or Executive Vice President and Provost determines that the tenured faculty member has a documented and sustained record of significant underperformance outside of their annual review; 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.

F. ANNUAL REVIEW AND REAPPOINTMENT REVIEW PROCEDURES: CLINICAL FACULTY

The annual 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. A subcommittee of the Appointment, Promotion and Tenure may provide a written review if asked by the Department Chair or designee. Accountability for the annual review process resides with the Department Chair.

In the penultimate contract year of a clinical faculty member's appointment, a formal performance review is necessary to determine whether the faculty member will be offered reappointment. The Department Chair will determine whether the faculty member will be offered reappointment. The reappointment review during the probationary period (i.e. initial term) requires either a dossier or a complete CV which is reviewed by the Appointment, Promotions, and Tenure committee. 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.

There is no presumption of renewal of appointment.

G. ANNUAL REVIEW AND REAPPOINTMENT REVIEW PROCEDURES: RESEARCH FACULTY

The annual review process for research faculty who are probationary and non-probationary is identical to that for tenure-track probationary and tenured faculty 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. The reappointment review during the probationary period (i.e. initial term) requires either a dossier or a complete CV which is reviewed by the committee of eligible faculty. External letters of evaluation are not solicited. There is no presumption of renewal of contract. For faculty in one- and two-year appointment terms, departments must ensure these faculty receive the appropriate review and notification according to their term. The standards of notice set forth in Faculty Rule 3335-6-08 must be observed.

There is no presumption of renewal of appointment.

H. ANNUAL REVIEW AND REAPPOINTMENT REVIEW PROCEDURES: ASSOCIATED FACULTY

Compensated associated faculty members must be reviewed annually by the Department Chair or designee, who prepares a written annual review using the OAA Annual Review Template that includes a determination of whether the faculty member at minimum exceeds expectations, meets expectations, or does not meet expectations in any area of work with 5% or greater workload allocation. The faculty member may provide written comments on the review and has the opportunity to appeal ratings to the dean and/or executive vice president and provost.

Compensated associated faculty members in their initial appointment must be reviewed before reappointment. If the position of a compensated associated faculty member will continue, the faculty member must undergo a formal reappointment review to determine whether it is appropriate to renew that individual's appointment to fill that position. The review generally proceeds in the same manner as for faculty on the clinician educator or clinical excellence pathways, with relevant areas of the core dossier completed, as applicable to the faculty member. The Department Chair's recommendation on reappointment is final. If the recommendation is to renew, the department chair may extend a multiple year appointment.

If the position of a compensated associated faculty member will not continue, the decision of the Department Chair to not renew the appointment is final, and a formal reappointment review is not required. Proper notice is to be given to the associated faculty member as set forth under the Policy on Faculty Annual Review, Post-Tenure Review, and Reappointment.

Whether a compensated associated faculty position will or will not continue is at the discretion of the Department Chair, and that decision is final.

When considering reappointment of **non-compensated associated faculty members**, at a minimum, their contribution to the Department of Pediatrics must be assessed on an annual 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 of the College of Medicine, who may modify them. The recommendations are based on the current annual performance. For clinicians, salary recommendations are under the auspices of the Department of Pediatrics practice plan. Salaries are also audited annually to ensure that they are commensurate within the Department and across the fields represented in the Department and adjustments are made accordingly.

In formulating recommendations, the Department Chair consults with Finance Committee of the

Pediatric Academics Association. The Department Chair proactively engages in an annual equity audit of faculty salaries to ensure that they are commensurate both within the department and across the field or fields represented in the department. Salary increases are based upon these considerations.

It is the expectation of the College that merit salary increases, and other rewards made by the Department, will be consistent with the Appointments, Promotion and Tenure document and other relevant policies, procedures, practices, and standards established by the College of Medicine, Nationwide Children's Hospital, the Pediatric Academic Association, the Faculty Rules, the Office of Academic Affairs, and the Office of Human Resources.

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

Meritorious performance in teaching, scholarship, and service is assessed in accordance with the same criteria that form the basis for promotion decisions. The time frame for assessing performance will be the past 12 months, with attention to patterns of increasing or declining productivity. Faculty with high-quality performance and a pattern of consistent professional growth will be viewed positively. Faculty members whose performance is unsatisfactory in one or more core areas are likely to receive minimal or no salary increases.

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 for an annual review (see Section VI A above) at the required time will receive no salary increase in the year for which documentation was not provided, except in extenuating circumstances, and may not expect to recoup the foregone raise at a later time.

VII. PROMOTION AND TENURE, AND PROMOTION REVIEWS

A. CRITERIA AND EVIDENCE THAT SUPPORT PROMOTION

Outlined below are the Department of Pediatrics formal criteria for academic advancement, including promotion in each faculty appointment type and awarding of tenure, if applicable.

The College of Medicine expects when the Department of Pediatrics 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 emphasizes interdisciplinary endeavors, instances will arise in which the work of a faculty member may depart from traditional academic patterns. 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 Ohio State University as an institution dedicated to the discovery and transmission of knowledge.

Although institutional citizenship and collegiality are expected, they cannot be used as an independent criterion for promotion or tenure. It is recognized that these positive attributes

characterize the ability of a faculty member to effectively contribute to exemplary scholarship, teaching, and service. A commitment to these values and principles can be demonstrated by constructive responses to and participation in The Ohio State University, College of Medicine, and Department of Pediatrics initiatives. Examples include participation in faculty governance, outreach and service, advocacy, ethics, adherence to principles of responsible conduct of research, constructive conduct and behavior during the discharge of duties, responsibilities and authority, and the exercise of rights and privileges of a member of the faculty as reflected in the "Statement on Professional Ethics" of the American Association of University Professors.

Annually, the University 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 Promotion and Tenure Committee for formal review. The committee will review the dossier, consistent with responsibilities described in Section VII.B.5 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.

Faculty Rule 3335-6-02 provides the context for promotion and tenure and promotion reviews.

The purpose of a review by the College of Medicine Appointment, Promotion, and Tenure Committee includes determination of whether the Department of Pediatrics has conducted its review and reached a recommendation consistent with University, College, and Departmental standards, criteria, policies, and rules. In addition, determination where the weight of the evidence lies in cases in which there is not a clear or consistent recommendation from the Department of Pediatrics is made. If the conclusion of the College-level review is that the recommendation of the unit is not consistent with University, College, and Departmental standards, criteria, policies, and rules, the dean may make a recommendation that is contrary to the recommendation of the Department of Pediatrics.

1. Defining Impact for Promotion and Tenure

Fundamental to promotion in all faculty appointment types (e.g., clinical, research, tenure track) are the totality of the impact of a candidate's body of work and the candidate's upward trajectory over time. Impact refers to the direct effect of one's work on science, education, medicine, healthcare, and/or community. The clinician educator and clinician scholar pathways, research faculty and tenure-track emphasize scholarly achievements. Community engagement will be carefully considered and refers to institutional, local, national, and international community contributions that are closely aligned with and complementary to a candidate's scholarly work.

The elements below highlight examples of how impact can be demonstrated. This is not intended to be a checklist of required contributions needed to achieve promotion. The biographical narrative should encapsulate the candidate's own description of demonstrated impact for the achievements listed.

A. Scholarship/Creative Works/Research

Fundamental to promotion in the clinician educator and clinician scholar pathways, research faculty and tenure-track is evidence of continuous scholarly productivity and an evaluation of the totality of the impact of a candidate's body of work. Any area of research consistent with mission of the Department of Pediatrics and College of Medicine (COM) are acceptable as long as impact and an upward trajectory of a candidate's achievements over time can be

demonstrated. Demonstration of impact entails providing evidence of successful translation of new knowledge into new approaches, techniques, devices, programs, etc. and may include:

- Peer reviewed research papers, assessed by
  - Citations of published peer-reviewed work
  - Contribution to published peer-reviewed work
  - Authorship of published peer-reviewed work
  - Impact/quality of journals in which peer-reviewed work is published
- Grant funding from federal, industry, foundation, and private sources
- Academic awards
- Participation in grant review study sections, organizing committees, etc.
- Editorial leadership roles
- External lectures and invited talks
- Patents and commercialization aligned with primary research program
- Identifiable contributions to collaborative research /team science

B. Teaching

Promotion in the clinical faculty and tenure-track is in part a recognition of the totality of the impact of a candidate's educational activities as measured by high quality engagement and sustained excellence. Promotion to professor requires ongoing engagement and demonstrated excellence in education.

High quality engagement

- Teaching in any of the defined categories of education within and outside of the COM
- Leadership roles in teaching or educational programs
- Innovation or novel application in local classroom teaching methods
- Development of new or novelly presented educational products such as curriculum, assessment tools or programs, policy statements, technologies such as simulation, etc.
- Leading or substantive participation in education-related committees
- Involvement in local mentoring programs and outreach programs including those that promote health equity.
- Participation in CME, research, and inter-professional meetings
- Participation in the development of scholarly products related to education

Excellence in education

- Internal and external evaluations of teaching
- Outcomes of successful mentorship such as scholarly products, regional and national presentations by trainees/mentees, trainee/mentee career trajectory, etc.
- Course or program evaluations that reflect educational leadership roles
- Awards for teaching, mentoring, and other education contributions
- Invited lectures to disseminate new knowledge related to successful education programs, interventions, curricula that have been generated by the candidate

- Grant funding or scholarship specifically related to education activities
- National leadership roles in education/training committees and professional societies

C. Service

For faculty who have clinical responsibilities, impact may be demonstrated as a result of:

- Contribution to the development of innovative clinical approaches to diagnosis, treatment or prevention of disease, applications of technologies and/or models of care delivery that influence care (e.g., community-based programs, clinical care models, practice guidelines, innovative application of existing or new technology, etc.)
- Service on committees in the candidate's area of clinical expertise with contributions to development of practice guidelines or policies for health care access, clinical management, evaluating clinical programs, etc.
- Leadership roles in professional organizations, courses or programs related to clinical expertise
- Invitations to share expertise through invited talks, book chapters, clinical reviews
- Awards for contributions and/or innovation in the area of clinical expertise
- Regional, national, and international patient referrals
- Engagement/collaboration in clinical trials and clinical studies
- Clinical awards (e.g., Best Doctors, Castle Connelly, OSU Mazzaferri-Ellison Society of Master Clinicians, Departmental Awards etc.).

Additionally, consideration should be given for the demonstration of impact via non-traditional methodologies including social media portfolios such as rigorously peer reviewed blog/vlog/podcast/vodcast, authorship/editorial duties or professional media engagement on scholarly topics, and consider incorporating the use of Altmetrics to assess the impact of the candidate's work utilizing traditional and social media platforms (e.g. Digital scholarship):

***Resources* for non-traditional evidence of impact/reputation (e.g., digital scholarship):**

Cabrera D, Vartabedian BS, Spinner RJ, Jordan BL, Aase LA, Timimi FK. *More Than Likes and Tweets: Creating Social Media Portfolios for Academic Promotion and Tenure*. J Grad Med Educ. 2017 Aug;9(4):421-425. doi: 10.4300/JGME-D-17-00171.1. PMID: 28824752; PMCID: PMC5559234.

Husain A, Repanshek Z, Singh M, Ankel F, Beck-Esmay J, Cabrera D, Chan TM, Cooney R, Gisondi M, Gottlieb M, Khadpe J, Repanshek J, Mason J, Papanagnou D, Riddell J, Trueger NS, Zaver F, Brumfield E. *Consensus Guidelines for Digital Scholarship in Academic Promotion*. West J Emerg Med. 2020 Jul 8;21(4):883-891. doi: 10.5811/westjem.2020.4.46441. PMID: 32726260; PMCID: PMC7390542

2. Promotion of Tenure Track Faculty

A. Promotion to Associate Professor with Tenure

Faculty Rule 3335-6-02 provides the following general criteria for promotion to associate professor with tenure.

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.

The awarding of tenure is an acknowledgment of excellence and future potential for preeminence. It requires evidence of consistent achievement throughout the professional life of the faculty member. It is therefore essential to evaluate and judge the probability that faculty, once tenured, will continue to develop professionally and contribute to the department's academic mission at a high level for the duration of their time at the university.

Promotion to the rank of associate professor with tenure occurs when a faculty member exhibits convincing evidence of excellence in the discovery and dissemination of new knowledge, as demonstrated by a national level of impact and recognition of scholarship. In addition, excellence in teaching and service is required, but alone is not sufficient for promotion and awarding of tenure. The quality of these activities should be demonstrable at the College, University and/or national levels and be consistent with the College's values. Faculty being promoted to associate professor should exhibit professionalism and foster a safe and collaborative work environment. These three key areas of achievement: scholarship, teaching, and service, are individually discussed below. Excellence in teaching, scholarship, and service is moreover defined to include professional ethical conduct in each area of responsibility, consistent with the American Association of University Professors' Statement on Professional Ethics. Achievement of national recognition and impact is a prerequisite for promotion to associate professor and awarding of tenure.

Tenure is not awarded below the rank of associate professor at The Ohio State University, though faculty with significant clinical responsibilities who have probationary periods up to 11 years may seek promotion to rank of associate professor in advance of tenure (see below). Accomplishments that are used toward promotion to associate professor in advance of tenure (e.g. publications, grants) would count toward a subsequent application for tenure, though additional accomplishments for tenure would be required.

The content below is not meant to be exhaustive or applicable to all disciplines but is provided to demonstrate the types of criteria and evidence that may support promotion to associate professor with tenure.

SCHOLARSHIP/CREATIVE WORKS/RESEARCH Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence /Documentation**
Discovery and dissemination of new knowledge	• Laboratory investigation, development of innovative programs, theoretical insight, innovative interpretation of an existing body of knowledge, clinical science, team science, quality improvement, public health and community research, implementation science, and diffusion research, among many potential others. • Substantial body of original knowledge that is published in high quality, peer-reviewed journals or proceedings
A sustained record or scholarly productivity, reflected in both quantity and quality of publications	• 15-25 peer-reviewed publications since appointment as an assistant professor (*Required,* however, specific metrics in support of excellence may be adjusted within the range of 15-25 peer-reviewed manuscripts based on the overall pattern of the faculty member's responsibilities. The range of publications may be adjusted in relation to the proportion of the faculty member's effort that is allocated to clinical service. Overall impact of scholarship is important. • High impact and positive trajectory of scholarship, including work showing national impact. • The pattern of scholarship should include an increasing proportion of publications as first, senior, or corresponding author, but importance of other authorship positions as a key/indispensable contributor is to be considered. • The number of citations of their publications, and/or citation record may be used to demonstrate impact of work. • Although review articles and book chapters 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. • 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 may have a relatively low impact factor but may be highly cited. Conversely, publication in journals with a very high impact factors reflects broader interest but does not in and of itself demonstrate the impact of research. • There should exist a trajectory of increasing scholarly activity and outcomes over time
Obtaining a national recognition and impact for a program of scholarship (*Required*)	• Evidence of sustained or multiple external peer-reviewed grant support (see below) • Invited platform presentations at national/international scientific sessions; oral abstract presentations by the faculty member or their mentees do NOT satisfy this requirement • Visiting Professorships at peer institutions • Invitations to serve on editorial boards, study sections, and grant review sections • Social media portfolios such as peer reviewed blog vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics *could* provide evidence of national reputation in some cases

	• Materials transfer activities should be considered evidence of national (or international) recognition and impact. • The above support the demonstration of national recognition and impact but this list is not comprehensive.
Participation in collaborative, multidisciplinary research or team science	• Record of collaborative scholarship with manuscripts on which authorship is first, senior, or corresponding. Middle authorship that is uniquely contributory, clear, and well documented may be considered. • Participation as MPI on nationally funded projects, principal investigator of components of NIH U or P grants, and participation as an essential core service provider on multiple externally- funded grants in which the contribution of the faculty member is clearly evident would also be an example of evidence of participation in collaborative team science.
Innovation and entrepreneurship	• Entrepreneurship with patents and licenses of invention disclosures, software development, and materials technology commercialization • Designing and/or supervising the construction of creative products (e.g., new technologies, devices, software, algorithms) which advance health-related science and healthcare • Developing and securing intellectual property such as patents, patent disclosures and licensing of University-developed intellectual property • Commercializing intellectual property through innovation and entrepreneurial activities such as entity creation, formation of startup companies and licensing and option agreements • Engaging in reciprocal partnership with the community, involving mutually beneficial exchanges of knowledge and the creation, delivery and assessment of timely, unbiased, educational materials and programs that address relevant, critical and emerging issues • 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 revenue should be considered equivalent to extramural grant awards • Entrepreneurial activities will be recognized as scholarly or service activities in the promotion and tenure dossier
Evidence of sustained or multiple external peer reviewed grant support, national foundation awards, or large-scale industry collaborations (*Required)*	• Two nationally competitive grants must be obtained in the principal investigator or MPI role, with at least one of them being an NIH R01 or equivalent. The other grant could be of smaller scope (e.g. R21, R03, smaller foundation grant) but must still be nationally competitive. • <u>Candidates without significant clinical responsibilities</u>: Candidates for promotion to associate professor with tenure who are without significant clinical responsibilities must have 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 should have demonstrated sustainability of their research program by renewal of the award and/or by garnering a second distinct nationally competitive, peer reviewed grant in the principal investigator or MPI role. The latter 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. A funded K award prior to the R01 equivalent could count as the second distinct nationally competitive grant. 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 *may* satisfy the requirement for extramural funding depending on the nature and scope of the faculty member's contributions. • Candidates with significant clinical responsibilities: Candidates for promotion to associate professor with tenure who have significant clinical responsibilities are on the 11-year tenure clock. They are expected to obtain extramural NIH or comparable funding as defined in the previous paragraph as a PI, or MPI to support their research program prior to their mandatory tenure review. Depending on the extent of clinical responsibilities, sustained funding through pharmaceutical or instrumentation companies for investigator-initiated proposals *may* be acceptable depending on the nature and scope of the faculty member's contributions. However, serving as the site-PI for a multi-center trial(s) would NOT satisfy the expectation for extramural funding on the tenure track. • Creation of patents that generate licensing income or spin-off companies could meet the equivalent criteria of extramural funding. • In rare circumstances, a faculty member's expertise may not justify principal investigator level status. In such cases serving as a funded co-investigator on multiple grants *may* be acceptable depending on the nature and scope of the faculty member's contributions

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 since appointment to the tenure track at The Ohio State University. In instances where a faculty member was on the faculty at another institution prior to their current appointment at The Ohio State University, their total volume of work will be considered in meeting their minimum requirements. It should be appreciated that evidence of scholarship below the specified range does not preclude a positive promotion decision especially if reasonable extenuating circumstances exist. Scholarship exceeding the specified range is not a guarantee of a positive tenure or promotion decision, especially if it occurs in isolation or without impact or focus. Scholarship in the context of poor performance in other areas such as absence of evidence of teaching excellence may affect decisions.

TEACHING Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted**.	
Examples of Expectations	**Examples of Evidence/Documentation**
A strong and consistent record of effective teaching and mentoring	• Positive evaluations by students, residents, fellows, postdoctoral trainees, local colleagues, and national peers (*Required)*. The dossier must clearly document the faculty

	member's contribution and the impact of these efforts. • Teaching awards and other honors are not required but are valued • Documented impact on teaching and training programs, including curricular innovation, new teaching modalities such as web-based design, mobile application, virtual teaching, methods of evaluating teaching, program or course development, publications on teaching, and societal leadership in education • Development of impactful, innovative programs that integrate teaching, research and patient care are valued • Programs that improve access to teaching for populations of learners from all backgrounds • Achievement by direct mentees, including publications, external funding, and invited presentations

SERVICE Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. It is additionally expected that the faculty demonstrate evidence of College values, in service activities. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence/Documentation**
Administrative service to the department, COM, or University	• Appointment to, election to, or leadership of departmental, College of Medicine, hospital, and/or University committees or working groups
Advocacy for child health	• Advocacy for children's health, community health, school health
Excellent patient care (if applicable)	• Clinical program development or enhancement • Innovative programs that advance the mission of the University or hospital, such as creation and sustenance of a program to deliver healthcare to the community • Design and implementation of a novel program to improve health care access
Professional service to the field of pediatrics	• Provision of professional expertise to public and private entities beyond the University • Performing journal reviews • Serving on editorial boards or editorships • Service as a grant reviewer for national funding agencies, elected or appointed offices held • Service to local and national professional societies, service as an advocate for children's health, community health, school health and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Pediatrics and The Ohio State University • Service on panels and commissions, and professional consultation to industry, government, education, and non-profit organizations • Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion. • Candidates can consider demonstrating impact of their work by utilization of social and traditional media (such as X, Facebook, Instagram, Threads)

B. 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 probationary periods of up to 11 years. For these

cases, promotion and tenure can be uncoupled. The criteria for promotion will require a level and pattern of achievement that demonstrates the candidate is making significant progress toward tenure but has not yet achieved all the requisite criteria for promotion with tenure. Specifically, the candidate should demonstrate evidence of an emerging national recognition.

The Department's Appointments, Promotion and Tenure Committee, the department chair or the 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 candidate with clinical responsibilities 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.

Accomplishments that are used toward promotion to associate professor in advance of tenure (e.g. publications, grants) would count toward a subsequent application for tenure, though additional accomplishments for tenure would be required. In instances where a faculty member was on the faculty at another institution prior to their current appointment at The Ohio State University, their total volume of work will be considered in meeting their minimum requirements. However, accomplishments that are meritorious of promotion must also have been demonstrated at Nationwide Children's Hospital and/or The Ohio State University.

SCHOLARSHIP/CREATIVE WORKS/RESEARCH Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence /Documentation**
Discovery and dissemination of new knowledge	• Laboratory investigation, development of innovative programs, theoretical insight, innovative interpretation of an existing body of knowledge, clinical science, team science, quality improvement, public health and community research, implementation science, and diffusion research, among many potential others. • Substantial body of original knowledge that is published in high quality, peer-reviewed journals or proceedings.
Substantial progress toward the establishment of a thematic program of scholarship	• Consistent and increasing number of peer-reviewed publications as first or senior author or evidence as a key/indispensable co-author. • 10-15 peer-reviewed publications since appointment as an assistant professor *(Required).* • High impact and positive trajectory of scholarship, including work showing national impact. • The pattern of scholarship should include an increasing proportion of publications as first, senior, or corresponding author, but importance of other authorship positions as a key/indispensable contributor is to be considered. • The number of citations of their publications, and/or citation record may be used to demonstrate impact of work. • Although review articles and book chapters 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. • 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 may have a relatively low impact factor but may be highly cited. Conversely, publication in journals with a very high impact factors reflects broader interest but does not in and of itself demonstrate the impact of research. • There should exist a trajectory of increasing scholarly activity and outcomes over time.
Emerging national recognition (*Required*)	• Invitations to serve as ad hoc journal reviewer • Invited lectures outside of the University • Invited platform presentations at national/international scientific sessions; oral abstract presentations by the faculty member or their mentees do NOT satisfy this requirement • Visiting Professorships at peer institutions • Invitations to serve on editorial boards, study sections, and grant review sections • Social media portfolios such as peer reviewed blog vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics *could* provide evidence of national reputation in some cases
Evidence of external peer reviewed grant support, national foundation awards, or large-scale industry collaborations (*Required*)	• Serving as a principal investigator or MPI on a funded nationally competitive R01-equivalent grant without additional external funding; *OR* • Serving as a principal investigator or MPI on a funded nationally competitive R21, R03, K award or an equivalent grant *PLUS* • Serving as principal investigator or MPI on a funded foundation or other nationally competitive extramural grant(s); *OR* serving as co-investigator on a funded R21, R03, or R01 award or equivalent • Serving as the site-PI for a multi-center trial(s) would NOT satisfy the expectation for extramural funding on the tenure-track

TEACHING Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence/Documentation**
A strong and consistent record of effective teaching and mentoring	• Positive evaluations by students, residents, fellows, postdoctoral trainees, local colleagues, and national peers (*Required)*. The dossier must clearly document the faculty member's contribution and the impact of these efforts. • Teaching awards and other honors are highly valued but not required. • Documented impact on teaching and training programs, including curricular innovation, new teaching modalities such as web-based design, mobile application, virtual teaching, methods of evaluating teaching, program or course development, publications on teaching, and societal leadership in education. • Development of impactful, innovative programs that integrate

	teaching, research and patient care are valued. • Programs that improve access to teaching for learners from all backgrounds. • Achievement by direct mentees, including publications, external funding, and invited presentations. • Clear trend of outstanding or improving teaching evaluations • Evaluations of presentations at other academic institutions, scientific or professional societies, or other health care organizations • Professional development in the mentoring or teaching or making changes to teaching or mentoring approaches to improve educational delivery.

SERVICE Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence/Documentation**
Administrative service to the Department, COM, or University	• Appointment to, election to, or leadership of departmental, College of Medicine, hospital, and/or University committees or working groups • Service on departmental or College of Medicine GME committees • Service on Department or COM APT committee • Participation on the Institutional Review Board or Intramural Research Review Committee
Advocacy for child health	• Advocacy for children's health, community health, school health
Excellent patient care (if applicable)	• Clinical program development or enhancement • Innovative programs that advance the mission of the University or hospital, such as creation and sustenance of a program to deliver healthcare to the community • Design and implementation of a novel program to improve health care access.
Professional service to the field of pediatrics	• Provision of professional expertise to public and private entities beyond the University. • Performing journal reviews • Serving on editorial boards or editorships • Service as a grant reviewer for national funding agencies, elected or appointed offices held. • Service to local and national professional societies, service as an advocate for children's health, community health, school health and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Pediatrics and The Ohio State University. • Service on panels and commissions, and professional consultation to industry, government, education, and non-profit organizations. • Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion. • Candidates can consider demonstrating impact of their work by utilization of social and traditional media (such as X, Facebook, Instagram, Threads).

C. Promotion to Professor

Awarding promotion to the rank of professor with tenure must be based upon convincing, unequivocal evidence that the candidate has a sustained eminence in their field with a record of achievement recognized by national leadership and, in most disciplines, international recognition and impact [See Defining Impact above]. Within the field of pediatrics, it is recognized some disciplines may not have a tradition of international conferences and interaction.

In these instances, evidence of international impact may not be possible but should be addressed in the individual's dossier. When assessing a candidate's national and international reputation in the field, a national and international reputation for the scholarship of teaching may be counted as either teaching or scholarship.

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 and requires evidence of national leadership. Participation alone on national committees, even if via election or invitation, is not sufficient evidence; rather the position must be one of leadership. Similarly, while national/international abstract presentations are desired, these are not sufficient evidence of a leadership position. See examples below. A record of excellence must be evident from activities undertaken and accomplishments achieved since being appointed or promoted to the rank of associate professor. These activities should be consistent with the College's values. It is expected that the faculty member will have a consistent record of high-quality publications with demonstrated impact well beyond that required for promotion to associate professor. Faculty being promoted to professor should exhibit professionalism, positive values and foster a safe and collaborative work environment.

SCHOLARSHIP/CREATIVE WORKS/RESEARCH Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required*** **elements are noted**.	
Examples of Expectations	**Examples of Evidence /Documentation**
Discovery and dissemination of new knowledge	• Laboratory investigation, development of innovative programs, theoretical insight, innovative interpretation of an existing body of knowledge, clinical science, team science, quality improvement, public health and community research, implementation science, and diffusion research, among many potential others. • Substantial body of original knowledge that is published in high quality, peer-reviewed journals or proceedings
A sustained record or scholarly productivity, reflected in both quantity and quality of publications	• 25-35 peer-reviewed publications since promotion to associate professor (*Required,* however, specific metrics in support of excellence may be adjusted within the range of 15-25 peer-reviewed manuscripts based on the overall pattern of the faculty member's responsibilities. Overall impact of scholarship is important. • The pattern of scholarship should include a substantial proportion of publications as senior or corresponding author, but importance of other authorship positions as a key/indispensable contributor is considered. (*Required)* • High impact and continued trajectory in their scholarly productivity *(Required)* • Number of citations of their publications, the trajectory of the publication and/or citation record. • Although review articles and textbook chapters 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. • Work showing international impact.

	• 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 may have a relatively low impact factor but may be highly cited. Conversely, publication in journals with a very high impact factors reflects broader interest but does not in and of itself demonstrate the impact of research. • There should exist a trajectory of increasing scholarly activity and outcomes over time.
National Leadership and International Reputation (*Required*)	• Election or appointment to a leadership position in a national or international society. • Service as a national committee or task force chair, chair of an NIH or other federal review panel, regular membership on an NIH study section, peer recognition or awards for research, editorial boards or editorships of scientific journals, and invited lectures at hospitals or universities outside the country or at meetings of international societies. • Invited platform or keynote presentations at national/international scientific sessions; oral abstract presentations by the faculty member or their mentees do NOT satisfy this requirement • Visiting Professorships at peer institutions • Invitations to chair editorial boards, study sections, and grant review sections. • Material transfer activities should be considered evidence of national (or international) recognition and impact. • Social media portfolios such as peer reviewed blog vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics *could* provide evidence of national/international reputation in some cases
Participation in collaborative, multidisciplinary research and team science	• Record of collaborative scholarship with manuscripts on which authorship is first, senior, or corresponding. Middle authorship that is uniquely contributory, clear, and well documented is also valued. • Participation as an MPI investigator on nationally funded projects, principal investigator of components of NIH U or P grants, and participation as an essential core service provider on multiple externally funded grants in which the contribution of the faculty member is clearly evident would be examples of participation in collaborative team science.
Innovation and entrepreneurship	• Entrepreneurship with patents and licenses of invention disclosures, software development, and materials technology commercialization • Designing and/or supervising the construction of creative products (e.g., new technologies, devices, software, algorithms) which advance health-related science and healthcare • Developing and securing intellectual property such as patents, patent disclosures and licensing of University-developed intellectual property • Commercializing intellectual property through innovation and entrepreneurial activities such as entity creation, formation of startup companies and licensing and option agreements • Engaging in reciprocal partnership with the community, involving mutually beneficial exchanges of knowledge and the creation, delivery and assessment of timely, unbiased, educational materials and programs that address relevant, critical and emerging issues • 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 revenue should be considered equivalent to extramural grant awards. • Entrepreneurial activities will be recognized as scholarly or service activities in the promotion and tenure dossier.
Evidence of sustained or multiple external peer reviewed grant support, national foundation awards, or large-scale industry collaborations (*Required*)	• NIH (or comparable) funding as a principal investigator or multiple principal investigator (MPI) on a new R01, P01, U54, or other comparable funding since promotion to associate professor, including but not limited to the National Science Foundation, the Health Resources and Services Administration, the Patient Centered Outcomes Research Initiative (PCORI), the Department of Defense, the Food and Drug Administration, the US Department of Agriculture, the Agency for Healthcare Research and Quality, the Robert Wood Johnson Foundation, the Centers for Disease Control and Prevention and others. (*Required)* • Demonstration of sustainability of their research program by renewal of that award and/or by garnering a second distinct nationally competitive, peer- reviewed grant at the R01 or R01-equivalent level in the principal investigator role since promotion to associate professor (e.g., simultaneous or sequential funding on two NIH R01-level awards in the principal investigator role) *(Required*) • Other funding sources may include support from prominent national charitable foundations or other funding agencies. Examples include the American Heart Association, the March of Dimes, the Thrasher Foundation, the Juvenile Diabetes Research Foundation, the American Cancer Society, the Lupus Foundation, a major industry grant, or other federal entities. • For clinician faculty, depending on the extent of clinical responsibilities, sustained funding through pharmaceutical or other industries for investigator-initiated proposals *may* be considered depending on the nature and scope of the faculty member's contributions. • Serving as the site-PI for a multi-center trial(s) would NOT satisfy the expectation for extramural funding on the tenure-track. • Creation of patents that generate licensing income or spin-off companies would meet the equivalent criteria of extramural funding. • In some circumstances, a faculty member's expertise (e.g. biostatistician) may not justify principal investigator-level status. In such cases, serving as a co-investigator on multiple NIH grants *may* satisfy the requirement for extramural funding, depending on the nature and scope of the faculty member's contributions.

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 since appointment to the tenure track at The Ohio State University. It should be appreciated that evidence of scholarship below the specified range does not preclude a positive promotion decision especially if reasonable extenuating circumstances exist. Scholarship exceeding the specified range is not a guarantee of a positive tenure or promotion decision, especially if it occurs in isolation or without impact or focus. Scholarship in the context of poor performance in other areas such as absence of evidence of teaching excellence may affect decisions.

TEACHING Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence /Documentation**
A strong and consistent record of effective teaching and mentoring	• Outstanding evaluations by students, residents, fellows, postdoctoral trainees, local colleagues, and national peers (*Required)*. The dossier must clearly document the faculty member's contribution and the impact of these efforts. • Course or workshop leadership and design, • Training program directorship, teaching awards, and organization of national course and curricula and participation in specialty boards. • Active participation in student or trainee teaching • Active participation as a mentor in training grants such as NIH T32 or K- awards • Achievement by direct mentees, including publications, external funding, and invited presentations. • Programs that improve teaching to various populations. • Professional development in the mentoring or teaching and making changes to teaching or mentoring approaches to improve educational delivery. • Mentorship of junior faculty is expected. It is presumed that this will take the form of a primary mentoring relationship, and not just *ad hoc* coaching. Candidates should provide evidence of the impact of their mentorship. • Candidates with clinical duties should demonstrate consistent and effective teaching of trainees and practicing clinicians, and leadership in the administration of clinical training programs.

SERVICE Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. It is additionally expected that the faculty demonstrate evidence of COM values in service activities. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence/Documentation**
Administrative leadership in the Department, COM, or University	• Leadership of departmental, COM, hospital or University committees, working groups, divisions, or centers
Professional service or provision of expertise outside the institution	• Leadership roles in professional organizations • Journal editorships • Roles as a board examiner, membership on a subspecialty board • Service on panels and commissions, program development • Professional consultation to industry, government, and education
Innovative program development that advances the mission of the department, COM, university	• Creation and sustenance of a program to deliver healthcare to the community.
Advocacy for child health	• Advocacy for children's health, community health, school health
Excellent patient care (if applicable)	• Clinical program development or enhancement • Innovative programs that advance the mission of the University or hospital, such as creation and sustenance of a program to deliver healthcare to the community • Design and implementation of a novel program to improve health care access.
Professional service to the field of pediatrics	• Provision of professional expertise to public and private entities beyond the University. • Performing journal reviews • Serving on editorial boards or editorships • Service as a grant reviewer for national funding agencies, elected or appointed offices held. • Service to local and national professional societies, service as an advocate for children's health, community health, school health and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Pediatrics and The Ohio State University. • Service on panels and commissions, and professional consultation to industry, government, education, and non-profit organizations. • Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion. • Candidates can consider demonstrating impact of their work by utilization of social and traditional media (such as X, Facebook, Instagram, Threads).

3. Promotion of Clinical Faculty

Clinical faculty members have a relatively greater responsibility for patient care, teaching -- including instruction in the clinical setting – and service. For this reason, the emphasis on traditional scholarship and external grant funding is less for clinical faculty than for tenure track faculty. Clinical faculty members are not eligible for tenure.

Clinical faculty may serve the Department of Pediatrics, the College of Medicine and The Ohio State University without ever seeking promotion to the next higher faculty rank simply through repeated reappointment at the same rank. However, the goals and objectives of the Department of Pediatrics, the College of Medicine and The Ohio State University are best met when all faculty strive for continued improvement by meeting or exceeding the requirements for promotion to the next faculty rank.

In recognition of the varied contributions a faculty member with clinical responsibilities might make to the mission of the College of Medicine, the clinical faculty may choose among three pathways. These are the Clinician Educator Pathway, the Clinician Scholar Pathway, and the Clinical Excellence Pathway.

Clinical faculty members on the Clinician Educator and Clinician Scholar pathways primarily direct their effort towards clinical responsibilities, including but not limited to patient care, clinical administrative responsibilities, bedside and clinical teaching, and clinical scholarship. Scholarship for clinical faculty is no less important but is often of different forms and domains of emphasis than for those in the tenure track. Clinical faculty members on the Clinical Excellence pathway ordinarily dedicate 80-90% effort towards clinical responsibilities, including but not limited to patient care and bedside and clinical teaching.

With the exception of the Clinical Excellence Pathway, the awarding of promotion to the rank of associate professor on the clinical faculty must be based upon convincing evidence that the candidate has developed a national level of impact and recognition since being appointed to the rank of assistant professor.

In instances where a faculty member was on the faculty at another institution prior to their current appointment at The Ohio State University, their total volume of work will be considered in meeting their minimum requirements. However, accomplishments that are meritorious of promotion must also have been demonstrated at Nationwide Children's Hospital and/or The Ohio State University.

A. Promotion to Associate Clinical Professor, Clinician Educator Pathway

The Clinician Educator Pathway is appropriate for faculty members whose clinical responsibility is 70-80% of their overall professional effort. Faculty members on this pathway are significantly involved in education of medical students, graduate students, residents, fellows, and/or other medical professionals. Evidence of national recognition and impact is required for promotion. A national reputation will typically occur in the areas of teaching, mentoring and education, but can also be related to clinical, research, or professional service.

Faculty members on this pathway may be involved in the scholarship of integration, application, and teaching. Scholarship of integration involves interpreting published research, integrating new clinical knowledge with previous concepts, and selecting outmoded clinical concepts for discard. Scholarship of application tests new knowledge in clinical practice. Settings for education include the classroom, ambulatory clinics, and offices, continuing medical education programs, various national venues, diagnostic suites, operating rooms, and at patient bedsides.

Clinician educators must be involved in the discovery, organization, interpretation, and transmission of new knowledge related to patient care, health care delivery, health care economics, professional ethics, medical legal issues, or new educational methodology. They must publish but may or may not regularly publish as first or senior author. Their publications should influence the practice of clinical medicine at the regional and/or national levels. Acquisition of external grant funding is strong evidence of scholarship but is not required for clinician educators. Faculty members on this pathway are encouraged but not required to be investigators on research grants from national funding sources, with roles such as co-investigator, mentors, or a principal investigator.

The awarding of promotion to the rank of associate clinical professor on the Clinician Educator Pathway must be based upon clear and 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. Promotion will entail generation of a renewed contract. There is no presumption of a change in contract terms. National distinction is not required in every domain.

The clinician educator must sufficiently contribute to scholarship, research, and academics to develop a national reputation and impact germane to their area of expertise.

TEACHING Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence/Documentation**
Longitudinal record of teaching and mentoring excellence	• Positive evaluations by learners including students, residents, fellows, postdoctoral trainees, local colleagues, or national peers (*Required)*. The dossier must document the faculty member's contribution and the impact of these efforts, with formal peer-review and teaching evaluations. • Achievement by direct mentees, including publications, external funding, and invited presentations. • Teaching and/or mentoring awards and other honors are highly valued but not required. • Programs that improve access to teaching for learners from all backgrounds • Potential venues for teaching excellence range from traditional lecture formats to bedside instruction to digital materials, including social and digital media-based education.
Favorable impact on teaching and training programs	• Curriculum innovation, new teaching modalities or methods of evaluating teaching, and program or course development • Development of impactful, innovative programs that integrate teaching, research and patient care are particularly valued • Professional development in mentoring or teaching

SCHOLARSHIP/CREATIVE WORKS/RESEARCH Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence /Documentation**
Contribution to scholarship, academics, and research in their area of expertise	• Authorship of 10-15 peer-reviewed journal publications and other scholarly works *(Required)*. (Examples of other scholarly works include published review articles, invited commentaries, published guidelines, book chapters, the development of web-based or video-teaching modules, peer-reviewed or collaborative curricula that reach a national audience, and other digital media. • Importantly, 10 or more scholarly works must have been accomplished since appointment as an assistant professor at The Ohio State University (*Required*). • Publications may focus on pedagogic theory, innovative teaching techniques, development of web-based or video-teaching modules, and podcasts for example. They also may focus on the broad spectrum of original scholarship and research, including clinical science, basic science, health services research, outcomes research, quality improvement science, unique clinical observations and case-series, meta-

	analyses, and guidelines, et cetera. • Acquisition of grant funding is not required but is strong evidence of scholarship. • There should exist a trajectory of increasing scholarly activity and outcomes over time.

SERVICE Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence/Documentation**
Administrative service to the Department, COM, or University	• Participation or leadership of departmental, College of Medicine, hospital, and/or University committees or working groups • Service on departmental or College of Medicine GME committees • Participation on the Institutional Review Board or Intramural Research Review Committee
Excellent patient care	• Clinical program development or enhancement • Innovative programs that advance the mission of the University or hospital, such as creation and sustenance of a program to deliver healthcare to the community • Design and implementation of a novel program to improve health care access
Demonstration of national reputation, impact, and professional service to the field of pediatrics (*Required*)	• Invited platform presentations at national/international scientific/educational sessions; oral abstract presentations by the faculty member or their mentees do NOT satisfy this requirement • Visiting Professorships at peer institutions • Leadership of or election to a national committee or organization • Development or expansion of initiatives that impact the field of pediatrics or medicine • Provision of professional expertise to public and private entities beyond the University • Performing journal reviews • Serving on editorial boards or editorships • Service as a grant reviewer for national funding agencies, elected or appointed offices held • Service to local and national professional societies, service as an advocate for children's health, community health, school health and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Pediatrics and The Ohio State University • Service on panels and commissions; professional consultation to industry, government, education, and non-profit organizations • Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion. • Social media portfolios such as peer reviewed blog vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics *could* provide evidence of national reputation in some cases. • The above support the demonstration of national recognition and impact but this list is not comprehensive.
Innovative program development	• Development of initiatives that promote exposure to medicine or science in high school or undergraduate student

Advocacy for child health	• Advocacy for children's health, community health, school health • Funding at the level of local, state, and federal agencies
Provision of professional expertise to public and private entities beyond the University	• Election to Board of Directors or other national leadership position in a public or private entity that enhances the field of pediatrics or medicine

B. Promotion to Clinical Professor, Clinician Educator Pathway

Promotion to the rank of clinical professor on the Clinician Educator Pathway must be based upon convincing evidence that that the candidate has developed a national level of leadership and/or international recognition as a teacher and scholar since appointment to the rank of associate clinical professor. Participation alone on national committees, even if via election or invitation, is not sufficient evidence; rather the position must be one of leadership. Similarly, while national/international abstract presentations are desired, these are not sufficient evidence of a leadership position. See examples below. The impact of one's teaching, mentoring and scholarship must be clear and sustained. Promotion will entail generation of a renewed contract. There is no presumption of a change in contract terms.

TEACHING Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence/Documentation**
Distinctive record of superlative teaching and mentoring excellence	• Outstanding evaluations by learners including students, residents, fellows, postdoctoral trainees, local colleagues, or national peers (*Required)*. The dossier must clearly document the faculty member's contribution and the impact of these efforts, with formal peer-review and teaching evaluations. • Achievement by direct mentees, including publications, external funding, and invited presentations. • Teaching and/or mentoring awards and other honors • Participation in education and training- related specialty committees, specialty societies and specialty board committees. Examples are Resident Review Committees, specialty boards such as the American Board of Pediatrics, the Association of Pediatric Program Directors, and the Accreditation Council for Graduate Medical Education committees. • Mentorship of junior faculty also demonstrates teaching excellence. This should take the form of a primary mentoring relationship, not ad hoc career coaching. • Programs that improve access to teaching for learners from all backgrounds • Evidence of mentoring relationships with evaluations by mentees
Favorable impact on teaching and training programs	• Curriculum innovation, new teaching modalities or methods of evaluating teaching, and program or course development • Development of impactful, innovative programs that integrate teaching, research and patient care • Creation and/or leading professional development programs in mentoring or teaching

SCHOLARSHIP/CREATIVE WORKS/RESEARCH Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence /Documentation**
Contribute to scholarship, academics, and research in their area of expertise	• Authorship of approximately 25 to 30 peer-reviewed journal publications and other scholarly works (*Required).* • Importantly, 15 or more must have been published since appointment as an associate professor at The Ohio State University. • Publications may focus on pedagogic theory, innovative teaching techniques, educational content, development of web-based or video-teaching modules, and podcasts for example. • Publications also may focus on the broad spectrum of original scholarship and research, including clinical science, basic science, informatics, health services research, outcomes research, quality improvement science, unique clinical observations and case-series, meta-analyses, and guidelines, et cetera. • Published works may be based on their areas of clinical expertise which form the basis for their teaching of colleagues and peers. These may include, but are not limited to, review papers, book chapters as well as original investigator-initiated studies related to their area of clinical practice. Some faculty members may combine these two areas of career emphasis. • Development of web-based or video-teaching modules and other digital media are considered to be published works. • In the current era of team science and collaborative scholarship, it is recognized that meaningful scholarship is not uniformly represented by first or senior authorship. Works in which the faculty member's individual and identifiable expertise was essential to the publication are regarded as having merit equivalent to those that are first or senior author. • Acquisition of grant funding is highly valued but not required. • There should exist a trajectory of increasing scholarly activity and outcomes over time.
Candidate has attained a well-developed national reputation and/or international influence as a leader in their field (*Required*)	• Leadership (chair) of a national committee or program planning committee. • Invited platform or keynote presentations at national/international scientific sessions; oral abstract presentations by the faculty member or their mentees do NOT satisfy this requirement • Visiting Professorships at peer institutions • Social media portfolios such as peer reviewed blog vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics *could* provide evidence of national reputation in some cases.

SERVICE Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. It is additionally expected that the faculty demonstrate evidence of College values. ***Required* elements are noted**.	
Examples of Expectations	**Examples of Evidence/Documentation**
Administrative leadership in the Department, COM, or University	• Leadership of departmental, COM, hospital or University committees, working groups, divisions, or centers
Professional service to the field of pediatrics	• Leadership of a national committee or organization • Development or expansion of initiatives that impact the field of pediatrics or medicine • Provision of professional expertise to public and private entities beyond the University • Chair of editorial boards or editorships • Leadership of local and national professional societies, service as a leading advocate for children's health, community health, school health and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Pediatrics and The Ohio State University, • Leadership on panels and commissions, and professional consultation to industry, government, education, and non-profit organizations. • Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion.
Innovative program development that advances the mission of the department, COM, university	• Creation and sustenance of a program to deliver healthcare to the community
Advocacy for child health	• Advocacy for children's health, community health, school health • Funding at the level of local, state, and federal agencies
Excellent patient care	• Clinical program development or enhancement • Innovative programs that advance the mission of the University or hospital, such as creation and sustenance of a program to deliver healthcare to the community • Design and implementation of a novel program to improve health care access.

C. Promotion to 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 clear and convincing evidence 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. Evidence of national recognition and impact in most cases will occur in scholarship, but can also be related to clinical, educational, or professional service. National distinction is not required in all these domains.

TEACHING Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence/Documentation**
Longitudinal record of teaching and mentoring excellence	• Positive evaluations by learners including students, residents, fellows, postdoctoral trainees, local colleagues, or national

	peers (*Required)*. The dossier must clearly document the faculty member's contribution and the impact of these efforts, with formal peer-review and teaching evaluations. • Achievement by direct mentees, including publications, external funding, and invited presentations. • Teaching and/or mentoring awards and other honors • Programs that improve access to teaching for learners from all backgrounds. • Potential venues for teaching excellence range from traditional lecture formats to bedside instruction to digital materials, including social and digital media-based education.
Favorable impact on teaching and training programs	• Curriculum innovation, new teaching modalities or methods of evaluating teaching, and program or course development • Development of impactful, innovative programs that integrate teaching, research and patient care are particularly valued • Professional development in the mentoring or teaching

SCHOLARSHIP/CREATIVE WORKS/RESEARCH Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence /Documentation**
Contributions to scholarship; participation in basic, translational, clinical, informatics, education, or health services research projects or in clinical trials.	• 15-20 peer-reviewed publications since appointment as an assistant professor in journals with a typical impact factor for the field of pediatrics and child health (*Required).* • Importantly, 15 or more scholarly works must have been published since appointment as an assistant professor at The Ohio State University. Rarely, fewer than 15 publications may result in a positive promotion review, while more than 20 may not. • Evaluation of the strength of a candidate's publication record is shaped by authorship position, journal impact factors, thematic nature of the work, relevance to the field of pediatrics and child health, impact, and originality. If these factors are all favorable, the number of publications necessary for favorable consideration might be 15. If these factors are less compelling, more might be needed. • Although review articles and textbook chapters 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. • The impact of publication can be judged by calculation and presentation in the dossier of the H-index (or a similar metric). • Momentum is an important consideration. There should exist a trajectory of increasing scholarly activity and outcomes over time.
Participation in collaborative, multidisciplinary research or team science	• Record of collaborative scholarship with manuscripts on which authorship is first, senior, or corresponding. Middle authorship that is uniquely contributory, clear, and well documented is also valued. • Participation as co-principal investigator on nationally funded projects, principal investigator of components of NIH U or P grants, and participation as an essential core service provider on

	multiple externally-funded grants in which the contribution of the faculty member is clearly evident. • While first/senior authorship is more indicative of leadership and reputation, middle authorship can provide evidence of national collaboration.
Acquired competitive external funding in support of their research program (*Required*)	• Achievement of external, competitive research funding as a principal investigator, co-investigator or collaborator (*Required)* Sources of funding include foundation, industry, or federal agencies. The Department especially values funding as principal investigator from the NIH or comparable agencies. • Serving as the site-PI for a multi-center trial(s) would NOT satisfy the expectation for extramural funding • Creation of patents that generate significant licensing income or spin-off companies would meet the equivalent criteria of extramural funding.
Development of a national level of impact and recognition as a clinician scholar (*Required*)	• Membership on national committees or program planning committees. • Invited platform or keynote presentations at national/international scientific sessions; oral abstract presentations by the faculty member or their mentees do NOT satisfy this requirement • Visiting Professorships at peer institutions • Invited participation on editorial boards, study sections, and grant review sections • Social media portfolios such as peer-reviewed blog vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics *may* provide evidence of national reputation in some cases.

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Examples of Expectations	**Examples of Evidence/Documentation**
Administrative service to the department, COM, or University	• Participation on, or leadership of, departmental, College of Medicine, hospital, and/or University committees or working groups • Service on departmental or College of Medicine GME committees • Participation on the Institutional Review Board or Intramural Research Review Committee
Excellent patient care	• Clinical program development or enhancement • Innovative programs that advance the mission of the University or hospital, such as creation and sustenance of a program to deliver healthcare to the community • Design and implementation of a novel program to improve health care access
Professional service to the field of pediatrics	• Leadership of or election to a national committee or organization • Development or expansion of initiatives that impact the field of pediatrics or medicine • Provision of professional expertise to public and private entities beyond the University • Performing journal reviews • Service on editorial boards or editorships • Service as a grant reviewer for national funding agencies • Elected, selected, or appointed to offices held for national professional societies

	• Service as an advocate for children's health, community health, school health and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Pediatrics and The Ohio State University • Service on panels and commissions, and professional consultation to industry, government, education, and non-profit organizations. • Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion.
Innovative program development	• Development of initiatives that promote exposure to medicine and science in high school or undergraduate students.
Advocacy for child health	• Advocacy for children's health, community health, school health • Funding at the level of local, state, and federal agencies
Provision of professional expertise to public and private entities beyond the University	• Election to Board of Directors or other national leadership position in a public or private entity that enhances the field of pediatrics or medicine.

D. Promotion to Clinical Professor, Clinician Scholar Pathway

The awarding of promotion to the rank of clinical professor on the Clinician Scholar Pathway must be based upon clear and convincing evidence the candidate has developed national leadership and, in most instances, international recognition as a clinician scholar since being appointed to the rank of associate professor. Participation alone on national committees, even if via election or invitation, is not sufficient evidence; rather the position must be one of leadership. Similarly, while national/international abstract presentations are desired, these are not sufficient evidence of a leadership position. See examples below. In most cases, evidence of national leadership or international recognition and impact should be related to scholarship, but can also be related to clinical, educational, or professional service. National/international distinction is not required in every domain.

TEACHING Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence/Documentation**
Distinctive record of superlative teaching and mentoring excellence	• Outstanding evaluations by learners including students, residents, fellows, postdoctoral trainees, local colleagues, or national peers (*Required)*. The dossier must clearly document the faculty member's contribution and the impact of these efforts, with formal peer-review and teaching evaluations. • Evaluations and peer feedback based on presentations and learner interactions locally at other academic institutions, or at scientific conferences. • Achievement by direct mentees, including publications, external funding, and invited presentations. • Teaching and/or mentoring awards and other honors • Participation in education and training-related specialty committees, specialty societies and specialty board committees. Examples are Resident Review Committees, specialty boards such as the American Board of Pediatrics, the Association of Pediatric Program Directors, and the Accreditation Council for Graduate Medical Education committees. • Programs that improve or access to teaching for learners from all backgrounds

Mentorship of junior faculty is an expectation for faculty being considered to the rank of professor (*Required*)	• It is presumed 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
Favorable impact on teaching and training programs	• Curriculum innovation, new teaching modalities or methods of evaluating teaching, and program or course development • Development of impactful, innovative programs that integrate teaching, research and patient care • Professional development in mentoring or teaching

SCHOLARSHIP/CREATIVE WORKS/RESEARCH Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence /Documentation**
Required: a sustained and expanded impact and national reputation for scholarship	• Participation in basic, translational, informatics, education, clinical and health services research projects or in clinical trials as primary investigator or co-principal investigator (*Required).* Serving solely as the site-PI for a multi-center trial(s) would NOT satisfy this requirement. • An increasing proportion of primary or senior authorship of peer-reviewed journal publications and scholarly review articles is encouraged • 20-30 peer- reviewed publications since appointment as an associate professor in journals with a typical impact factor for the field of pediatrics and child health (*Required)*. Evaluation of the strength of a candidate's publication record is shaped by authorship position, journal impact factors, thematic nature of the work, relevance to the field of pediatrics and child health, impact, and originality. If these factors are all favorable, the number of publications necessary for favorable consideration might be 20. If these factors are less compelling, more might be needed. • Faculty members who participate in team science may have a record of scholarship primarily as middle author. In these cases, there must be evidence from other domains that demonstrate at the national level the faculty member's unique expertise (e.g., invitation to serve on study sections, invitation to speak at national meetings, etc). Faculty are encouraged to avoid an excessively literal interpretation of the number of peer-reviewed publications needed for promotion. • Although review articles and textbook chapters 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. • The impact of publication can be judged by calculation and presentation in the dossier of the H-index (or a similar metric).

	• Momentum is an important consideration. There should exist a trajectory of increasing scholarly activity and outcomes over time.
Participation in collaborative, multidisciplinary research or team science	• Record of collaborative scholarship with manuscripts on which authorship is first, senior, or corresponding. Middle authorship that is uniquely contributory, clear, and well documented is also valued. • Participation as co-principal investigator on nationally funded projects, principal investigator of components of NIH U or P grants, and participation as an essential core service provider on multiple externally- funded grants in which the contribution of the faculty member is clearly evident. • While first/senior authorship is more indicative of leadership and reputation, middle authorship can provide evidence of national collaboration.
Acquired competitive external funding in support of their research program (*Required*)	• A track record of external, competitive research funding as a principal investigator, co-investigator or collaborator (*Required)* as evidenced by a named role on at least two external, competitive research grants since the time of promotion to associate professor. Sources of funding include foundation, industry, or federal agencies. The Department especially values funding as principal investigator from the NIH or comparable agencies. • Serving as the site-PI for a multi-center trial(s) would NOT satisfy the expectation for extramural funding • Creation of patents that generate licensing income or spin-off companies would meet the equivalent criteria of extramural funding.
Candidate has attained a well-developed national reputation and international influence as a leader in their field *(Required*)	• Leadership (chair) of a national committee or program planning committee. • Invited platform or keynote presentations at national/international scientific sessions; oral abstract presentations by the faculty member or their mentees do NOT satisfy this requirement • Visiting Professorships at peer institutions • Invitations to chair editorial boards, study sections, and grant review sections • Social media portfolios such as peer reviewed blog vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics *may* provide evidence of national reputation in some cases.

SERVICE Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence/Documentation**
Administrative service to the department, COM, or University	• Leadership of departmental, College of Medicine, hospital, and/or University committees or working groups • Service on departmental or College of Medicine GME committees • Service on departmental COM APT Committee • Participation on the Institutional Review Board or Intramural Research Review Committee

Excellent patient care	• Clinical program development or enhancement • Innovative programs that advance the mission of the University or hospital, such as creation and sustenance of a program to deliver healthcare to the community • Design and implementation of a novel program to improve health care access
Professional service to the field of pediatrics	• Leadership of a national committee or organization • Development or expansion of initiatives that impact the field of pediatrics or medicine • Provision of professional expertise to public and private entities beyond the University • Chair of editorial boards or editorships • Chair of grant review for national funding agencies • Leadership of local and national professional societies, service as a leading advocate for children's health, community health, school health and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Pediatrics and The Ohio State University, • Leadership on panels and commissions, and professional consultation to industry, government, education, and non-profit organizations. • Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion.
Innovative program development	• Development of initiatives that promote exposure to medicine and science in high school and/or undergraduate students.
Advocacy for child health	• Advocacy for children's health, community health, school health • Funding at the level of local, state, and federal agencies
Provision of professional expertise to public and private entities beyond the University	• Election to Board of Directors or other national leadership position in a public or private entity that enhances the field of pediatrics or medicine.

E. Promotion to Associate Clinical Professor, Clinical Excellence Pathway

The Clinical Excellence Pathway is appropriate for faculty members whose direct patient care responsibilities or patient care administration are 80-90% of their total professional effort. Teaching and scholarship are not required, as the heavy clinical time commitment typically does not allow traditional scholarship, such as peer-reviewed publications or other academic output. These faculty are expected to support the research and teaching mission of the Department of Pediatrics, but the focus of the promotion review is on demonstration of clinical excellence. Participation in quality improvement activities and clinical program building initiatives are meritorious endeavors on this pathway to the extent they are documented and substantive. In sum, excellence in clinical practice must have potential to enhance the overall reputation of the Department of Pediatrics, Nationwide Children's Hospital, and the College of Medicine. The hallmark of an accomplished faculty member on the Clinical Excellence Pathway is an innovative, efficient, evidence-based practitioner who is recognized locally and regionally early on in their career.

The awarding of promotion to the rank of associate professor on the clinical excellence pathway must be based upon convincing evidence the candidate has demonstrated outstanding clinical outcomes and a record of impact relating to clinical care. Additionally, a record that demonstrates a faculty member's clinical expertise is recognized outside the OSU system. Social and digital media outlets can be used to demonstrate impact. However, these non-traditional metrics do not in and of themselves demonstrate clinical excellence. Promotion will not be granted purely on the basis of length of service to the institution, clinical productivity, or satisfactory job performance.

CRITERIA FOR PROMOTION TO ASSOCIATE PROFESSOR, CLINICAL EXCELLENCE PATHWAY Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence/Documentation**
Teaching Excellence	• Not required, although participation in teaching and mentoring of trainees and early career faculty is valued and may be included
Scholarship Excellence	• Not required • While traditional research (e.g., clinical, translational, basic, or population health science) is not a focus of this pathway, publications or written reports demonstrating success in clinical performance (as detailed below) are valued
Excellence in clinical performance	• Demonstration of *personally attributable* impact or excellence in clinical performance is the hallmark of the clinical excellence pathway (*Required)* • Quantitative quality indicators may be used, such as formal morbidity/mortality metrics, documented low complication rates, vaccination rates, readmission rates, process improvements, reduction in health disparities, improvements in community health outcomes and utilization management measures. Clinical productivity metrics (e.g., wRVU) per se, are NOT sufficient for supporting excellence in clinical performance. • Multiple subjective measures supporting excellence in clinical care, such as written testimonial recognition of excellence from patients or families, colleagues, residents, students, or other health care team members. • Preferred provider recognition. Referral patterns or other metrics that indicate acknowledgment of a faculty member's expertise such as, but not limited to, the number of cases referred for a second opinion, patients referred from other states or other regions within Ohio. • Traditional and social media can be used to exemplify the impact of the faculty member's excellence (e.g., disease specific Facebook forums, twitter etc.) but are, in and of themselves, insufficient to justify promotion. • Evidence that a faculty member has developed a new program or led improvements in an existing program and that subsequent to those innovations the success of the program has materially improved, or the program has been duplicated or adopted within the medical center or by other institutions or practices. • Leadership of successful quality improvement or systems-based efforts that improve care delivery or health care outcomes; these should be translatable or realistically adaptable to other settings locally and nationally. • Cultivation of referral patterns from beyond the typical distribution for the candidate's specific area of clinical practice, demonstrating a reputation external to the organization as "best in class" -- this may include referral of the most complex and sickest patients thus identifying physicians with unique clinical skills as exemplary in their field. • Operational improvements that make practice more efficient, effective, easier to access, or more cost effective.
Local and regional recognition (*Required*)	• Invitations to speak locally, regionally or at other hospitals, academic medical centers, or statewide professional societies.

	• Dissemination of clinical expertise by presentation at grand rounds or equivalent regional, state, or national conferences, participation in the development of clinical practice guidelines, small group activities with peer-reviewed data and internal benchmarking, and participation in web-based education, online seminars, podcasts, blogs, social media outlets and creation of educational websites relating to patient care to the extent their impact can be quantified. • Development of innovative approaches to the management of a specific clinical problem that becomes a local, regional, or national standard of practice. • Demonstration of the faculty member's expertise as recognized by the receipt of honors and awards from internal and external sources, for example ranking among the region's and nation's elite such as Best Doctors ©, Castle-Connolly, or similar recognitions. • Receipt of awards from local, state, or national organizations for clinical excellence • Documented and effective advocacy for children's health, community health, school health and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Pediatrics and The Ohio State University. • Sustained and meaningful participation and/or leadership in the Department of Pediatrics, Nationwide Children's Hospital, the College of Medicine, The Ohio State University Wexner Medical Center, and local or regional, and national committees related to clinical care. • Demonstration of collaboration with researchers as a skilled phenotyper or a clinical trial collaborator. • Interaction with educators in the Department of Pediatrics, other entities at Nationwide Children's Hospital, in the College of Medicine or beyond that directly or indirectly results in improved clinical care in a measurable manner. • Social media portfolios such as blog vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics *could* provide evidence of local/regional recognition provided that the work products are rigorously peer reviewed.
Track record of exemplary clinical leadership and unique clinical program development at Nationwide Children's Hospital and/or the Ohio State University Wexner Medical Center	• In addition to examples above, this may include both clinical and administrative work and must be supported by written documentation such as internal letters of support from departmental or hospital leadership and external letters of support from referring physicians or peers in the candidate's field. • Development of initiatives that promote exposure to medicine or science in high school or undergraduate students • Evidence of development of programs to identify challenges and solutions to healthcare access or delivery. • Evidence of the faculty member's efforts and participation in programs supporting the clinical mission by improving workforce talent.

F. Promotion to Clinical Professor, Clinical Excellence Pathway

Faculty members with 80-90% or greater patient care, clinical administrative, and/or clinical leadership responsibilities are eligible for promotion to clinical professor, utilizing the general principles outlined previously in the section on promotion to the rank of associate clinical professor on this pathway. Importantly, to justify promotion to the rank of Clinical Professor on the Clinical Excellence Pathway, the faculty member must demonstrate evidence of individual national-level reputation or impact.

Promotion to the rank of Clinical Professor on the Clinical Excellence Pathway must be based on clear and convincing evidence that the candidate has demonstrated a level of excellence and a record of impact beyond the usual clinician's scope or sphere of influence since being promoted to the rank of associate professor. This impact is evidenced by the overall volume and reach of candidate's body of clinical and clinical administrative work. There must be convincing evidence that the candidate has met more advanced criteria for excellence in the scholarship of practice since appointment or promotion to the rank of associate professor. Mentorship of junior faculty is an expectation for faculty being considered to the rank of professor.

Promotion is not granted purely based on length of service to the institution, satisfactory job performance, or continuation of projects which supported the candidate's promotion to associate professor. Singular achievements are not sufficient; there must be a body of work accomplished during the interval as associate professor that supports promotion. Metrics such as national awards for clinical excellence and innovation are clear indicators of individual achievement. Development, facilitation, or oversight of policies, advocacy initiatives, or procedures – as a leader -- that result in improvements in patient outcomes, improved access, more efficient or value-based care, or more effective means of delivering care may support promotion on this pathway. Leadership of a program that results in a positive national citation of the Department of Pediatrics, Nationwide Children's Hospital, the College of Medicine, or The Ohio State University Wexner Medical Center as developing best practices or methods, setting standards for guidelines or processes, attracting inquiries and site visits from other health centers, and contributing to an increase in national rankings is supportive of promotion. Documented, successfully advocacy for children's health, community health, school health and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Pediatrics, and The Ohio State University is also evidence of accomplishment. Continued recognition of clinical excellence by patients, colleagues, members, and others is an expectation.

CRITERIA FOR PROMOTION TO PROFESSOR, CLINICAL EXCELLENCE PATHWAY Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. *Required* elements are noted.	
Examples of Expectations	**Examples of Evidence/Documentation**
Teaching Excellence	• Outstanding clinical mentorship of trainees (residents, fellows) and early career faculty with evaluations documenting the faculty member's contribution and impact of these efforts. • Peer-evaluations noting excellence in clinical mentorship and guidance.
Scholarship Excellence	• *Not required* • While traditional research (e.g., clinical, translational, basic, or population health science) is not a focus of this pathway, publications or written reports demonstrating success in clinical performance (as detailed below) are valued

Excellence in clinical performance	• Demonstration of new, *personally-attributable* impact or excellence in clinical performance since the time of promotion to the rank of associate professor is the hallmark of promotion to Professor on the clinical excellence pathway (*Required)* • Quantitative quality indicators may be used, such as formal morbidity/mortality metrics, documented low complication rates, vaccination rates, readmission rates, process improvements, reduction in health disparities, improvements in community health outcomes and utilization management measures. Clinical productivity metrics (e.g., wRVU) per se, are NOT sufficient for supporting excellence in clinical performance. • Multiple subjective measures supporting excellence in clinical care, such as written testimonial recognition of excellence from patients or families, colleagues, residents, students, or other health care team members. • Preferred provider recognition. Referral patterns or other metrics that indicate acknowledgment of a faculty member's expertise such as, but not limited to, the number of cases referred for a second opinion, patients referred from other states or other regions within Ohio. • Traditional and social media can be used to exemplify the impact of the faculty member's excellence (e.g., disease specific Facebook forums, twitter etc.) but are, in and of themselves, insufficient to justify promotion. • Evidence that a faculty member has developed a new program or led improvements in an existing program and that subsequent to those innovations the success of the program has materially improved, or the program has been duplicated or adopted within the medical center or by other institutions or practices. • Leadership of successful quality improvement or systems-based efforts that improve care delivery or health care outcomes; these should be translatable or realistically adaptable to other settings locally and nationally • Cultivation of referral patterns from beyond the typical distribution for the candidate's specific area of clinical practice, demonstrating a reputation external to the organization as "best in class" -- this may include referral of the most complex and sickest patients thus identifying physicians with unique clinical skills as exemplary in their field. • Operational improvements that make practice more efficient, effective, easier to access, or more cost effective.
National recognition (*Required)*	• Invitations to speak nationally or at other hospitals, academic medical centers, or professional societies. • Dissemination of clinical expertise by presentation at grand rounds or equivalent national conferences, participation in the development of clinical practice guidelines, small group activities with peer-reviewed data and internal benchmarking, and participation in web-based education, online seminars, podcasts, blogs, social media outlets and creation of educational websites relating to patient care to the extent their impact can be quantified. • Development of innovative approaches to the management of a specific clinical problem that becomes a local, regional, or national standard of practice

	• Demonstration of the faculty member's expertise as recognized by the receipt of honors and awards from internal and external sources, for example ranking among the region's and nation's elite such as Best Doctors ©, Castle-Connolly, or similar recognitions. • Receipt of awards from local, state, or national organizations for clinical excellence • Documented and effective advocacy for children's health, community health, school health and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Pediatrics and The Ohio State University • Sustained and meaningful participation and/or leadership in the Department of Pediatrics, Nationwide Children's Hospital, the College of Medicine, The Ohio State University Wexner Medical Center, and local or regional, and national committees related to clinical care. • Demonstration of collaboration with researchers as a skilled phenotyper or a clinical trial collaborator. • Interaction with educators in the Department of Pediatrics, other entities at Nationwide Children's Hospital, in the College of Medicine or beyond that directly or indirectly results in improved clinical care in a measurable manner. • Social media portfolios such as peer reviewed blog vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics *could* provide evidence of national reputation in some cases.
Unique clinical program development at Nationwide Children's Hospital and/or the Ohio State University Wexner Medical Center	• In addition to examples above, this may include both clinical and administrative work and must be supported by written documentation such as internal letters of support from departmental or hospital leadership and external letters of support from referring physicians or peers in the candidate's field. • Evidence of development of programs to identify challenges to accessing healthcare or programmatic change that address these challenges
Track record of clinical leadership	• Leadership of operational improvements that make practice more efficient, effective, easier to access, or more cost effective • Continued evidence of the increasing impact at the state or national level of programs developed to identify challenges to accessing healthcare or programmatic changes designed to address these challenges • Evidence of the faculty member's leadership of programs supporting the clinical mission by improving workforce, talent. Demonstrating regional or national recognition of this work e.g., programs being incorporated at peer institutions • Evidence of faculty member's administrative leadership involves creativity, innovation, and is evaluated by outcomes. These leadership roles may include the following: o Health system leadership of patient care programs, operations, or health care finance o Leadership at the Departmental, College, University or national level of programs that advance disease prevention, patient care or faculty and staff wellness

4. 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. Promotion to Research Associate Professor

Candidates for promotion to research associate professor are expected to demonstrate the beginnings of a national recognition of their expertise. Research faculty are not expected to establish an independent program of research but rather support of the investigative work of others. It is expected in general 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 as principal investigator or multiple principal investigator is not required. Promotion will entail generation of a renewed contract. There is no presumption of a change in contract terms.

CRITERIA FOR PROMOTION TO RESEARCH ASSOCIATE PROFESSOR Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence/Documentation**
Teaching Excellence	• *Not required*, although participation in teaching and mentoring of trainees and early career faculty is valued and may be included
Service Excellence	• *Not required*
Documentation of a sustained and substantial record of scholarship based in area of expertise.	• 15-20 peer-reviewed journal publications since their appointment as a research assistant professor (*Required)*. First, senior, or corresponding authorships are not necessarily expected, but a faculty member should demonstrate their supportive role to the project. • 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. • Momentum is an important consideration. There should exist a trajectory of increasing scholarly activity and outcomes over time.
Demonstrate the beginnings of a national recognition of their expertise (*Required*)	• 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 • Social media portfolios such as peer reviewed blog vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics *could* provide evidence of national reputation in some cases.

Demonstrate a commitment to College and University values	• Exhibit professionalism and foster a safe and collaborative work environment as evidenced by peer or supervisor letters or awards.

B. Promotion to 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 established for promotion to associate professor. Research faculty typically are not expected to establish an independent program of research. It is expected in general that the successful candidate will have a sustained record of 95% salary recovery from extramural sources. A record of continuous peer-reviewed extramural and/or commercial funding is required, along with demonstrated research productivity as a result of such funding. Research faculty typically serve as co-investigators, and independent extramural funding as principal investigator or a multiple principal investigator is not required. Promotion will entail generation of a renewed contract. There is no presumption of a change in contract terms.

CRITERIA FOR PROMOTION TO RESEARCH PROFESSOR Please note that these are not intended to be a list of requirements but are examples for consideration for individual candidates. Promotion decisions are based on the totality of the accomplishments of the candidate as detailed above. ***Required* elements are noted.**	
Examples of Expectations	**Examples of Evidence/Documentation**
Teaching Excellence	• *Not required*, although participation in teaching and mentoring of trainees and early career faculty is valued and may be included if desired by candidate.
Service Excellence	• *Not required*
Documentation of a sustained and substantial record of scholarship based in area of expertise.	• 20-30 peer-reviewed journal publications since appointment as research associate professor *(Required)*. Some first, senior, or corresponding authorships are expected. On middle author publications, the candidate should document a supportive role to the project. • 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. • Momentum is an important consideration. There should exist a trajectory of increasing scholarly activity and outcomes over time.
Established a national level of recognition and impact beyond established for promotion to associate professor (*Required*)	• 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 • Social media portfolios such as peer reviewed blog vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics *could* provide evidence of national reputation in some cases

Demonstrate a commitment to College and University values	Exhibit professionalism and foster a safe and collaborative work environment as evidenced by peer or supervisor letters or awards.

5. Promotion of Associated Faculty

Associated faculty for whom promotion is a possibility follow the promotion guidelines and procedures for tenure-track and clinical faculty (see Promotion and Tenure and Promotion Reviews above), with the exception that the review does not proceed to the college level if the Department Chair's recommendation is negative and does not proceed to the University level if the dean's recommendation is negative.

The relevant criteria for the promotion of adjunct faculty members shall be the same as those for the promotion of tenure-track, clinical, or research faculty, as appropriate to the appointment, above.

A. Compensated Associated Faculty (i.e., Practice)

For compensated associated faculty members paid through The Ohio State University and/or the Pediatric Academic Association who are principally focused on patient care, the promotion criteria and procedures will be identical to those for the Clinical Excellence Pathway, except that the decision of the dean is final. For compensated associated faculty who contribute principally through educational activities, the promotion criteria and procedures will be identical to those for the Clinician Educator Pathway, except that the decision of the dean is final.

B. Uncompensated Associated Faculty (i.e., Adjunct)

For uncompensated associated faculty members (adjunct faculty), promotion should reflect contributions to the Department of Pediatrics 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 Department of Pediatrics and or College committees, contributions to medical student curriculum development or other evidence of contributions to the educational or scholarly mission of the Department of Pediatrics or College. For promotion to professor, the level of contribution must demonstrate sustained and enhanced engagement or leadership.

Requirements for promotion of uncompensated associated faculty are outlined below.

- Submission of an updated Curriculum Vitae
- Letters from two people, including the faculty member's immediate supervisor who can attest to the associated faculty member's contributions to the mission of the Department of Pediatrics
- Teaching evaluations if available
- Letter from the Appointment, Promotion and Tenure Committee including the vote
- Letter from the department chair
- Review and approval by College of Medicine's Office of Faculty Affairs.

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. PROMOTION AND TENURE, AND PROMOTION REVIEW: Procedures for Tenure Track, Clinical and Research Faculty

The Department's procedures are fully consistent with those set forth in University Rule 3335-6-04 and with the University Office of Academic Affairs' annually updated procedural guidelines for promotion and tenure reviews found in Chapter 3 of the *Procedures and Guidelines Handbook*. The basic requirements for promotion and tenure reviews are outlined in the following paragraphs.

In evaluating a candidate's qualifications in teaching, scholarship, and service, flexibility will be exercised, balancing (where appropriate) greater commitments and responsibilities in one area of performance against lighter commitments and responsibilities in another. As the College and Department enter new fields of endeavor, including interdisciplinary work, and place new emphasis on its continuing activities, instances will arise in which the proper work of a faculty member may depart from established academic patterns. Generally, distinguished achievement in scholarship must include evidence of creative expression and innovation in the candidate's discipline. In all instances, outstanding accomplishment in accordance with the criteria set forth, is an essential qualification for appointment and promotion to all faculty positions. The candidate for promotion should demonstrate in their career a spirit of collaboration and alignment with the values and culture of the College and Department. Maintaining these standards for all faculty is essential to enhance the University as an institution dedicated to the discovery and transmission of knowledge.

1. Candidate Responsibilities

Candidates are responsible for following the University guidelines, submitting a complete, accurate dossier fully consistent with the University Office of Academic Affairs' guidelines and providing a copy of the APT under which they wish to be reviewed, if other than the department's current document. If external evaluations are required, candidates are responsible for reviewing the list of potential external evaluators compiled for their case according to the department's guidelines. Each of these elements is described in detail below.

A. Dossier

Every candidate must submit a complete and accurate dossier that follows the Office of Academic Affairs core 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 core dossier outline including, but not limited to, those highlighted on the checklist.

While the Appointments, 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 they are to complete. It is the responsibility of the Department of Pediatrics to evaluate and verify this documentation. Please refer to the APT Toolbox for a wealth of information on completing a dossier.

Unless specifically stated in the core dossier, the time period for teaching documentation to be included in the dossier for probationary faculty is the start date of employment as faculty at The Ohio State University to present. For tenured or non-probationary faculty, it is the date of last dossier submission for promotion or the last five years, whichever is less. Information included in a previous promotion is not included. However, the Department APT committee may allow a candidate to include information prior to the date of last promotion or reappointment if it believes such information would be relevant to the review. Any such material should be clearly indicated.

Scholarship documentation in the dossier must cover the duration of the faculty's academic career, including residency, fellowship, or post-doctoral training, as this information provides context to the more recent and relevant research record and/or demonstrates scholarly independence. For faculty being considered for promotion at 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 current time. All scholarship outcomes will be reviewed for increasing independence over time and an increasing trajectory of significant scholarly outcomes over time. For faculty being considered for promotion at 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.** Information about scholarship produced prior to the start date (for probationary faculty) or date of last promotion or reappointment may be provided. Any such material should be clearly indicated. However, it is the scholarship performance since the start date or date of last promotion that is to be the focus of the evaluating parties All scholarship outcomes will be reviewed for independence and a continued significant scholarly outcome.

The time period for service documentation for probationary faculty is the start date to present. For tenured or non-probationary faculty, it is the date of last dossier submission for promotion, reappointment, or the last five years, whichever is more recent, to present. The department's Appointment, Promotion, and Tenure Committee 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. Any such material should be clearly indicated.

The 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 of Pediatrics. The documentation of teaching is forwarded along with the dossier. The documentation of scholarship and service is for use during the Department of Pediatrics review only unless reviewers at the College and University levels specifically request it. The appendix as well as additional documentation of scholarly activity that is not part of the University approved dossier that may be useful for the Department and College review, will not be forwarded to the University level unless requested by the University Office of Academic Affairs.

B. Documentation

Faculty members preparing their dossiers for promotion and/or tenure review should consult Chapter 3 of the *Procedures and Guidelines Handbook* to ensure that all required documentation is included. The following paragraphs provide suggested standards for documenting excellence in teaching, research and scholarship, and service.

1. Teaching

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

All tenure track and clinical faculty members (except for faculty on the Clinical Excellence Pathway) in the College of Medicine must be engaged in teaching, development of the Department of Pediatrics and College's academic programs, and mentoring of students, residents, fellows, or postdoctoral fellows. Evidence of effective teaching must be demonstrated by documentation of teaching activities over a sustained period. Evidence for effective teaching may

be collected from multiple different sources including students, residents/fellows, peers, self-evaluation, and supervisors.

Yearly student evaluations, resident & fellow evaluations (when applicable) and peer evaluations are *required*, with minimum of one peer evaluation per year. Effectiveness in teaching is demonstrated by positive evaluations from students, residents, fellows, local colleagues, and national peers. The department has in place a consistent methodology and assessment tool for teacher evaluation by students, residents & fellows in specific types of instructional settings.

Administration of an assessment tool cannot be under the control of the faculty member being evaluated. Faculty members may supplement the required assessment tool with others if they wish. Students, residents & fellows must be provided an opportunity to assess the instructor and course using the required assessment tool in every regular classroom course. Guidelines exist for the frequency with which required assessment tools should be administered in other types of instructional settings such as outpatient clinics, inpatient services, and the operating room. Regardless of the instructional setting, effort should be made to obtain evaluations from the largest number of students, residents, and fellows possible. When there is a significant discrepancy between the number of students, residents & fellows enrolled and the number providing evaluations, the evaluations cannot be assumed to represent a consensus of learner opinion. The Department of Pediatrics is aware of the challenge of obtaining learner evaluations when confidentiality of the evaluation is at risk.

Typically, documentation of teaching for the promotion dossier should include the following items since initial appointment, date of last dossier submission for promotion or the past five years whichever is less (see core dossier template for specific timelines):

- cumulative SEI reports (Student Evaluation of Instruction through Summer Term 2025) and SSLE reports (Survey of the Student Learning Experience) computer-generated summaries prepared by the Office of the University Registrar for every formal class
- medical student evaluations, for example using Vitals
- resident and fellow evaluations, for example using MedHub
- formal peer evaluation of teaching reports as required by the Department of Pediatrics (details provided in the Appendix to this document)
- teaching activities as listed in the core dossier including, involvement in graduate/professional exams, theses, and dissertations, and undergraduate research, mentoring postdoctoral scholars and researchers, extension and continuing education instruction, involvement in curriculum development, awards and formal recognition of teaching, presentations on pedagogy and teaching at national and international conferences, adoption of teaching materials at other colleges or universities, and other relevant documentation of teaching, such as a teaching portfolio, as appropriate.

All faculty members of the Department of Pediatrics must obtain peer review of teaching on an annual basis. The chief or director of the division or center in which the faculty member is assigned may assist in designating peer evaluators. A faculty member may also choose a colleague or a recognized education expert to observe an education activity. This may range from classroom lectures, small group discussions, ward rounds, teaching in the clinic or other venues. Evaluations of lectures such as Grand Rounds, which are required for CME credit, may serve as peer review of teaching when conducted by a single peer reviewer. Assessment by observation of teaching is most useful when done systematically over time and conducted with the specific goal of offering constructive suggestions that can be incorporated in subsequent teaching instances.

When a peer review expert or colleague performs the evaluation, written comments should be provided, and the reviewer should have the ability to meet with the faculty member to review strengths and areas for advancement in teach methods. Peer evaluation resources can be found here.

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

2. Scholarship

Scholarship is broadly defined as the discovery and dissemination of new knowledge by research, study, and learning and the scholarship of practice. This includes but is not limited to investigator initiated clinical trials and research based on cases or case series, educational outcomes research, development of academic modules, and entrepreneurship. The nature of scholarship should be pertinent to the faculty member's track and pattern of responsibilities. This department has incorporated mechanism in Section VII to recognize new and emerging methods of dissemination of scholarship, including websites, social media, etc.

Evaluation of scholarship must be open to the ongoing evolution of new scholarly domains in the medical sciences. In the College of Medicine, a faculty member's scholarship must be demonstrated to be of high quality, significance, and impact. This document specifically establishes how a faculty member's scholarship will be documented and assessed in terms of quality and significance.

All tenure track, clinical, and research faculty members (except for faculty on the Clinical Excellence Pathway) must develop a record of scholarship that is documented by a body of original scholarly work over a period of time. Scholarship is broadly defined, including all aspects of basic science, clinical research including clinical trials and research based on cases or case series, educational outcomes research, epidemiological research, informatics research, development of academic modules, peer-reviewed web-based materials, entrepreneurship, *et cetera*. The evidence for scholarship must refer to original, substantive works that are documented achievements. Recognition of the scholarly work must also be external to the University, residing in the scientific communities relevant to the faculty member's field of scholarship. The nature of scholarship should be pertinent to the faculty member's track and pattern of responsibilities.

Evidence of scholarship includes but is not limited to peer-reviewed journal articles, bulletins and technical reports, original books and monographs, edited books, chapters in edited books, editor reviewed journal articles, reviews and abstracts, papers in proceedings, unpublished scholarly presentations, externally funded research, funded training grants, other funding for academic work, prizes and awards for research or scholarly or creative work, major professional awards and commendations. Evidence of scholarship may also include invited lectures at other universities, symposia, and conferences; invention disclosures, patent activity, entrepreneurship, technology commercialization, software development; editorship of a major collection of research work; leadership of advanced seminars and symposia under organizational sponsorship; and invitations to serve on national review bodies.

Documentation of scholarship also includes grants and contracts submitted and received, and a demonstration of the impact of the scholarship, as documented with citation data, impact factors, book distribution data, adoption of texts or procedures by externals or academic health centers, and so forth. Although receipt of an extramural grant is meritorious, promotion also requires evidence of the impact and outcomes of the scholarly program it supports.

Those in the clinical excellence pathway demonstrate scholarship of practice through innovations in patient care that advance disease prevention, detection, and treatment (see the criteria for the clinical excellence pathway section).

3. Service

Service is broadly defined as administrative service to the University, the College, the department or Wexner Medical Center or Nationwide Children's Hospital. Exemplary patient care, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University is also service. A candidate's service contributions must be high quality and effective. All tenure track and clinical faculty members must contribute to service as evidenced by documentation of contributions over a sustained period of time. This document specifically establishes how the evidence of a candidate's service will be documented and assessed in terms of quality and effectiveness.

High-quality patient care is an expectation of all faculty members with clinical responsibilities, and therefore, evidence of service in addition to usual clinical care duties is necessary for promotion. Evidence of administrative service to the University may include appointment or election to Department of Pediatrics, College, Hospital, and/or University committees, holding administrative/leadership positions, development of innovative programs, and participating in mentoring activities. Program development, reflecting the integration of teaching, service, and research in a specific content area, may be given special recognition and significance. Evidence of professional service to the faculty member's discipline can include editorships of, or service as, a reviewer for journals or other learned publications, offices held and other service to professional societies. Evidence of the provision of professional expertise to public and private entities beyond the University includes service as a reviewer of grants or other scholarly proposals, external examiner or advisor, a panel and commission participant, and as professional consultant to industry, government, and education. Evaluation of service should include evidence of a spirit of collegiality and collaboration with all of those in the many roles that work to advance the department/College and their missions.

C. Appointments, Promotion, and Tenure (APT) Document

Candidates must indicate the Appointments, Promotion and Tenure document under which they wish to be reviewed. Candidates may be reviewed under the Department of Pediatrics' current Appointments, Promotion and Tenure document; or, alternatively, they may elect to be reviewed under either (a) the Appointments, Promotion and Tenure document that was in effect on their start date, or (b) the Appointments, Promotion and 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, 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.

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.

D. External Evaluations

Candidates are responsible for reviewing the list of potential external evaluators developed by the Department of Pediatrics Chair, or the chair's designee, and the Appointments, Promotion and Tenure

Committee. 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. The Department Chair or designee decides whether removal is justified.

2. Department of Pediatrics Appointments, Promotion and Tenure Committee Responsibilities

The responsibilities of the Appointments, Promotion and Tenure Committee in Department of Pediatrics of the College of Medicine are as follows.

- The committee reviews the Department of Pediatrics' Appointments, Promotion, & Tenure document annually and recommends proposed revisions to the faculty.

- The committee considers annually 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 dossier and a careful determination of the availability of all required documentation for a full review, including student and peer evaluations of teaching. Lack of the required documentation will result in denial a non-mandatory review.

- A tenured faculty member may only be denied a formal promotion review under Faculty Rule 3335-6-04 A(3) only once. Faculty Rules 3335-7-08 and 3335-7-36 make the same provision for nonprobationary 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. Faculty in the probationary period of a tenure-track appointment may be denied each year of the probationary period up to the year of the mandatory review.

- A decision by the committee to permit a review to take place in no way commits the Appointment, Promotion, and Tenure Committee, the chair, or any other party to the review to making a positive recommendation during the review itself.

- Only the faculty member under consideration may stop the review process.

Annually, in late spring through early autumn semester, the committee provides administrative support for the promotion and tenure review process as described below.

- **Late Spring:** A Procedures Oversight Designee who will serve in this role for the following year is appointed by the Department Chair to assure reviews are procedurally correct, fair, and free of bias for all faculty members. The Procedures Oversight Designee cannot be the same individual who chairs the committee. The Procedures Oversight Designee's responsibilities are described here.

- **Late Spring:** Names of external evaluators are suggested. The external evaluators will be drawn predominantly from the lists of peer and aspirational peer programs (see Section VII.B.5 below). Justification will be provided in cases when a suggested evaluator is from a program not included on these lists. The candidate should be shown the list of potential evaluators by the Appointments, Promotion

and Tenure committee chair to identify any collaborators, conflicts of interest or other issues that could interfere with the objectivity of the reviews and be invited to augment it with no more than two names (one for clinical excellence and clinician educator) of persons who meet the criteria for objective, credible, evaluators. The department may not use more than two names provided by the faculty (one for clinical excellence and clinician educator).

- **Late Spring:** Internal evidence of the quality of the candidate's teaching, scholarship, and service from trainees and peers is collected.

- **Late Summer:** The Appointments, Promotion and Tenure committee meets to evaluate candidates' completed dossiers and to ensure accomplishments are clearly characterized and documented. The dossiers are reviewed for completeness, accuracy of information (including citations), and consistency with University Office of Academic Affairs requirements; and the committee works with candidates to assure that needed revisions are made in their dossier before the formal review process begins.

- The Committee or its designees will meet with each candidate for clarification as necessary and to provide the candidate an opportunity to comment on their dossier. This meeting or communication is not an occasion to debate the candidate's record.

- Upon request, tenure-track faculty in the Department at or above the rank of a tenure-track candidate for promotion and/or tenure will be provided access to the candidate's dossier and will have the ability to forward comments to the Appointments, Promotion and Tenure Committee chair for consideration.

- Upon request, clinical faculty in the Department at or above the rank of a clinical faculty candidate for promotion will be provided access to the candidate's dossier and will have the ability to forward comments to the Appointments, Promotion and Tenure Committee chair for consideration.

- Upon request, research faculty in the Department at or above the rank of a research faculty candidate for promotion will be provided access to the candidate's dossier and will have the ability to forward comments to the Appointments, Promotion and Tenure Committee chair for consideration.

- Upon request, associated faculty in the Department at or above the rank of associated faculty candidate for promotion will be provided access to the candidate's dossier and will have the ability to forward comments to the Appointments, Promotion and Tenure Committee chair for consideration.

- A mechanism will exist to permit each candidate's dossier to be accessible for review by the Appointments, Promotion and Tenure Committee at least two weeks before the meeting at which specific cases are to be discussed and voted. Members are expected to review thoroughly and objectively every candidate's dossier in advance of the meeting at which the candidate's case will be discussed. Members are also expected to attend all committee meetings except when circumstances beyond their control prevent attendance, to participate in discussion of every case, and to vote.

- At the meeting for discussion of specific cases, following presentation and formal discussion of each candidate, the Appointments, Promotion and Tenure chair (or co-

chairs) conduct a vote. Only tenured professors participate in assessment of eligibility for award of tenure and promotion on the tenure track. A positive recommendation is secured when a simple majority (greater than 50%) of the votes cast are positive.

- The chair of the Appointment's Promotion and Tenure committee will draft a summary of the deliberations of each candidate following the faculty meeting. This letter will include the committee vote and a summary of the perspectives expressed during the meeting. The letter will be evaluative as well as descriptive and contextualize the vote, including any "minority opinions" as appropriate. In the event the candidate is on the tenure track, this letter must be written by a tenured professor. The letter is forwarded along with the Committee's final recommendation to the Department of Pediatrics chair. It is included in the candidate's dossier.

- Consider the interdisciplinary work of a candidate across multiple units as part of the whole work, especially if the candidate has a joint appointment.

- The Committee will provide a written response, on behalf of the eligible faculty, to any candidate whose comments warrant a response, for inclusion in the dossier.

- The Committee will provide a written evaluation and recommendation to the Department Chair in the case of joint appointees from another tenure-initiating unit. The Appointment, Promotion, and Tenure Committee 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. Department Chair Responsibilities

In the event that the Department of Pediatrics chair is on the clinical faculty, and therefore ineligible to conduct the promotion evaluation of a tenure track candidate for promotion, the Department must appoint or otherwise designate a tenured faculty member who can provide the chair level review. This most typically would be the Vice Chair for Research. For review of candidates being considered for promotion to professor, that designee must be a tenured professor. The responsibilities of the Department of Pediatrics chair or designee 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. The department must ensure that such questions are asked of all applicants in a non-discriminatory manner 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.

- The chair will solicit external evaluations from a list including names suggested by the Appointments, Promotion and Tenure Committee, the chair, and the candidate. More information on external evaluations is provided further on in this document.

- The chair will review faculty with budgeted joint appointments whose primary appointment is in this department. The chair will solicit an 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 charge each member of the Appointment, Promotion and Tenure Committee to conduct reviews free of bias and based on criteria.

- The chair will remove any member of the Appointments, Promotion and Tenure Committee 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 Appointments, Promotion and Tenure Committee's completed evaluation and vote, the chair must provide an independent written evaluation and conclusion of the candidate's suitability for promotion and/or tenure. The chair's written assessment and recommendation for the dean is included in the dossier.

- In the interest of obtaining a fully independent evaluation, the College of Medicine discourages the chair from attending the Appointments, Promotion and Tenure Committee deliberations.

- To inform each candidate in writing after completion of the department review process:

    - Of the recommendations by the APT committee and department chair
    - Of the availability for review of the written evaluations by the APT committee and department chair
    - Of the opportunity to submit written comments on the above material, within ten calendar 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 will submit comments.

- The chair will provide a written response to any candidate comments that warrant response for inclusion in the dossier.

- To forward the completed dossier to the college office by that office's deadline.

- To receive the Appointment, 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 TIU head's independent written evaluation and recommendation, to the head of the other tenure-initiating unit by the date requested.

- The chair will meet with the committee to explain recommendations contrary to the recommendation of the committee.

4. Procedures for Associated Faculty

Adjunct faculty, associated faculty with tenure-track titles, and clinical practice faculty for whom promotion is a possibility follow the promotion guidelines and procedures detailed in Section VII.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.

5. External Evaluations

This department will seek external evaluations predominately from evaluators in the following programs:

1. Boston Children's Hospital/ Harvard University
2. Children's Hospital of Philadelphia/ University of Pennsylvania
3. Cincinnati Children's Hospital/ University of Cincinnati
4. C.S. Mott Children's Hospital/ University of Michigan
5. Texas Children's Hospital/ Baylor University
6. Children's National Hospital/ George Washington University
7. Children's Hospital Los Angeles/ University of Southern California
8. Children's Hospital of Pittsburgh/ University of Pittsburgh Medical Center
9. Rady Children's Hospital/ University of California San Diego
10. Johns Hopkins Children's Center/ Johns Hopkins University
11. St. Louis Children's Hospital/ Washington University
12. Lucile Packard Children's Hospital/ Stanford University
13. Colorado Children's Hospital/ University of Colorado
14. Children's Healthcare of Atlanta/ Emory University
15. Monroe Carell Jr. Children's Hospital at Vanderbilt/ Vanderbilt University
16. Duke Children's Hospital/ Duke University
17. Medical University of South Carolina Children's Hospital
18. Seattle Children's Hospital/ University of Washington
19. New York-Presbyterian Children's Hospital-Columbia
20. Riley Children's Hospital/ Indiana University

Justification will be provided in each case when a suggested evaluator is from a program not included on these lists.

External evaluations of scholarly activity and research are obtained for all promotion reviews in which scholarship must be assessed. These include all tenure-track faculty promotion and tenure or promotion reviews and all clinical and research faculty promotion reviews. External evaluations of scholarly activity and research are not obtained for associated faculty unless the faculty member has been involved in a significant amount of scholarship. The decision to seek external evaluations for an associated faculty member will be made by the Department Chair after consulting with the candidate and the chair of the Appointments, Promotion and Tenure Committee.

As described above, a list of potential evaluators is assembled by the Appointments, Promotion and Tenure Committee, the Department of Pediatrics chair, and the candidate. Candidates are permitted to suggest external evaluator names following the criteria below. However, as required by Faculty Rule 3335-06-04 (B) 3, "no more than one-half of the letters contained in the final dossier should be from persons suggested by the candidate."

A conflict of interest for external reviewers exists if the reviewer is or has been to the candidate: a) a thesis, dissertation, or postdoctoral advisee/advisor; b) a research collaborator, which includes someone who has been a coauthor on a publication within the past 3 years, including pending publications and submissions; c) a collaborator on a project within the past 3 years, including current and planned collaborations; d) in a consulting/financial arrangement with the candidate within the past 3 years, including receiving compensation of any type (e.g., money, goods, or services); e) a relative or close personal friend; or f) in any relationship, personal or professional, that could reduce the reviewer's objectivity. Also excluded are reviewers from the same institution, or those who had previous employment in the same institution within the past 12 months, or those who are being considered for employment at that institution.

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 and other performance, who is not a close personal friend, not a research collaborator (no shared publications in the last five years, unless co-authorship is part of a multi-centered project with a large number of authors), not a former academic advisor or postdoctoral mentor of the candidate (see description of conflict of interest for external reviewers just above). Qualifications are generally judged based on the evaluator's expertise, record of accomplishments, and institutional affiliation. External evaluators must be able to provide an objective evaluation of the scholarly work. They must be at the rank above the candidate being considered unless an exception has been granted by the College. It is therefore essential that the individual or body generating the list of prospective evaluators ascertain the relationship of prospective evaluators with the candidate before seeking a letter of evaluation. This department will solicit evaluations only from professors with institutional affiliations predominately in the programs listed above.

- 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.

- In the event the Department of Pediatrics is unable to obtain the required number of external evaluations, it must document its efforts. The Department must notify the College as soon as it becomes apparent that it will not be able to obtain the required letters in time for the meeting of the eligible faculty. The lack of five external letters (three for clinical excellence and clinician educator pathways) will not stop a mandatory review from proceeding but will halt a non-mandatory review from proceeding unless the candidate, promotion and tenure chair, and the Department of Pediatrics chair all agree in writing that it may proceed and agree that it will not constitute a procedural error. Faculty on the clinical excellence pathway moving to Associate Professor may have three internal letters of evaluation; faculty moving to Professor should have at least one external letter of evaluation out the three total letters

Since the Department of Pediatrics cannot control who agrees to write and or the usefulness of the letters received, approximately twice as many letters will be sought as are required, and they will 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 the required number of useful letters result from the first round of requests.

As described above, a list of potential evaluators is assembled by the Appointments, Promotion and Tenure Committee, the Department Chair or designees, 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. 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.

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 of Pediatrics chair, who will decide what, if any, action is warranted. Examples may include requesting permission from the Office of Academic Affairs to exclude the 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 received must be included in the dossier. If concerns arise about any of the letters, these concerns may be addressed in the written evaluations or brought to the attention of the University Office of Academic Affairs for advice.

VIII. PROMOTION AND TENURE 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. Only the candidate may appeal a negative tenure, promotion, or reappointment decision.

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.

IX. REVIEWS IN THE FINAL YEAR OF PROBATION

In most instances, a decision to deny promotion and tenure in the penultimate probationary year (11th year for faculty members with significant clinical responsibilities, 6th year for those without significant 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 APT Committee and the chair of the Department of Pediatrics 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 (B).

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

X. PROCEDURES FOR STUDENT AND PEER EVALUATION OF TEACHING

A. STUDENT FEEDBACK ON TEACHING

The College of Medicine views teaching broadly, and it includes, but is not limited to, teaching in the classroom, at the bedside, or in the laboratory. If appropriate, faculty in the College of Medicine can make use of the Survey of the Student Learning Experience (SSLE) or can use any other appropriate method of student evaluation of their teaching (e.g. MedHub). Faculty are also reviewed regularly by residents and fellows using appropriate online evaluation systems. The faculty member should reiterate to students that the feedback provided in the evaluations is used both for performance reviews and to provide feedback that can be considered in future teaching.

B. PEER EVALUATION OF TEACHING

All faculty members of the Department of Pediatrics who have teaching as part of their responsibilities must obtain peer review of teaching on an annual basis. The faculty member, division chief, or center director may choose a colleague or a recognized education expert to observe an education activity. Although there is no presumption that a peer reviewer must be of equal or higher rank than the faculty member being reviewed, such a model should be followed to the extent possible.

Peer-evaluation of teaching may occur in many different venues, as applicable to a faculty member's primary teaching responsibility. Faculty members may be evaluated bedside; giving lectures as part of the residency and fellowship programs; at continuing medical education courses at The Ohio State University or elsewhere, lecturing in formal didactic courses, *et cetera*. Because teaching in the College of Medicine can occur at the bedside, in the OR, at a microscope, or at a lectern, there is not one specific form that needs to be used for Peer Evaluation. It can be a standard form a department uses, or it can be in a narrative format that describes what teaching activity was being evaluated, the date, and describes the teaching style and activities (e.g., it could be an email from a peer after a ground rounds or lecture).

The peer-reviewer should focus on such issues as the quality and effectiveness of the instructional materials and assessment tools and the appropriateness of the approach relative to current disciplinary knowledge. At the conclusion of the evaluation, the reviewer meets with the candidate to give feedback and submits a written report to the office of Department of Pediatrics chair, copied to the candidate. 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.

XI. APPENDICES

A. KEY DEFINITIONS & GLOSSARY OF TERMS

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

Appointments, Promotion and Tenure Committee – the body of faculty that make recommendations to the Department of Pediatrics chair or dean regarding the viability of candidates for appointment, promotion and/or tenure; by special approval of the Office of Academic Affairs, the Department of Pediatrics Appointment's Promotion and Tenure Committee serves as the eligible faculty.

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

Associated – a broad category of faculty that encompasses adjunct, practice, visiting, returning retirees, lecturers which are typically intended to be short term appointments. (See also Adjunct Faculty, Practice Faculty)

Clinical faculty – the faculty who primarily engage in clinical, teaching and practice.

Collaborative research / Team science - distinctive contributions made to a team of investigators that result in publications and grants. These contributions are recognizable by extramural consultants and other evaluators. Individual investigators must be able to identify the unique, original, and expert skills and ideas they have contributed to a particular project.

Community engagement - institutional, local, national, and international community contributions that are closely aligned with and complementary to the candidate's scholarly academic achievements. These activities reflect innovations made in science, medicine and/or healthcare that led to demonstrable advances in knowledge, health (individual or population), healthcare or healthcare delivery.

Courtesy Appointment – a no salary appointment for a clinical, research, or tenure track faculty member from another academic department within the University. The title associated with the no salary appointment is always the same as the faculty's title in their home department.

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.

Equity - Equity is defined, in part, as the promotion of access, opportunity, justice and fairness through policies and practices.

Extension of the Tenure Clock – the ability to have up to three years taken off the time clock toward achieving tenure.

Faculty – the College of Medicine has four faculty types: tenure track, clinical faculty, research faculty, and associated 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.

Impact – the direct effect of an individual's work on science, medicine, health care, patient care and/or community. It can be assessed by a variety of metrics.

Inclusion - Inclusion is an approach designed to ensure that the thoughts, opinions, perspectives, and experiences of all individuals are valued, heard, encouraged, respected, and considered.

Institutional Citizenship – participation in service missions relevant to a faculty member's academic activities and to the missions of the College of Medicine and the University. It includes, but is not limited to, efforts in mentoring and professionalism.

Joint Appointment – when a faculty member's FTE (and salary support) is split between one or more academic department it is a joint appointment. (This is different than a **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 a transfer of departments and for joint appointments.)

National recognition – could be based on geographic considerations (i.e., outside of Ohio) or based on national ranking for the discipline.

Non-mandatory review – voluntary promotion or tenure review.

OAA – Office of Academic Affairs (University).

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 faculty review dates. See also reappointment review below.

Practice Faculty – an associated faculty appointment for those who will have a paid associated faculty appointment or have a paid appointment (e.g., staff, physician) (see also **Associated Faculty**)

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

Probationary period – the length of time in which a faculty member on the tenure track must achieve tenure (e.g., 6 years for assistant professor faculty without clinical service, 11 years for assistant professor faculty with significant clinical service responsibilities). It is also defined as the first appointment term for faculty on the Clinical faculty or Research faculty. Once they have been reappointed, they are no longer probationary.

Professionalism - exemplary behavior including demonstration of honesty and integrity in all realms of work; respect for patients, faculty, staff, and learners at all levels; evidence of commitment to continued learning and personal betterment; the encouragement of questions, debate, and respect of all viewpoints without demonstration of prejudice or bias. Maintenance of these behaviors is consistent with the values of The Ohio State University and the College of Medicine.

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

Research faculty –for basic scientist faculty who engage exclusively in research-based scholarship.

SSLE – Survey of the Student Learning Experience.

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

Tenure Initiating Unit, usually synonymous with department. Centers and Institutes are not tenure initiating units (see Appendix B for the complete list of departments).

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

Trajectory – continued momentum and growth in pursuit of an individual's career path. It is expected that one's career trajectory continues to ascend over time. Promotion anticipates sustained upward trajectory and continuing impact. Trajectory is interpreted within the context of mitigating life circumstances.

University Rules, Faculty 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. AMERICAN ASSOCIATION OF UNIVERSITY PROFESSORS STATEMENT ON PROFESSIONAL ETHICS

1. Professors, guided by a deep conviction of the worth and dignity of the advancement of knowledge, recognize the special responsibilities placed upon them. Their primary responsibility to their subject is to seek and to state the truth as they see it. To this end, professors devote their energies to developing and improving their scholarly competence. They accept the obligation to exercise critical self-discipline and judgment in using, extending, and transmitting knowledge. They practice intellectual honesty. Although professors may follow subsidiary interests, these interests must never seriously hamper or compromise their freedom of inquiry.
2. As teachers, professors encourage the free pursuit of learning in their students. They hold before them the best scholarly and ethical standards of their discipline. Professors demonstrate respect for students as individuals and adhere to their proper roles as intellectual guides and counselors. Professors make every reasonable effort to foster honest academic conduct and to ensure that their evaluations of students reflect each student's true merit. They respect the confidential nature of the relationship between professor and student. They avoid any exploitation, harassment, or discriminatory treatment of students. They acknowledge significant academic or scholarly assistance from them. They protect their academic freedom.
3. As colleagues, professors have obligations that derive from common membership in the community of scholars. Professors do not discriminate against or harass colleagues. They respect and defend the free inquiry of associates, even when it leads to findings and conclusions that differ from their own. Professors acknowledge academic debt and strive to be objective in their professional judgment of colleagues. Professors accept their share of faculty responsibilities for the governance of their institution.
4. As members of an academic institution, professors seek above all to be effective teachers and scholars. Although professors observe the stated regulations of the institution, provided the regulations do not contravene academic freedom, they maintain their right to criticize and seek revision. Professors give due regard to their paramount responsibilities within their institution in determining the amount and character of work done outside it. When considering the interruption or termination of their service, professors recognize the effect of their decision upon the program of the institution and give due notice of their intentions.
5. As members of their community, professors have the rights and obligations of other citizens. Professors measure the urgency of these obligations in the light of their responsibilities to their subject, to their students, to their profession, and to their institution. When they speak or act as private persons, they avoid creating the impression of speaking or acting for their College or University. As citizens engaged in a profession that depends upon freedom for its health and integrity, professors have a particular obligation to promote conditions of free inquiry and to further public understanding of academic freedom.

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

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