

**Appointments, Promotion, and  
Tenure  
Criteria and Procedures for  
The Ohio State University  
Department of Otolaryngology-  
Head and Neck Surgery**

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## I Preamble

This document is a supplement to Chapters 6 and 7 of the [Rules of the University Faculty](#); the annually updated procedural guidelines for promotion and tenure reviews in Volume 3 of the Office of Academic Affairs [Policies and Procedures Handbook](#); and other policies and procedures of the college and university to which the department and its faculty are subject.

Should those rules and policies change, the department 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 head.

This document must be approved by the dean of the college and the 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 missions of the college and university, its criteria and procedures for faculty appointments and for faculty promotion, tenure and rewards, including salary increases. In approving this document, the dean and the Office of Academic Affairs accept the mission and criteria of the department and delegate to it the responsibility to apply high standards in evaluating current faculty and faculty candidates in relation to department mission and criteria.

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

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

## II Department Mission

The Department of Otolaryngology-Head and Neck Surgery (OHNS), heretofore referred to as the department, of the Ohio State University is dedicated to the achievement of excellence in education, research and clinical care in all of the various disciplines encompassed by the specialty.

The department is a participant in the education of medical students at all levels of the medical curriculum. It also educates medical school graduates in an OHNS residency program, and in other residency and fellowship programs associated with the specialty. Graduates of these programs become eligible for certification by specialty boards and similar agencies. The department instructs graduate students in the College of Medicine's masters and PhD level program and in other related disciplines. In addition, the department trains postdoctoral fellows in both basic and clinical science categories. The department also conducts a variety of teaching programs for practicing physicians. From time-to-time members of the department may also participate in educational projects for the general public.

The department members, including both those with medical and non-medical doctoral degrees, conduct basic, translational and clinical research. Laboratories associated with the department are active in the instruction of pre-medical students, medical students, residents, postdoctoral fellows and graduate students in research methodology and technique. department research is supported by both internal and external funding. department members are engaged in collaborative projects with researchers in other

departments of the University and outside of the University. The results of these various efforts are regularly presented at various scientific meetings and symposia, and they are published in books, journals and other media.

Physician members of the department are active practitioners of OHNS and its associated specialties. Members of the department who are non-physician practitioners engage in practice related to their area of expertise. These faculty members are organized into divisions based upon surgical specialties and fellowship programs; these divisions are responsible for providing care to patients whose medical problems are encompassed by the specialty or sub-specialty. The department strives to maintain a clinical staff with the capability of providing a broad spectrum of surgical and related services, with special expertise in the management of complex and unusual problems in addition to those considered more common.

Department members also participate in the administration and governance of the OSU Wexner Medical Center and Nationwide Children's Hospital, the College of Medicine and the University through service as members and officers of various committees. In addition, faculty members serve local, regional and national medical organizations in a variety of administrative positions. Faculty members may also serve as members and officers of other charitable and service organizations on a local, regional and national level.

The department performs regular reassessments of the effectiveness of its efforts in teaching, research and service. A comprehensive evaluation is performed and published as the Department of OHNS Annual Report.

A critical component of the department mission is the dedication to continuous improvement in the quality of its contributions to the discipline and practice of OHNS and its various specialties, and to the provision of personalized health care for all of its patients.

### **III Definitions**

#### **A Committee of the Eligible Faculty**

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

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

#### **1 Tenure-track Faculty**

##### **Initial Appointment Reviews**

- For an appointment (hiring or appointment change from another faculty type) review at senior rank (associate professor or professor), the eligible faculty consists of all tenure-track faculty in the department. A vote on the appropriateness of the proposed rank must be cast by all tenured faculty of equal or higher rank than the position requested.

##### **Reappointment, Promotion, or Promotion and Tenure Reviews**

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

## **2 Clinical Faculty**

### **Initial Appointment Reviews**

- For an appointment (hiring or appointment change from another faculty type) review at senior rank (associate clinical professor or clinical professor), the eligible faculty consists of all tenure-track and all clinical faculty in the department. A vote on the appropriateness of the proposed rank must be cast by all tenured faculty of equal or higher rank than the position requested, and all non-probationary clinical faculty of equal or higher rank than the position requested.

### **Reappointment, Contract Renewal, and Promotion Reviews**

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

## **3 Research Faculty**

### **Initial Appointment Reviews**

- For an appointment (hiring or appointment change from another faculty type) review at senior rank (research associate professor or research professor), the eligible faculty consists of all tenure-track and all research faculty in the department. A vote on the appropriateness of the proposed rank must be cast by all tenured faculty of equal or higher rank than the position requested and all non-probationary research faculty of equal or higher rank than the position requested.

### **Reappointment, Contract Renewal, and Promotion Reviews**

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

## **4 Associated Faculty**

## **Initial Appointment, Reappointment, and Contract Renewal**

- Initial appointment (hiring or appointment change from another faculty type), reappointment, and contract renewal of associated faculty members are decided by the department chair in consultation with the Division Director and/or Supervisor.

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

## **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 III.A.2 above.

The promotion of a lecturer to senior lecturer is decided by the department chair in consultation with Division Director or Supervisor.

## **5 Conflict of Interest**

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

## **6 Minimum Composition**

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

## **B Promotion and Tenure Committee**

The department has an Appointments, Promotion and Tenure Committee that assists the eligible faculty in managing the personnel and promotion and tenure issues. The committee consists of the Appointments, Promotion and Tenure Chair and 2 additional tenured faculty members. The

committee's chair and membership are appointed by the department chair or designee. The term of service is three years, with reappointment possible.

When considering cases involving clinical faculty the Promotion and Tenure Committee may be augmented by 2 additional non-probationary clinical faculty members.

When considering cases involving research faculty the Promotion and Tenure Committee may be augmented by 2 additional non-probationary research faculty members.

### **C Quorum**

The quorum required to discuss and vote on all personnel decisions is two-thirds of the eligible faculty not on an approved leave of absence. Faculty on approved leave 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. A member of the eligible faculty on Special Assignment may be excluded from the count for the purposes of determining quorum only if the department head or designee has approved an off-campus assignment.

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

### **D Recommendation from the Eligible Faculty**

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

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

#### **1 Appointment**

A positive recommendation from the eligible faculty for appointment is secured when two-thirds of the votes cast are positive.

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

#### **2 Reappointment, Promotion and Tenure, Promotion, and Contract Renewal**

A positive recommendation from the eligible faculty for reappointment, promotion and tenure, promotion, and contract renewal is secured when two-thirds of the votes cast are positive.

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

## **IV Appointments**

### **A Criteria**



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

## **1 Tenure-track Faculty**

**Instructor.** Appointment at the rank of instructor is made only when the offered appointment is that of assistant professor, but requirements for the terminal degree have not been completed by the candidate at the time of appointment. Procedures for appointment are identical to that of assistant professor. The department will make every effort to avoid such appointments. 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, or the appointment will not be renewed and the third year is the terminal year of employment.

Upon promotion to assistant professor, the faculty member may request prior service credit for time spent as an instructor. This request must be approved by the department's eligible faculty, the department chair or designee, the dean, and the Office of Academic Affairs. Faculty members should carefully consider whether prior service credit is appropriate since prior service credit cannot be revoked once granted except through an approved request to exclude time from the probationary period. In addition, all probationary faculty members have the option to be considered for early promotion.

**Assistant Professor.** An earned terminal degree is the minimum requirement for appointment at the rank of assistant professor. Evidence of potential for scholarly productivity, high-quality teaching, and high-quality service to the department and the profession is highly desirable.

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. A probationary appointment may be terminated at any time subject to the provision of University Rule [3335-6-08](#) and the provision of paragraphs (6), (H), and (I) of University Rule [3335-6-03](#).

Consistent with Faculty Rule, [3335-6-09](#) faculty members 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. 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 as to whether promotion and tenure will be granted at the beginning of the 12th year. For individuals not recommended for promotion and tenure after the mandatory review, the 12th year will be the final year of employment.

Review for tenure prior to the mandatory review year is possible when the Promotion and Tenure Committee (or Committee of Eligible Faculty) determines such a review to be appropriate. The granting of prior service credit, which requires approval of 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 exclude time from the probationary period.

**Associate Professor and Professor.** Appointment offers at the rank of Associate Professor or Professor and offers of prior service credit require prior approval of the Office of Academic Affairs. Appointment at the rank of associate professor normally entails tenure. A probationary appointment at the rank of associate professor in advance of tenure is appropriate only under unusual circumstances, such as when the candidate has limited prior teaching experience or has taught only in a foreign country. The department must exercise care in making these appointments and provide the metrics that the faculty member must achieve to be awarded tenure. For faculty without patient clinical service responsibilities the probationary period may not exceed four years. For faculty with significant patient clinical service responsibility, the probationary period may not exceed six years. Requests for such appointments require the approval of the Dean of the College of Medicine, and the Executive Vice President and Provost.

Appointments at the rank of professor without tenure should not occur.

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

## **2 Clinical Faculty**

Clinical faculty are equivalent in importance to the department as the Tenure Track faculty. The clinical faculty exists for those faculty members whose principal career focus is outstanding teaching, clinical and/or translational research, and delivery of exemplary service. Clinical faculty members will generally not have sufficient protected time to meet the robust scholarship requirements of the tenure-track within a defined probationary period. For this reason, the nature of scholarship for the clinical faculty differs from that in the tenure-track and may be focused on a mixture of academic pursuits including the scholarship of practice, integration, community engagement, education, as well as new knowledge discovery. Faculty members appointed to the clinical faculty may choose to distinguish themselves through several portfolios of responsibility including Clinician-Educator, Clinician-Scholar, and Clinical Excellence pathways. The Clinician-Educator pathway may reflect excellence as an educator as measured by teaching evaluations and innovative teaching practices and curricula or modules development, and publications. Alternatively, the Clinician-Educator pathway may reflect an outstanding clinician who has a demonstrated record of educating colleagues and peers such as through invitations to serve as faculty on national continuing medical education programs or societal leadership. The Clinician-Scholar pathway reflects excellence in basic science, translational science, clinical research and/or health services research (e.g., public health care policy, outcomes and comparative effectiveness research) as measured by publications and grant funding, respectively. The Clinical Excellence pathway exists for faculty members who focus on exemplary clinical care or unique areas of emphasis in patient

management. These faculty may build signature clinical programs and/or serve as preferred providers developing a regional or national reputation for clinical service expertise or innovative programs. Faculty members on this pathway typically devote 80% or more of their effort to patient care or administrative service.

Faculty members on the Clinical faculty are not eligible for tenure and may not participate in promotion and tenure matters of tenure track faculty.

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

Except for those appointed at the rank of instructor, for whom a contract is limited to three years, the initial contract for all other clinical faculty members must be for a period of five years. The initial contract is probationary, with reappointment considered annually. Second and subsequent contracts for assistant and associate clinical professors must be for a period of at least three years and for no more than five years. Second and subsequent contracts for clinical professors must be for a period of at least three years and no more than eight years. There is no presumption that a new contract will be extended. In addition, the terms of the contract may be renegotiated at the time of reappointment. Furthermore, each appointee must obtain the appropriate Ohio licensure and other required certifications, including medical staff privileges. The following paragraphs will outline the basic criteria for initial appointments as clinical faculty.

**Clinical Instructor.** Appointment is normally made at the rank of clinical instructor when the appointee has not completed the requirements for the terminal degree. The department will make every effort to avoid such appointments. An appointment at the instructor level is limited to a three-year contract. In such cases, if the instructor has not completed requirements for promotion to the rank of assistant professor by the end of the penultimate year of the contract period, a new contract will not be considered even if performance is otherwise adequate and the position itself will continue.

**Assistant Clinical Professor.** An earned doctorate or other terminal degree and the required licensure/certification in his or her specialty are the minimum requirements for appointment at the rank of assistant clinical. Evidence of ability to teach is highly desirable.

**Associate Clinical Professor and Clinical Professor.** Appointment at the rank of associate clinical professor or clinical professor requires that the individual have an earned doctorate or other terminal degree and the required licensure/certification in his/her specialty and meet, at a minimum, the department's criteria—in teaching, professional practice and other service, and scholarship—for promotion to these ranks.

### 3 Research Faculty

Research faculty appointments exist for individuals who focus entirely 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, potentially with adjunct faculty appointments (postdoctoral fellows are appointed as postdoctoral researchers). Appointments to the Research faculty are made in accordance with Chapter 7 of the Rules of the University Faculty [3335-7](#). Each new appointment must enhance, or have strong potential to enhance, the quality of the Department. Unless otherwise authorized by a majority vote of the Tenure Track faculty in a Department, Research faculty must comprise no more than twenty per cent of the number of Tenure Track faculty in the Department. In all cases, however, the number of Research faculty positions in a unit must constitute a minority with respect to the number of tenure-track faculty in the Department.

Tenure is not granted to research faculty.

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

Research faculty members are eligible to serve on University committees and task forces but not on University governance committees. Research faculty members also are eligible to advise and supervise graduate and postdoctoral students and to be a principal investigator on extramural research grant applications. Approval to advise and supervise graduate students must be obtained from the graduate school as detailed in Section 13 of the [Graduate School Handbook](#).

Tenure is not granted to research faculty.

External appointees at the research associate professor or research professor level will demonstrate the same accomplishments in research and service as persons promoted within the department.

**Research Assistant Professor.** Appointment at the rank of research assistant professor requires that the individual have a doctorate and a record of high-quality publications that strongly indicate the ability to sustain an independent, externally funded research program.

**Research Associate Professor and Research Professor.** Appointment at the rank of research associate professor or research professor requires that the individual have a doctorate and meet, at a minimum, the department's criteria for promotion to these ranks.

#### **4 Associated Faculty**

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.

**Adjunct Assistant Professor, Adjunct Associate Professor, Adjunct Professor.** Adjunct appointments may be compensated or uncompensated. Adjunct faculty appointments are given to individuals who give academic service to the department, such as teaching a course or serving on graduate student committees, for which a faculty title is appropriate. 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.

**Uncompensated adjunct faculty.** Requirements for this appointment include attending 12 Grand Rounds per fiscal year (and complete the evaluation for each). Concurrently, an uncompensated adjunct faculty member will be required to contribute to the Ohio State academic mission **by serving in one of the following ways:**

- Participate in a current research project with one of our employed faculty- that leads to a funded grant, peer-reviewed paper, or national presentation
- Mentor or collaborate with an OSU resident and/or OSU medical student on a research project, that leads to a paper or national presentation
- Teach a medical student course (OSU Medical Students)
- Be employed by OSUP

**Assistant Professor, Associate Professor, Professor with FTE below 50%.** Appointment at tenure-track titles is for individuals at 49% FTE or below, either compensated (1 – 49% FTE) or uncompensated (0% FTE). The rank of associated faculty with tenure-track titles is determined by applying the criteria for appointment of tenure-track faculty. Associated faculty members with tenure-track titles are eligible for promotion (but not tenure) and the relevant criteria are those for promotion of tenure-track faculty.

**Clinical Instructor of Practice, Clinical Assistant Professor of Practice, Clinical Associate Professor of Practice, Clinical Professor Practice.** Associated clinical practice appointments may either be compensated or uncompensated. Uncompensated appointments are given to individuals who volunteer uncompensated academic service such as clinical supervision to the department, for which a faculty title is appropriate. Associated clinical practice rank is determined by applying the criteria for appointment of clinical faculty. Associated clinical practice faculty members are eligible for promotion (but not tenure) and the relevant criteria are those for promotion of clinical faculty.

Compensated appointments are given to full time clinicians who are not appointed to the clinical or tenure track faculty. This category of Associated faculty may have a paid appointment at OSU, OSUP (Ohio State University Physicians, Inc.), or Nationwide Children's Hospital (NCH) and require or otherwise benefit from a faculty appointment (e.g. for clinical credentialing or teaching a course). They may have another paid appointment at OSU (e.g. physician). This may be appropriate to use for faculty appointments that are

expected to be less than 3 years or for faculty who are paid through OSU, OSUP, or NCH but are 100% out in the community and less engaged in our academic missions.

**Visiting Instructor, Visiting Assistant Professor, Visiting Associate Professor, Visiting Professor.** Visiting faculty appointments may either be compensated or uncompensated. Visiting faculty members on leave from an academic appointment at another institution are appointed at the rank held in that position. The rank at which other (non-faculty) individuals are appointed is determined by applying the criteria for appointment of tenure-track faculty. Visiting faculty members are not eligible for tenure or promotion. Visiting faculty appointments may be renewed annually for only three consecutive years.

## **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/teaching/practice, 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 the department chair or designee outlining academic performance and citizenship. The Committee of Eligible faculty (tenured and non-probationary associate clinical professors and clinical professors) will review the application and make a recommendation to the department chair or designee. The department chair or designee will decide upon the request, and if appropriate submit it to the dean. If the faculty member requesting emeritus status has in the 10 years prior to the application engaged in serious dishonorable conduct in violation of law, rule, or policy and/or caused harm to the university's reputation or is retiring pending a procedure according to Faculty Rule [3335-5-04](#), emeritus status will not be considered.

See the [OAA Policies and Procedures Handbook](#) Volume 1, Chapter 1, for information about the types of perquisites that may be offered to emeritus faculty, provided resources are available.

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

## **6 Courtesy Appointments for Faculty**

Occasionally the active academic involvement in this department by a tenure-track, clinical, or research faculty member from another unit at Ohio State warrants the offer of a 0% FTE (courtesy) appointment in this department. Appropriate active involvement includes research collaboration, graduate student advising, teaching some or all of a course from time to time, or a combination of these. A courtesy appointment is made at the individual's current Ohio State rank, with promotion in rank recognized.

## **B Procedures**

See the [Policy on Faculty Recruitment and Selection](#) and the [Policy on Faculty Appointments](#) for information on the following topics:

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

## **1 Tenure-track Faculty**

A national search is required to ensure a diverse pool of highly qualified candidates for all tenure-track positions. Exceptions to this policy must be approved by the college and the Office of Academic Affairs in advance. Search procedures must entail substantial faculty involvement and be consistent with the OAA [Policy on Faculty Recruitment and Selection](#).

Searches for tenure-track faculty proceed as follows:

The dean of the college provides approval for the department to commence a search process. This approval may or may not be accompanied by constraints with regard to salary, rank, and field of expertise.

The department chair or designee appoints a search committee consisting of three or more faculty who reflect the field of expertise that is the focus of the search (if relevant) as well as other fields within the department.

Prior to any search, members of all search committees must undergo inclusive hiring practices training available through the college with resources from the [Office of Diversity and Inclusion](#). Implicit bias training, such as that available through the [Kirwan Institute for the Study of Race and Ethnicity](#), is also required of all search committee members prior to any search.

### **The search committee:**

- Appoints a Diversity Advocate (OHNS Diversity Committee Chair or member) who is responsible for providing leadership in assuring that vigorous efforts are made to achieve a diverse pool of qualified applicants.
- Develops a search announcement for internal posting in the university Job Postings through the [Office of Human Resources](#) and external advertising, subject to the department chair or designee's approval. The announcement will be no more specific than is necessary to accomplish the goals of the search, since an offer cannot be made that is contrary to the content of the announcement with respect to rank, field, credentials, salary. In addition, timing for the receipt of applications will be stated as a preferred date, not a precise closing date, in order to allow consideration of any applications that arrive before the conclusion of the search.
- Develops and implements a plan for external advertising and direct solicitation of nominations and applications.
- Screens applications and letters of recommendation and presents to the department chair or designee a summary of those applicants (usually three to five) judged worthy of interview. If the department chair agrees with this judgment, virtual or on-campus

interviews are arranged by the search committee chair, assisted by the department office. If the department chair does not agree, the department chair in consultation with the search committee determines the appropriate next steps (solicit new applications, review other applications already received, cancel the search for the time being).

Virtual or on-campus interviews with candidates must include opportunities for interaction with faculty groups, including the search committee; graduate students; the department chair or designee; and the dean or designee. In addition, all candidates make a presentation to the faculty and graduate students on their scholarship and may teach a class. The latter could be an actual class or a mock instructional situation. All candidates interviewing for a particular position must follow the same interview format and relevant accommodations for disability/impairment should be provided.

Following completion of virtual/on-campus interviews, the eligible faculty meet to discuss perceptions and preferences and then reports a recommendation on each candidate to the department chair or designee who makes the decision about which candidate will be offered the position.

If the offer involves senior rank, the eligible faculty members vote also on the appropriateness of the proposed rank. If the offer may involve prior service credit, the eligible faculty members vote on the appropriateness of such credit. The eligible faculty reports a recommendation on the appropriateness of the proposed rank or the appropriateness of prior service credit to the department head or designee. Appointment offers at the rank of Associate Professor or Professor, with or without tenure, and/or offers of prior service credit require prior approval of the Office of Academic Affairs.

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

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. The university will not grant tenure unless an individual is a (1) U.S. citizen or national; (2) permanent resident (“green card” holder); (3) asylee or refugee; or (4) an individual otherwise described as a “protected individual” pursuant to Title 8 U.S. Code Section 1324b(a)(3)(b). The department will therefore be cautious in making such appointments and vigilant in seeking residency status for the appointee promptly and diligently.

## **2 Clinical Faculty**

Searches for clinical faculty generally proceed identically as for tenure-track faculty, with the exception that the candidate's presentation during the virtual or on-campus interview is on clinical/professional practice rather than scholarship, and exceptions to a national search require approval only by the college dean.

## **3 Research Faculty**



Searches for research faculty generally proceed identically as for tenure-track faculty, with the exception that during the virtual or on-campus interview the candidate is not asked to teach a class, and exceptions to a national search require approval only by the college dean.

#### **4 Transfer from the Tenure Track**

Transfers between appointment types are permitted only under the strict guidelines detailed in the paragraphs below, per University Rules [3335-7-09](#) and [3335-7-10](#). An engaged, committed, productive and diverse faculty should be the ultimate goal of all appointments.

Tenure-track faculty may transfer to a clinical or research appointment if appropriate circumstances exist, including a change in appointment expectations that meet a clinical position need. Tenure or tenure eligibility is lost upon transfer, and transfers must be approved by the department chair or designee, the college dean, and the executive vice president and provost.

The request for transfer must be initiated by the faculty member in writing and must state clearly how the individual's career goals and activities have changed. The request must also explicitly acknowledge that tenure or eligibility for tenure are surrendered. The new letter of offer must outline a new set of expectations for the faculty member aligned with the new responsibilities. Presumably, these will differ from prior expectations.

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

#### **5 Associated Faculty**

The appointment, reappointment, and contract renewal of all compensated associated faculty are decided by the department chair or designee in consultation with the Division Director or Supervisor.

Compensated associated appointments are generally made for a period of one to three years, unless a shorter or longer period is appropriate to the circumstances.

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 or designee.

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 it, a multiple year appointment may be offered.

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

#### **6 Courtesy Appointments for Faculty**

Any department faculty member may propose a 0% FTE (courtesy) appointment for a tenure-track, clinical, or research faculty member from another Ohio State tenure-initiating unit. A proposal that describes the uncompensated academic service to this department justifying the appointment is considered at a regular faculty meeting. If the proposal is approved by the eligible faculty, the department chair or designee extends an offer of appointment. The department chair or designee 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.

## **V Annual Performance and Merit Review**

The department follows the requirements for the annual performance and merit review as set forth in the [Policy on Faculty Annual Review and Reappointment](#), which stipulates that such reviews must include a scheduled opportunity for a face-to-face meeting as well as a written assessment. The annual performance and merit review of a faculty member is the responsibility of the department chair or designee.

According to the policy, the purposes of the review are to:

- 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
- 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.

Depending on their appointment type, the annual performance and merit review of faculty members is based on expected performance in teaching, scholarship, and/or service as set forth in the department's guidelines on faculty duties and responsibilities; on any additional assignments and goals specific to the individual; and on progress toward promotion where relevant. Meritorious performance in teaching, scholarship, and service is assessed in accordance with the same criteria that form the basis for promotion decisions.

The department chair or designee is required (per Faculty Rule [3335-3-35](#)) to include a reminder in the annual performance and merit review letter that all faculty have the right (per Faculty Rule [3335-5-04](#)) to view their primary personnel file and to provide written comment on any material therein for inclusion in the file.

### **A Documentation**

For their annual performance and merit review, faculty members must submit the following documents to the department chair by the date requested:

- Office of Academic Affairs dossier outline, [Policies and Procedures Handbook](#), Volume 3
- Annual Evaluation Form, which will be made available to all faculty in an accessible place
- An updated CV in the correct department format

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

The department chair or their designee will supply each faculty member with a written evaluation of their performance, in narrative format. Annual performance and merit reviews must include an opportunity for a face-to-face meeting with the department chair or their designee. If a Chair's designee conducts the annual review, the designee will apprise the Chair of each faculty member's performance.

## **B Probationary Tenure-track Faculty**

Every probationary tenure-track faculty member is reviewed annually by the department chair or designee (i.e. Division Head), who meets with the faculty member to discuss his or her performance, future plans, and goals; and prepares a written evaluation that includes a recommendation on whether to renew the probationary appointment. If a designee performs the review, he/she will inform the department chair of the review for final approval.

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

If the department chair recommends nonrenewal, the Fourth-Year Review process (per Faculty Rule [3335-6-03](#)) is invoked. Following completion of the comments process, the complete dossier is forwarded to the college for review and the dean makes the final decision on renewal or nonrenewal of the probationary appointment.

### **1 Fourth-Year Review**

During the fourth year of the probationary period the annual review follows the same procedures as the mandatory tenure review, with the exceptions that external evaluations are optional and the dean (not the department chair) makes the final decision regarding renewal or nonrenewal of the probationary appointment.

External evaluations are solicited only when either the department chair or designee or the eligible faculty determine that they are necessary to conduct the Fourth-Year Review. This may occur when the candidate's scholarship is in an emergent field, is interdisciplinary, or the eligible faculty do not feel otherwise capable of evaluating the scholarship without outside input.

The eligible faculty conducts a review of the candidate. On completion of the review, the eligible faculty votes by written ballot on whether to renew the probationary appointment.

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

## **2 Eighth Year Review**

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

## **3 Exclusion of Time from Probationary Period**

Faculty Rule [3335-6-03](#) (D) sets forth the conditions under which a probationary tenure-track faculty member may exclude time from the probationary period. Additional procedures and guidelines can be found in the Office of Academic Affairs [Policies and Procedures Handbook](#).

## **C Tenured Faculty**

Associate professors are reviewed annually by the department chair or designee, or Division Director. The department chair or Division Director conducts an independent assessment; meets with the faculty member to discuss his or her performance and future plans and goals; and prepares a written evaluation on these topics. The faculty member may provide written comments on the review.

Professors are reviewed annually by the department chair or designee, or Division Director, who meets with the faculty member to discuss his or her performance and future plans and goals. The annual review of professors is based on their having achieved sustained excellence in the discovery and dissemination of new knowledge relevant to the mission of the tenure initiating unit, as demonstrated by national and international recognition of their scholarship; ongoing excellence in teaching, including their leadership in graduate education in both teaching and mentoring students; and outstanding service to the department, the college, the university, and their profession, including their support for the professional development of assistant and associate professors. Professors are expected to be role models in their academic work, interaction with colleagues and students, and in the recruitment and retention of junior colleagues. As the highest ranking members of the faculty, the expectations for academic leadership and mentoring for professors exceed those for all other members of the faculty.

If a professor has an administrative role, the impact of that role and other assignments will be considered in the annual review. The department chair or designee, or Division Director prepares a written evaluation of performance against these expectations. The faculty member may provide written comments on the review.

## **D Clinical Faculty**

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

In the penultimate contract year of a clinical faculty member's appointment, the department chair must determine whether the position held by the faculty member will continue. If the position will not continue, the faculty member is informed that the final contract year will be a terminal year of employment. The standards of notice set forth in Faculty Rule [3335-6-08](#) must be observed.

For probationary faculty, if the position will continue, a formal performance review is necessary to determine whether the faculty member will be offered reappointment. This review involves a vote by the committee of eligible faculty. External letters of evaluation are not solicited.

There is no presumption of renewal of appointment.

## **E Research Faculty**

The annual performance and merit review process for research probationary and non-probationary faculty 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 contract year of a research faculty member's appointment, the department chair or designee must determine whether the position held by the faculty member will continue. If it 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.

## **F Associated Faculty**

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

Compensated associated faculty members on a multiple year appointment are reviewed annually by the department chair or designee, who prepares a written evaluation and meets with the faculty member to discuss his or her performance, future plans, and goals. The department chair's decision on reappointment is final.

When considering reappointment of non-compensated associated faculty members, at a minimum, their contribution to the department 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.

## **G Salary Recommendations**

The department chair makes annual salary recommendations to the dean, who may modify them. The recommendations are based on the current annual performance and merit review as well as on the performance and merit reviews of the preceding 24 months. For clinicians, salary recommendations are under the auspices of the College of Medicine Compensation Plan.

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

As a general approach to formulating salary recommendations for non-FGP faculty, the department chair divides faculty into at least four groups based on continuing productivity (high, average, low, and unsatisfactory) and considers market and internal equity issues. Salary increases should be based upon these considerations. For clinical faculty, salary and raises are determined according to the Faculty Group Practice (FGP) Compensation plan.

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

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

## **VI Promotion and Tenure and Promotion Reviews**

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

*In evaluating the candidate's qualifications in teaching, scholarship, and service, reasonable flexibility shall be exercised, balancing, where the case requires, heavier commitments and responsibilities in one area against lighter commitments and responsibilities in another. In addition, as the university enters new fields of endeavor, including interdisciplinary endeavors, and places new emphases on its continuing activities, instances will arise in which the proper work of faculty members may depart from established academic patterns. In such cases care must be taken to apply the criteria with sufficient flexibility. In all instances superior intellectual attainment, in accordance with the criteria set forth in these rules, is an essential qualification for promotion to tenured positions. Clearly, insistence upon this standard for continuing members of the faculty is necessary for maintenance and enhancement of the quality of the university as an institution dedicated to the discovery and transmission of knowledge.*

### **A Criteria and Documentation that Support Promotion**

#### **1 Promotion to Associate Professor with Tenure**

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

*The awarding of tenure and promotion to the rank of associate professor must be based on convincing evidence that the faculty member has achieved excellence as a teacher, as a scholar, and as one who provides effective service; and can be expected to continue a program of high-quality teaching, scholarship, and service relevant to the mission of the academic unit(s) to which the faculty member is assigned and to the university.*

Tenure is not awarded below the rank of associate professor at The Ohio State University.

The award of tenure is an acknowledgement of excellence and future potential for preeminence. 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.

Every candidate is held to a high standard of excellence in all aspects of performance. Above all, candidates are held to a very high standard of excellence in the areas central to their responsibilities. For example, if a candidate's primary teaching role is and will continue to be undergraduate teaching, then excellence in undergraduate teaching is required. A mediocre performance in this area would not be adequately counterbalanced by excellent performance in another aspect of teaching that is a significantly smaller part of the individual's responsibilities.

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](#). The awarding of tenure requires evidence of consistent achievement throughout the professional life of the faculty member. Promotion to the rank of associate professor with tenure occurs when a faculty member exhibits convincing evidence of excellence in the discovery and dissemination of new knowledge, as demonstrated by a national level of 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. These three key areas of achievement: scholarship, teaching and service, are individually discussed below.

Achievement of national recognition and impact is a prerequisite for promotion to associate professor and awarding of tenure.

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

Scholarship is broadly defined as the discovery and dissemination of new knowledge. Achievement of excellence in scholarship is demonstrated by a substantial body of original knowledge that is published in high quality, peer-reviewed journals or proceedings, and achievement of a national reputation for expertise and impact in one's field of endeavor. Such endeavors might include laboratory investigation, development of innovative programs, theoretical insight, innovative interpretation of an existing body of knowledge, clinical science, public health and community research, implementation science, and diffusion research, among many potential others. While individual circumstances may vary, both the quantity and quality of publications should be considered. Metrics that are useful in assessing a candidate's record of scholarship include but are not limited to the total number of publications since their appointment as



either a research assistant professor or an assistant professor, the trajectory of the publication and/or citation record, the relative proportion of first/senior authorships. The impact factor of a journal may or may not reflect the quality of the scholarship. For example, in some areas of research the best journal in that area may have a relatively low impact factor but may be highly cited. Conversely, publication in journals with a very high impact factors is a reflection of broader interest, but does not in and of itself, demonstrate the impact of research. Impact may be demonstrated through non-traditional metrics. This can include but is not limited to social media penetration, blog subscription, Altmetrics score, non-academic invited presentations, or collaborations that advance the mission of the university or the field, and interviews by reputable national media outlets on scholarly topics, however, this does not in and of itself demonstrate the impact of research.

A sustained record of scholarly productivity, reflected by both quality and quantity, as an assistant professor is required for promotion to the rank of associate professor. Candidates for promotion to associate professor should ideally have 10 peer-reviewed publications as first or senior author since their appointment. The total number of required publications is to be 25. It is expected that the pattern of scholarship will include an increasing proportion of publications as first, senior or corresponding author. Specific metrics in support of excellence in scholarship may be discipline-specific and may be adjusted based on the overall pattern of responsibilities. For example, clinician investigators will have less time available for research than non-clinician investigators and appropriate adjustments of these criteria should be made. The range of publications may be adjusted in relation to the proportion of the faculty member's effort that is allocated to clinical service.

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

Evidence of external peer reviewed grant support is another crucial indicator of expertise in the field.

Candidates **without** significant clinical responsibilities: Candidates for promotion to associate professor with tenure who are without significant clinical responsibilities must have obtained NIH (or comparable) funding as a leading principal investigator of a R21, R01, P01, U54, or K award or other comparable funding. They should ideally have demonstrated sustainability of their research program by renewal of the award and/or by garnering a second distinct nationally competitive, peer reviewed grant. These do not necessarily need to be simultaneous. In some circumstances, (e.g. specific techniques)



faculty member's expertise may not justify PI level status. In such cases serving as a co-investigator on multiple grants will satisfy the requirement for extramural funding.

Candidates **with** clinical responsibilities: In general, candidates for promotion to associate professor with tenure who have clinical responsibilities are expected to obtain extramural NIH or comparable funding as defined in the previous paragraph as a PI, MPI to support their research program. The exception would be those with greater than 0.5 cFTE as noted in the bullet point #4, below. Competitive, peer-reviewed career development award funding, such as an NIH K award or national foundation career development award, is acceptable. Depending on the extent of clinical responsibilities, sustained funding through pharmaceutical or instrumentation companies for investigator-initiated proposals is acceptable. Serving as the site-PI for a multi-center trial would not satisfy the expectation for extramural funding on the tenure track. Similarly, faculty members who generate support for their research programs through creation of patents that generate licensing income or spin-off companies would meet the equivalent criteria of extramural funding.

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 faculty appointment at The Ohio State University. It should be appreciated that evidence of scholarship below the specified range, defined by the department, 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 in the context of poor performance in other areas such as evidence of teaching excellence.

Entrepreneurship is a special form of scholarship valued by the COM. Entrepreneurship includes patents and licenses of invention disclosures, software development, and materials transfers technology commercialization, formation of startup companies and licensing and option agreements. Inasmuch as there are no expressly defined metrics for entrepreneurship, the College of Medicine will analyze these, flexibly. Generally, invention disclosures and copyrights will be considered equivalent to a professional meeting abstract or conference proceeding, patents should be considered equivalent to an original peer-reviewed manuscript, licensing activities that generate revenue should be considered equivalent to extramural grant awards, and materials transfer activities should be considered evidence of national (or international) recognition and impact. These entrepreneurial activities will be recognized as scholarly or service activities in the promotion and tenure dossier.

#### Research and Scholarship (with clinical responsibility)

Evidence of ongoing, continuous development of research ability and reputation, as reflected by the following:

1. Peer reviewed publications in prestigious journals, the majority of which are first authored or senior authored.  
As a guideline the successful candidate faculty should have a minimum of 10 publications as first or senior author since the OSU appointment in well-respected journals in the field since their faculty appointment. With a total of 25 peer reviewed publications overall as first or senior author. While these numbers are intended as general guidelines, it is also possible that productivity below these ranges could result in a positive promotion and tenure review if strong impact can be established for the candidate's

independent research [e.g., papers in the highest impact journals (e.g., Science, Nature or Cell) may substitute for several in lower-impact journals]. For probationary faculty recruited from other institutions where they served in a faculty-level position, scholarly activity at the previous institution will be considered equally.

2. Presentations of scholarly work at local, regional, and/or national forums.
3. Obtaining and sustaining funding as the Leading Principal Investigator at cumulative monetary levels equivalent to an R01, PO1, U54, or K award from the National Institutes of Health (NIH) or an equivalent grant (e.g., National Science Foundation, NSF or Department of Defense, DOD) is a requirement for promotion, or patents generating licensing income. Team science is strongly encouraged.
4. Faculty with >0.5 cFTE should have participation in extramural funding as a major Co-Investigator or be involved in clinical trials as a PI. For these faculty an NIH grant or equivalent is not required for promotion.
5. Development of an area of research or scholarship with growing national recognition.
6. Service on editorial board of journal(s) or a grant review board.
7. Publications of book(s).
8. Publication of chapter(s) in books.

(To reach the associate professor level with tenure the faculty member who is < .5 Clinical FTE is expected to achieve accomplishments #1, #2, #3 and #5 at a minimum.) A faculty member who is  $\geq$  .5 Clinical FTE is expected to achieve #1, #2, #4, and # 5.

#### Research and Scholarship (without clinical responsibility)

Evidence of ongoing, continuous development of research ability and reputation, as reflected by the following:

1. Peer reviewed publications in prestigious journals, the majority of which are first authored or senior authored.  
As a guideline the successful candidate faculty should have a minimum of 10 publications as first or senior author since the OSU appointment in well-respected journals in the field since their faculty appointment. With a total of 25 peer reviewed publications overall as first or senior author. While these numbers are intended as general guidelines, it is also possible that productivity below these ranges could result in a positive promotion and tenure review if strong impact can be established for the candidate's independent research [e.g., papers in the highest impact journals (e.g., Science, Nature or Cell) may substitute for several in lower-impact journals]. For probationary faculty recruited from other institutions where they served in a faculty-level position, scholarly activity at the previous institution will be considered equally.
2. Presentations of scholarly work at local, regional, and/or national forums.
3. Obtaining and sustaining funding as the Leading Principal Investigator at cumulative monetary levels equivalent to an R01, PO1, U54, or K award from the National Institutes of Health (NIH) or an equivalent grant (e.g., National Science Foundation, NSF or Department of Defense, DOD) is a requirement for promotion, or patents generating licensing income. Team science is strongly encouraged.
4. Development of an area of research or scholarship with growing national recognition.

5. Service on editorial board of journal(s) or a grant review board.
6. Publications of book(s).
7. Publication of chapter(s) in books.

(To reach the associate professor level with tenure the faculty without clinical responsibilities is expected to achieve accomplishments #1, #2, #3, 4 and #5 at a minimum.)

Teaching and Mentoring: A strong and consistent record of effective teaching and mentoring is required for promotion and tenure. This may be demonstrated by positive evaluations by students, residents, fellows, local colleagues and/or national peers. The dossier must clearly document the faculty member's contribution and the impact of these efforts. Teaching awards and other honors are also highly supportive of teaching excellence. Teaching effectiveness may also be reflected by documented impact on teaching and training programs, including curricular innovation, new teaching modalities such as web-based design, mobile application, virtual teaching, or 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 the cultural competence of or access to teaching for underserved populations are particularly valued.

Teaching (with clinical responsibilities)

Evidence of persistent commitment to teaching and ongoing development of teaching abilities, including but not specific:

1. Consistently high-level evaluations of teaching performance by students, residents, peers.
2. Participation in the development of new educational programs for teaching students or residents at Ohio State.
3. K-Award mentorship
4. Participation in the publication of material of an instructional nature or evidence of production of other forms of teaching material (e.g. videotape, computer programs, etc.)
5. Participation in teaching for local, regional and national professional organizations.
6. Participation in the development of educational materials for local, regional and national professional organizations.
7. Mentoring students, residents, fellows, and/or postdoctoral researchers in research projects

(To reach the associate professor level the faculty member is expected to have at least three of these accomplishments, including #1)

Teaching (without clinical responsibilities)

Evidence of persistent commitment to teaching and ongoing development of teaching abilities, as reflected by:

1. Evidence of regular participation in the educational processes within the division, department or college for example:
  - a) course work: organization and oversight of approved academic course lectures provided for approved academic courses

- b) documented training of individuals or groups in research skills or techniques, technicians and laboratory assistants, pre-medical students, graduate students, postdoctoral fellows, medical research fellows, professional colleagues
  - c) K-Award mentorship
2. Evidence of teaching excellence defined as consistently high-level evaluations of teaching performance by students and peers.
  3. Development of new educational programs for teaching within the institution.
  4. Publication of instructional materials (e.g. videotapes, computer programs, etc.).
  5. Participation of teaching for local, regional or national organizations.
  6. Development of educational materials for local, regional or national organizations.

(To reach the associate professor level the faculty member is expected to achieve accomplishment in #1 and #2, at a minimum.)

Service: Service includes administrative service to OSU, excellent patient care, clinical program development, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University. Evidence of service within the institution can include but is not limited to appointment or election to department, College of Medicine, hospital, and/or University committees or working groups, or leadership of programs. Evidence of service to the faculty member's discipline or public and private entities beyond the University can include, but is not limited to 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, such as creation and sustenance of a program to deliver healthcare to the community, or design and implementation of a novel program to reduce race or gender-based discrimination within the department, College, University or beyond, can be considered service activities. Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion.

Service (with clinical responsibilities)

Evidence of commitment to the provision of service to the institution, the community or the profession, as reflected by:

1. Completion of specialty Board certification.
2. Maintenance of certification.
3. Evidence of a high-level of clinical competence.
4. Active participation in divisional, department, College and/or University committee functions.
5. Participation in committee activities for local, regional and national organizations.
6. Membership in local, regional or national professional organizations.
7. Other meritorious community service activities
8. Demonstrated adherence to the values contained in the Statement of Professional Ethics of the American Association of University Professors.
9. Maintenance of appropriate licensure and medical staff appointment(s).

10. Participation in the development of new programs for the advancement of medical practice or patient care.

(To reach the associate professor level, the faculty member is expected to achieve accomplishments #1, #3, #4, #5, #8 and #9 at a minimum and #2 if applicable.)

Service (without clinical responsibilities)

Evidence of commitment to the provision of service to the institution, the community or the profession, as reflected by:

1. Direction/operation of a laboratory for division, department, hospital, college, university, or professional organization.
2. Active participation in divisional, department, college or university committee functions.
3. Active participation in committee functions for local, regional, or national organizations.
4. Membership in local, regional, or national professional organizations.
5. Other meritorious community service activities.
6. Demonstrated adherence to the values contained in the Statement of Professional Ethics of the American Association of University Professors.

(To reach the associate professor level the faculty member is expected to achieve accomplishments #2 and #6, at a minimum.)

## **2 Promotion to Associate Professor without Tenure**

Faculty members with significant clinical responsibilities with an eleven-year probationary period who fully meet the teaching and service requirements for promotion to associate professor with tenure, but not all of the research requirements, may petition for promotion to associate professor without tenure.

Promotion to associate professor in advance of tenure is available to faculty members with significant clinical responsibilities who have 11-year probationary periods. The criteria for promotion will require a level and pattern of achievement that demonstrates that the candidate is making significant progress toward tenure but has not yet achieved all the requisite criteria for promotion with tenure. Specifically, the candidate should demonstrate evidence of an emerging national recognition.

The department may propose a faculty member for promotion consideration (without tenure) in cases where a faculty member is making progress but has not achieved the necessary requirements for tenure. In addition, faculty committees (at the department or College) or administrators (Chair or Dean) may determine that a faculty member's accomplishments do not merit tenure and may recommend promotion in advance of tenure even if a faculty member has requested promotion with tenure. Promotion in advance of tenure may only occur if a candidate is not in the mandatory review year. If a clinician candidate is promoted in advance of tenure, the tenure review must occur within six years, and no later than the mandatory review year, whichever comes first.

Scholarship: Evidence of substantial progress toward the establishment of a thematic program of scholarship as reflected by a consistent and increasing number of peer reviewed publications as first or senior author. Evidence for emerging national recognition may include, but is not limited to, invitations to serve as ad hoc journal reviewer and invited lectures outside of the university.

Criteria for a promising trajectory in extramural funding might be reflected by serving as a PI on an R21, R03, K awards or equivalent grants, co-I on an R01 NIH grant award, as PI on foundation or other extramural grants.

Evidence of scholarship below the specified range does not preclude a positive promotion decision and evidence of scholarship above the specified range does not guarantee a favorable tenure decision.

Evidence of ongoing, continuous development of research ability and reputation, as reflected by the following:

1. Multiple publications in peer-reviewed journals the majority of which or first or senior authored. As a guideline the successful candidate should have 20 publications (with 5 as first or senior author, occurring since the OSU appointment, if previously appointed as Assistant Professor at OSU). The mean impact factor of the top ten publications should be at or above 75th percentile of impact factors of journals listed in Appendix 1. The faculty are encouraged to publish in other scientific journals as well.
2. Presentations of scholarly work at national or international meetings.
3. PI on an R21, R03 or equivalent or a co-investigator on a R01 or equivalent award, PI of a clinical trial or industry grant, patent/inventorship. For cFTE >.5 coinvestigator status on any grant is ideal unless > 25 peer publications and national reputation are evident.
4. Development of an area of research or scholarship with growing national recognition.
5. Service on editorial board of journal(s).
6. Publications of book(s).
7. Publication of chapter(s) in books.

(To reach the associate professor level without tenure the faculty member is expected to achieve the following accomplishments: #1, #2, #3, #4 at a minimum.)

Teaching and Mentoring: Indicators of teaching consistent with promotion in advance of tenure might include a record of teaching excellence involving a single group of trainees, and/or a clear trend of improving teaching evaluations. Teaching excellence may also be demonstrated through for presentations at other academic institutions, scientific or professional societies, or other hospitals. Programs that improve the cultural competence of or access to teaching for underserved populations are particularly valued.

Service: Indicators of service consistent with promotion in advance of tenure might include service primarily within the institution with the beginning of a record of service outside the institution. This might also include activities as an ad hoc reviewer for journals, or service on the advisory board for local organizations. Similarly, innovative programs that advance the mission of the university, such as creation and sustenance of a program to deliver healthcare to the community, or design and implementation of a novel program to reduce race or gender-based discrimination in the within the department, College, University or beyond, can be considered service activities.

### **3 Promotion to Professor**

Faculty Rule [3335-6-02](#) establishes the following general criteria for promotion to the rank of professor:

*Promotion to the rank of professor must be based on convincing evidence that the faculty member has a sustained record of excellence in teaching; has produced a significant body of scholarship that is recognized nationally or internationally; and has demonstrated leadership in service.*

The specific criteria in teaching, scholarship, and service for promotion to professor are similar to those for promotion to associate professor with tenure (see chart in Section VI.A.1), with the added expectation of sustained accomplishment and quality of contributions, a record of continuing professional growth, and evidence of established national or international reputation in the field.

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/or international recognition and impact. The general criteria for promotion in scholarship, teaching and service require more advanced and sustained quantity, quality and impact than that required for promotion to associate professor. Importantly, the standard for external reputation is substantially more rigorous than for promotion to Associate professor with tenure. This record of excellence must be evident from activities undertaken and accomplishments achieved since being appointed or promoted to the rank of associate professor. Demonstration of sustained national leadership and/or international recognition and impact is an essential requirement for promotion to professor. 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.

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.

In addition, as further specified by Faculty Rule [3335-6-02](#), assessment is in relation to specific assigned responsibilities with reasonable flexibility being exercised in order to balance, where the case requires, heavier responsibilities and commitment in one area against lighter ones in another. Promotion should reflect the reality that (a) not all faculty members have the same distribution of assignments (b) not all faculty members will be able to contribute excellence equally in all evaluation dimensions; and (c) there is a multi-faceted institutional responsibility that must be achieved by the skills of the faculty collectively. Promotion to professor should be awarded not only to those faculty who have demonstrated impact in their scholarship of research and creative inquiry, teaching and learning, and service, but also to those who have exhibited excellence in the scholarship of leadership to make visible and demonstrable impact upon the mission of the department, college and university.

**Scholarship:** A sustained record of external funding and an enhanced quality and quantity of scholarly productivity as an associate professor is required for promotion to professor. As a guideline the successful candidate faculty should have a minimum of 15 publications as first or senior author since the OSU appointment or promotion as an Associate Professor in well-respected journals in the field. With a total of 40 peer reviewed publications overall. These numbers serve as a general guideline. Fewer papers in the top-ranked journals in the appropriate field(s) of study may substitute for more in lower-impact journals. It is expected that the pattern of scholarship will include a substantial proportion of publications as senior or corresponding author.

Candidates for promotion will be expected to have developed and maintained nationally competitive and current peer reviewed extramural funding to support their research program, including sustained funding.

Candidates without significant clinical responsibilities: At a minimum, candidates for promotion to professor who do not have clinical responsibilities must be a PI or multiple-PD/PI on at least one active NIH funded R01 or equivalent grant with a history of sustained funding.

Candidates with significant clinical responsibilities: Candidates for promotion to professor who have significant clinical responsibilities are expected to obtain extramural NIH or comparable funding as defined above as a PI, MPI to support their research program. Depending on the extent of clinical responsibilities, sustained funding through pharmaceutical or instrumentation companies for investigator-initiated proposals, is acceptable. Similarly, faculty members who generate support for their research programs through creation of patents that generate licensing income or spin-off companies would meet the equivalent criteria of extramural funding. In some circumstances, (e.g. specific techniques) faculty member's expertise may not justify PI level status. In such cases serving as a co-investigator on multiple NIH grants will satisfy the requirement for extramural funding.

Examples of evidence of national leadership or an international reputation includes but is not limited to election or appointment to leadership position(s) in a national or international society, service as a national committee or task force chair, regular membership on an NIH study section or ad hoc member on multiple federally funded (e.g., NIH, DOD, VA) study sections, 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.

#### Research and Scholarship (with clinical responsibilities)

Evidence of ongoing, continuous development of research ability and reputation, as reflected by the following:

1. Significant proportion of first author or senior author publications in peer-reviewed journals. The successful candidate ideally has published 40 papers as first or senior author. Ideally there should be 15 peer-reviewed journal papers as first or senior author since appointment or promotion to associate professor. While these numbers are intended as general guidelines, fewer papers in the top-ranked journals of the appropriate field(s) of study may substitute for more in lower-impact journals. Substantive review articles will be given consideration in addition to research peer-reviewed articles.
2. Presentations of scholarly work at national or international meetings.
3. Sustained grant funding as principal investigator from national sources at levels indicating major research significance. Extramural funding since promotion to associate professor is required.
  - a. The successful candidate with an assignment as  $\leq .5$  clinical FTE shall be a PI or multiple-PD/PI on at least one active NIH funded R01 or equivalent grant with a history of sustained funding (e.g., one competitive R01 renewal, an industry grant as PI, another nationally competitive grant, or two active NIH awards), one of which may be from industry or be a PI on a program project grant or a PI on an R01 and multidisciplinary pursuits or securing development funds  $\geq$  \$500,000 to support salary and research will be the equivalent of a second R01.



- b. The successful candidate with an assignment as  $\geq .5$  clinical FTE will be a Co-Investigator on a minimum of one R-01 equivalent, an industry grant or a Co-Investigator on a program project grant or a PI on clinical trials.
- 4. National recognition as an expert in a particular area of research or scholarship.
- 5. Editorship or Associate Editor of journal(s).
- 6. Lead authorship of books.
- 7. Lead authorship of chapters in books.

(To reach the professor level, the faculty member is expected to achieve accomplishment #1 through #6 at a minimum).

Research and Scholarship (without clinical responsibilities)

Evidence of ongoing, continuous development of research ability and reputation, as reflected by the following:

1. Regular publication in peer-reviewed journals (numbers consistent with quantitative standards of department and scientific discipline).
2. Publications of major scientific significance in prestigious journals in the appropriate field(s) of study, identified by peers using objective standards of the scientific discipline such as the ISI Web of Knowledge ® Journal Citation Reports ® index.
3. Significant proportion of first author or senior author publications in peer-reviewed journals.
4. The successful candidate ideally has published 40 as first or senior author papers. Ideally, there should be 15 peer-reviewed journal papers as first or senior author since promotion to associate professor. While these numbers are intended as general guidelines, fewer papers in the top-ranked journals of the appropriate field(s) of study may substitute for more in lower-impact journals. Substantive review articles and book chapters will be given consideration in addition to research peer-reviewed articles.
5. Presentations of scholarly work at multiple local, regional, national or international forums.
6. Sustained awards of peer-reviewed research funding from national sources indicative of competitive research significance. The successful candidate ideally shall be a PI or multiple-PD/PI on at least one active NIH funded R01 with a history of at least one competitive R01 renewal, or an active R01 with another nationally competitive grant.
7. Established national or international reputation for research in one or more areas of importance to the scientific discipline.
8. Service on the editorial board of professional journal(s).
9. Service on grant review boards for local, regional, national or international funding organizations.
10. Retention as consultant by professional or commercial organizations.
11. Leadership in publication of books or book chapters.

(To reach the professor level, the faculty member is expected to achieve accomplishments #1 through #8, at a minimum).

Teaching and Mentoring: A continued strong and consistent record of effective teaching and mentoring is required for promotion. Evidence may include, but is not limited to outstanding student, resident, fellow, local colleagues, and/or national peer evaluations, course or workshop leadership and design, a training program directorship, teaching awards, and organization of national course and curricula and participation in specialty boards or Residency Review Committees of the Accreditation Council for Graduate Medical Education. Active participation as

a mentor in training grants such as NIH T32 or K- awards is highly valued as a teaching and mentoring activity. Programs that improve the cultural competence of or access to teaching for underserved populations are particularly valued. Candidates with clinical duties should demonstrate consistent and effective teaching of trainees and practicing clinicians, and leadership in the administration of clinical training programs.

Mentorship of junior faculty is expected for candidates for promotion to professor. It is presumed that this will take the form of a primary mentoring relationship, and not just ad hoc career coaching. Candidates should provide evidence of the impact of their mentorship.

#### Teaching (with clinical responsibilities)

Evidence of persistent commitment to teaching excellence and ongoing exercise of teaching abilities, as reflected by:

1. Consistently high-level evaluation of teaching performance by students, residents and peers.
2. Evidence of regular participation in the educational process within the division, department or college.
3. Leadership role in the development of new educational programs for teaching students and residents at Ohio State.
4. Leadership role in publication of material of an instructional nature or in production of other forms of teaching material.
5. Development of innovative teaching techniques and vehicles.
6. Leadership role in teaching for local and regional professional organizations.
7. Participation in teaching for national professional organizations.
8. Leadership role in development of educational materials for local and regional professional organizations. Participation in the development of educational materials for national organizations.
9. T-32, R-25, CORE, K-award Mentorship, or equivalent
10. Mentoring of students, residents, or postdoctoral researchers on research projects.

(To reach professor level, the faculty member is expected to achieve at least four of these accomplishments, including #1 and #2.)

#### Teaching (without clinical responsibilities)

Evidence of persistent commitment to teaching excellence and ongoing exercise of teaching abilities, as reflected by:

1. Evidence of regular participation in the educational processes within the division, department, college or university
  - a) course work: organization and oversight of approved academic courses  
lectures provided for approved academic courses
  - b) documented training of individuals or groups in research skills or techniques
    - graduate students (e.g. successful achievement of annual milestones, etc.)
    - postdoctoral fellows (e.g. peer reviewed publications, career advancement, etc.)
    - medical research fellows (e.g. clinical fellow research mentoring, etc.)
    - professional colleagues (e.g. grant mentoring, etc.)
    - Faculty participation in training grants (e.g. T-32, R-25, P-50 etc.)

c) K award mentoring

2. Evidence of teaching excellence defined as consistently high-level evaluations of teaching performance by students and peers
3. Leadership in development of new educational programs for teaching within the institution.
4. Development of innovative teaching techniques or vehicles.
5. Leadership in production of instructional materials (e.g. videotapes, computer programs, etc.).
6. Participation in teaching for local, regional or national organizations.
7. Leadership in development of educational materials for local, regional or national organizations.

(To reach professor level, the faculty member is expected to achieve at least #1 and #2.)

Service: Promotion to the rank of professor requires service to the COM, OSU, and in national and international professional societies. Service can include but is not limited to leadership roles on OSU committees, in professional organizations and journal editorships. Evidence of the provision of professional expertise could include roles as a board examiner, service on panels and commissions, program development, and professional consultation to industry, government, and education. Similarly, innovative programs that advance the mission of the university, such as creation and sustenance of a program to deliver healthcare to the community, or design and implementation of a novel program to reduce race or gender-based discrimination in the within the Department, College, University or beyond, can be considered service activities.

Service (with clinical responsibility)

Evidence of ongoing commitment to the provision of service to the institution, the community or the profession, as reflected by:

1. Recognized as a leader in an area of clinical expertise. Director of a service, center institute, division or a section or recognition by peers in Best Doctors
2. Maintenance of Certification
3. Chair of Department, College of Medicine or University committee.
4. Leadership role in committee activities for national and international organizations.
5. Elected office in national or international professional organization(s) or regular NIH study section membership or federal panel or committee
6. Prominent role in community service activities.
7. Leadership role in the Department.
8. Demonstrated adherence to the values contained in the Statement of Professional Ethics of the American Association of University Professors.
9. Maintenance of appropriate licensure and medical staff appointment(s).
10. Leadership role in the development of new programs for clinical care.

(To reach the professor level, the faculty member is expected to achieve 5 of these accomplishments including, #1 (only for c FTE >.5) #3 or #4, #7 #8 and in addition # 2 if applicable.)

Service (without clinical responsibilities)

Evidence of ongoing commitment to the provision of service to the institution, the community or the profession, as reflected by:

1. Direction/operation of a laboratory or leader of a division, department, center, institute hospital, college, university or professional organization.
2. Chair of divisional, department, college or university committee functions.
3. Leadership role in committee functions for national or international organizations.
4. Elected office in national or international professional organizations.
5. Prominent role in meritorious community service activities.
6. Leadership role in the department.
7. Demonstrated adherence to the values contained in the Statement of Professional Ethics of the American Association of University Professors.

(To reach the professor level, the faculty member is expected to achieve 4 of these accomplishments including #7).

#### **4 Clinical Faculty**

**Promotion to Associate Clinical Professor.** For promotion to associate clinical professor, a faculty member must show convincing evidence of excellence as a teacher and a provider of effective service; must have a documented high level of competence in professional practice; and must display the potential for continuing a program of high-quality teaching and service relevant to the mission of this department. Specific criteria in teaching and service for promotion to associate clinical professor are similar to those for promotion to associate professor with tenure. See specific criteria below.

**Promotion to Clinical Professor.** For promotion to clinical professor, a faculty member must have a record of continuing professional growth and increasing quality of contributions, including a sustained record of excellence in teaching and professional practice; leadership in service to this department and to the profession; and production and dissemination of scholarly materials pertinent to pedagogy and/or professional practice. See specific criteria below.

##### **a. Associate Clinical Professor, Clinician Educator Pathway**

The awarding of promotion to the rank of associate professor on the clinical faculty – clinician-educator pathway must be based upon convincing evidence that the candidate has developed a national level of impact and recognition as a clinician educator since being appointed to the rank of assistant professor. Evidence of national recognition and impact should be related to the primary focus of this pathway (clinical or didactic education), but can also be related to clinical, scholarship, or professional service. Excellence is not required in all domains. The clinician-educator pathway may reflect effectiveness as an educator of trainees at any level. Alternatively, the clinician educator pathway may reflect an outstanding clinician who has a demonstrated record of educating colleagues and peers, such as through invitations to serve as faculty on national continuing medical education programs.

Teaching and Mentoring: A strong and consistent record of effective teaching and mentoring is required for promotion. Effectiveness may be measured by various metrics including, but not limited to curriculum/web-based design and implementation, innovative teaching practices, modules, and publications. Consistently positive teaching evaluations by students, trainees, and peers are required. Peer evaluation is required on a recurring basis for all faculty members (see dossier documentation section). Effectiveness may also be reflected by teaching awards or other honors. Clinician Educators may also demonstrate national impact through invitations to serve as faculty on national continuing medical education programs or societal leadership in education or other national activities. In all cases, evidence of improved educational processes or outcomes

(i.e., impact) is required. Programs that improve the cultural competence of or access to teaching for underserved populations are particularly valued.

Teaching (with clinical responsibilities)

Evidence of persistent commitment to teaching and ongoing development of teaching abilities, as reflected by:

1. Consistently high-level evaluations of teaching performance by students, residents, peers.
2. Divisional or department teaching awards as voted by medical students and/or residents.
3. Participation in the development of new educational programs for teaching students or residents at Ohio State.
4. Local leader of a nationally funded or multi-institutional educational project
5. Participation in the publication of material of a scientific or instructional nature or evidence of production of other forms of teaching material (e.g. online educational modules, serious gaming modules or other similar educational materials etc.)
6. Participation in teaching for local, regional and national professional organizations with high level lecture evaluations from national audiences
7. Participation in the development of educational materials for local, regional and national professional organizations.

(To reach the associate professor level the faculty member is expected to have at least three of these accomplishments, including #1 or #2 and # 3 or #4 and #5 or #6.)

Service: Service is broadly defined to include administrative service to the University, exemplary patient care, program development relating to clinical, administrative, leadership and related activities, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University. Professional service could include, but is not limited to, peer reviews of manuscripts and grant applications, serve on editorial boards, service to the community as pertains to the candidate's specialty, development of innovative programs that advance the mission of the university, such as creation and sustenance of a program to deliver healthcare to the community, or design and implementation of a novel program to reduce race or gender based discrimination within the Department, College, University or beyond, and leadership positions in professional societies.

Service (with clinical responsibilities)

Evidence of commitment to the provision of service to the institution, the community or the profession, as reflected by:

1. Completion of specialty Board certification.
2. Maintenance of certification.
3. Evidence of a high-level of clinical competence.
4. Active participation in divisional, department, College, Health Sciences, Health System or Medical Staff and/or University committee functions.
5. Participation in committee activities for local, regional and national organizations.
6. Elected office in local, regional or national professional organizations.
7. Other meritorious community service activities
8. Demonstrated adherence to the values contained in the Statement of Professional Ethics of the American Association of University Professors.
9. Maintenance of appropriate licensure and medical staff appointment(s).

10. Involvement in a novel program to reduce race or gender-based discrimination within the Department, College, University or beyond and leadership positions in professional societies.

(To reach the associate professor level, the faculty member is expected to achieve accomplishments #1, #2 (if applicable) #3, #4, #5, #8, and #9.)

Scholarship: The candidate must demonstrate contributions to scholarship, a portion of which should be peer-reviewed journal publications. Candidates must demonstrate the impact of their scholarship. Faculty in the Clinician Educator Pathway may focus on the pedagogy of education and publish in this domain. Examples include papers regarding innovative teaching techniques, scholarly review articles and book chapters focused on education theory, new curricula and methods of evaluation. Alternatively, other faculty members in the Clinician Educator Pathway may publish works 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. For both types of faculty careers, development of web-based or video-teaching modules and other digital media are considered to be published works. In the current era of team 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. A range of 10-15 scholarly written or digital publications of this type since appointment as an assistant professor is suggested as a scope of work consistent with promotion to associate professor. The final range of required publications is specified below. However, this range does not represent an inflexible requirement for promotion. For the department, the following will constitute specific accomplishments characteristic of individuals worthy of promotion to clinical associate professor, Clinician Educator Pathway in the areas of teaching, research and service:

#### Research and Scholarship (with clinical responsibilities)

1. Publications in peer-reviewed journals. As a general guideline, 10 peer reviewed publications of which the top 10 have a mean impact factor at the median (50<sup>th</sup> percentile) of surgical specialty journals (Appendix 1 and 2), scholarly review articles, and/or web based or video teaching modules since being appointed as assistant professor at OSU.
2. Presentations of scholarly work at local, regional, national and international meetings.
3. Development, publication and/or presentation of scholarly work in other formats (e.g., online activities, etc.)
4. Local lead investigator of an educational grant or a multi-institutional educational program.

(To reach the associate professor level, the faculty member is expected to achieve three of these accomplishments including #1.)

#### **b. Clinical Professor, Clinician Educator Pathway**

Teaching and Mentoring: A documented record of sustained teaching and mentoring excellence is required for promotion. Candidates must demonstrate the impact of their teaching and mentoring. Sustained positive evaluations by students, residents, fellows, local colleagues and/or

national peers are required. Multiple teaching awards and other honors are indicative of this level of teaching excellence but are not required. Candidates must demonstrate favorable impact on teaching and training programs, such as curriculum/web-based innovation, new teaching modalities or methods of evaluating teaching, and/or program or course development. Other examples include the development of multiple impactful, innovative programs that integrate teaching, research and patient care. Programs that improve the cultural competence of or access to teaching for underserved populations are particularly valued. Teaching excellence may also be demonstrated through committee appointments in national education committees such as Accreditation Council for Graduate Medical Education, National Medical Association, American Association of Higher Education, Association of American Colleges and Universities or Association of American Medical Colleges, including specialty boards or professional societies at national level.

Mentorship of junior faculty is an expectation for faculty being considered to the rank of professor. Candidates should demonstrate evidence of mentoring or other career development activities for other faculty members.

#### Teaching (with clinical responsibilities)

Evidence of persistent commitment to teaching and ongoing development of teaching abilities, as reflected by:

1. Consistently high-level evaluations of teaching performance by students, residents, peers.
2. Divisional or department teaching awards as voted by medical students and/or residents.
3. Participation in the development of new educational programs for teaching students or residents at Ohio State.
4. National leader of a nationally funded or multi-institutional educational project
5. Leadership and or meaningful contribution in teaching for national or international professional organizations and excellent lecture evaluations from these audiences
6. Leadership and or meaningful contribution in the development of educational materials for national or international professional organizations.

(To reach the professor level the faculty member is expected to have at least four of these accomplishments, including #1 or #2 and # 3, #4, #5 and #6.)

Service: Service to the institution and profession is an expectation for promotion to professor. Service is broadly defined to include administrative service to the University, patient care, program development relating to clinical, administrative, leadership and related activities, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University. Professional service could include, but is not limited to, peer reviews of manuscripts and grant applications, serve on editorial boards, development of innovative programs that advance the mission of the university, such as creation and sustenance of a program to deliver healthcare to the community, or design and implementation of a novel program to reduce race or gender-based discrimination in the within the Department, College, University or beyond, and leadership positions in professional societies. In addition, invitations to serve as external evaluators for promotion candidates from peer institutions is a reflection of national reputation.

Service (with clinical responsibilities)

Evidence of commitment to the provision of service to the institution, the community or the profession, as reflected by:

1. Completion of specialty Board certification.
2. Maintenance of certification.
3. Evidence of a high-level of clinical competence.
4. Leadership in divisional, department, College, and/or University committee functions
5. Leadership of committee activities for national or international organizations.
6. Elected office in national or international professional organizations.
7. Director of a department or Divisional Educational Program
8. Other meritorious community service activities
9. Demonstrated adherence to the values contained in the Statement of Professional Ethics of the American Association of University Professors.
10. Maintenance of appropriate licensure and medical staff appointment(s).
11. Leadership or significant involvement in a novel program to reduce race or gender-based discrimination within the Department, College, University or beyond and leadership positions in professional societies.

(To reach the professor level, the faculty member is expected to achieve Accomplishments #1, #2 (if applicable) #3, #4, and #5 or #6 or #7, and #9 and #10.)

Scholarship: The candidate must demonstrate contributions to scholarship, a portion of which should be peer-reviewed journal publications. Candidates must demonstrate the impact of their scholarship. Faculty in the Clinician Educator Pathway may focus on the pedagogy of education and publish in this domain. Examples include papers regarding innovative teaching techniques, scholarly review articles and book chapters focused on education theory, new curricula and methods of evaluation or clinical community based educational efforts.

Alternatively, other faculty members in the Clinician Educator Pathway may publish works 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 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. At least 15 scholarly written or digital publications of this type since appointment or promotion to associate professor is suggested as a scope of work consistent with promotion to professor. The final range of required publications is to be specified below. However, this range does not represent an inflexible requirement for promotion.

For the department, the following will constitute specific accomplishments characteristic of individuals worthy of promotion to Clinical Professor, Clinician Educator Pathway in the areas of teaching, research and service:



### Research and Scholarship (with clinical responsibilities)

1. First or senior author/meaningful scholarship in the publication of material of a scientific or instructional nature or evidence of production of other forms of teaching material (e.g. online educational programs, serious gaming etc.) As a general guideline, a minimum of 15 peer reviewed publications, scholarly review articles, and/or web based or video teaching modules since being appointed as associate professor at OSU with a mean impact factor of the top ten at the 50<sup>th</sup> percentile of the OHNS department's Journal Rank List.
2. Publication of books, chapters or monographs
3. Presentations of scholarly work at local, regional, national and international meetings.
4. Development, publication and/or presentation of scholarly work in other formats (e.g., online resources, DVDs, etc.)
5. Local leader of a nationally funded or multi-institutional educational project unless  $\geq 25$  total publications and clear evidence of a national reputation

(To reach the professor level, the faculty member is expected to achieve three of these accomplishments including #1 and #4.)

### **c. Associate Clinical Professor, Clinician Scholar Pathway**

The awarding of promotion to the rank of associate professor on the clinical faculty -clinician-scholar pathway must be based upon convincing evidence that that the candidate has developed a national level of impact and recognition as a clinician scholar since being appointed to the rank of assistant professor. Evidence of national recognition and impact should be related to the primary focus of this pathway (scholarship), but can also be related to clinical, educational, or professional service but is not required in all domains.

Teaching and Mentoring: A strong and consistent record of effective teaching and mentoring is required for promotion. This may be demonstrated by positive evaluations by students, residents, fellows, local colleagues and/or national peers. Teaching evaluations may be based on presentations internally or at other academic institutions, bedside teaching scores, presentations or tutorials at scientific conferences or meetings, presentations at other medical centers or hospitals, etc. Teaching awards and other honors are also supportive of a strong teaching record but are not required. Peer evaluation is required on a recurring basis for all faculty members (see dossier documentation section).

### Teaching (with clinical responsibilities)

Evidence of persistent commitment to teaching and ongoing development of teaching abilities, as reflected by:

1. Consistently high-level evaluations of teaching performance by students, residents, peers.
2. Divisional or department teaching awards as voted by medical students and/or residents.
3. Participation in the development of new educational programs for teaching students or residents.
4. Participation in faculty mentoring or T-32 grants.
5. Participation in teaching for national or international professional organizations and excellent lecture evaluations from national audiences
6. Participation in the development of educational and clinical materials for national and international professional organizations.

(To reach the professor level the faculty member is expected to have at least three of these accomplishments, including #1 or #2, and # 3 or #4, and #5 or #6.)

Scholarship: Demonstration of impact and a national reputation for scholarship is a prerequisite for promotion to associate professor. The candidate must demonstrate scholarship typically as reflected by primary, senior or corresponding author of peer-reviewed journal publications, scholarly review articles and case reports, and participation in basic, translational clinical, or health services research projects, or in clinical trials as PI or Co-I. Participation in collaborative, multidisciplinary research and team science is valued. 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.) In general, range of 10-20 peer reviewed publications since appointment to assistant professor is expected. The final range of required publications is to be specified below. The dossier will require the demonstration of impact, not just the potential for impact. Although review articles may form a portion of the publication list (typically less than 30%) and may be used to indicate that a faculty member is considered to be an expert in the field, a successful dossier will contain primarily peer-reviewed research articles; book chapters or reviews alone or in majority will not be sufficient for promotion.

Faculty on this pathway should have acquired external funding (as PI or Co-I) in support of their program of scholarship. Candidates should have a track record of funding by NIH or comparable agencies, foundation or industry. Alternatively, entrepreneurship and inventorship are also evidence of scholarly activity.

Research and Scholarship (with clinical responsibilities)

1. Publications in peer-reviewed journals.
  - a. As a general guideline the candidate should have a minimum of 20 peer reviewed publications, scholarly review articles, and/or web based or video teaching modules. Of these 15 being since promoted or appointed to assistant professor at OSU. The mean impact factor of the top ten publications should be at the 50th percentile of surgical specialty journal rank list.
2. Participation as an investigator or co-investigator in multiple clinical trials or nationally funded grant at least one of which is as a principal investigator; or patents; or national reputation for innovation unless > 40 publications and evidence of an established national or international reputation
3. Presentations of scholarly work national or international meetings.
4. Invited lectureships and visiting professorships
5. Development, publication and/or presentation of scholarly work in other formats (e.g., videotapes, DVDs, etc.)

(To reach the professor level, the faculty member is expected to achieve three of these accomplishments including #1 and #2.)

Service: Service is broadly defined to include administrative service to the University, exemplary patient care, program development relating to clinical, administrative, leadership and related activities, professional service to the faculty member's discipline, and the

provision of professional expertise to public and private entities beyond the University. Professional service could include, but is not limited to, peer reviews of manuscripts and grant applications, serve on editorial boards, development of innovative programs that advance the mission of the university, such as creation and sustenance of a program to deliver healthcare to the community, or design and implementation of a novel program to reduce race or gender based discrimination in the within the Department, College, University or beyond and leadership positions in professional societies.

#### Service (with clinical responsibilities)

Evidence of commitment to the provision of service to the institution, the community or the profession, as reflected by:

1. Completion of specialty Board certification.
2. Maintenance of certification.
3. Evidence of a high-level of clinical competence as recognized by clinical outcomes and patient evaluations.
4. Active participation in divisional, department, College, Health Sciences, Health System and/or University committee functions.
5. Participation in the development of new programs or evidence-based practice guidelines for the advancement of medical practice or patient care.
6. Committee participation in local, regional and national organizations.
7. Elected office in local regional, national or international professional organizations.
8. Other meritorious community service activities
9. Demonstrated adherence to the values contained in the Statement of Professional Ethics of the American Association of University Professors.
10. Maintenance of appropriate licensure and medical staff appointment(s).

(To reach the associate professor level, the faculty member is expected to achieve accomplishments #1, #2 ( if applicable) #3, #4 or #5, and #6, #9, #10 at a minimum.)

#### **d. Clinical Professor, Clinician Scholar Pathway**

The awarding of promotion to the rank of professor on the clinical faculty-clinician-scholar pathway must be based upon convincing evidence that the candidate has developed national leadership or international recognition as a clinician scholar since being appointed to the rank of associate professor. Evidence of national leadership or international recognition and impact should be related to the primary focus of this pathway (scholarship), but can also be related to clinical, educational, or professional service but is not required in all domains.

Teaching and Mentoring: A strong and consistent record of effective teaching and mentoring is required for promotion to professor. Programs that improve the cultural competence of or access to teaching for underserved populations are particularly valued. This may be demonstrated by positive evaluations by students, residents, fellows, local colleagues and national peers.

Teaching evaluations may be based on presentations internally or at other academic institutions, presentations or tutorials at scientific conferences or meetings, presentations at other medical centers or hospitals, etc. Teaching awards and other honors are also supportive of a strong teaching record but are not required. Peer evaluation is required on a recurring basis for all faculty members (see dossier documentation section). Candidates should demonstrate consistent effective teaching of trainees and practicing clinicians, and leadership in the

administration of clinical training programs.

Mentorship of junior faculty is an expectation for faculty being considered to the rank of professor. It is presumed that this will take the form of a primary mentoring relationship, and not just ad hoc career coaching. Candidates must demonstrate evidence of mentoring or other career development activities for other faculty members. Active participation as a mentor in training grants such as NIH T32 or K-awards and other such mentored programs is very highly valued as a teaching and mentoring activity.

#### Teaching (with clinical responsibilities)

Evidence of persistent commitment to teaching and ongoing development of teaching abilities, as reflected by:

1. Consistently high-level evaluations of teaching performance by students, residents, peers.
2. Divisional or department teaching awards as voted by medical students and/or residents.
3. Participation in the development of new educational programs for teaching students or residents.
4. Participation in faculty mentoring or T-32 grants, R-25 grants, etc.
5. Participation in teaching for national or international professional organizations and excellent lecture evaluations from national audiences
6. Participation in the development of educational and clinical materials for national and international professional organizations.

(To reach the professor level the faculty member is expected to have at least three of these accomplishments, including #1 or #2, and # 3 or #4, and #5 or #6.)

Scholarship: Demonstration of a sustained and expanded impact and national reputation for scholarship is a prerequisite for promotion to professor. The candidate must demonstrate scholarship typically as reflected by primary, senior or corresponding author of peer-reviewed journal publications, scholarly review articles and case reports, and participation in basic, translational or clinical, or health services research projects or in clinical trials as PI or Co-I. Participation in collaborative, multidisciplinary research and team science is highly valued. 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). In general, a range of 20-30 peer reviewed publications since appointment to associate professor is expected. The final range of required publications is to be specified below. The dossier will require the demonstration of impact, not just the potential for impact. Although review articles may form a portion of the publication list and may be used to indicate that a faculty member is considered to be an expert in the field, a successful dossier will also contain peer-reviewed research articles, books, and book chapters or reviews.

Faculty on this pathway should have acquired external funding (as PI or Co-I) in support of their program of scholarship. Candidates should have a track record of funding by NIH or comparable agencies, foundation or industry. Alternatively, entrepreneurship and inventorship are also evidence of scholarly activity.

#### Research and Scholarship (with clinical responsibilities)

1. Publications in peer-reviewed journals. As a general guideline the candidate should have a minimum of 30 peer reviewed publications, scholarly review articles, and/or web based or video teaching modules. Of these 15 being since promoted or appointed to associate professor at OSU. The mean impact factor of the top ten publications should be at the 50th percentile of surgical specialty journal rank list.
2. Participation as an investigator or co-investigator in multiple clinical trials with documented enrollment of study subjects or nationally funded grant at least one of which is as a principal investigator; or patents; or national reputation for innovation unless > 50 publications and evidence of an established national or international reputation.
3. Presentations of scholarly work national or international meetings.
4. Invited lectureships and visiting professorships
5. Development, publication and/or presentation of scholarly work in other formats (e.g., videotapes, DVDs, etc.)

(To reach the professor level, the faculty member is expected to achieve three of these accomplishments including #1 and #2.)

Service: Promotion to the rank of professor requires service to the University, and in a national context. The faculty member should have increased levels of responsibility and leadership (e.g. committee chair or elected office in national or international organizations) since appointment or promotion to associate professor. Candidates may have led the development of new and innovative clinical or clinical research programs which received national recognition. Similarly, innovative programs that advance the mission of the university, such as creation and sustenance of a program to deliver healthcare to the community, or design and implementation of a novel program to reduce race or gender-based discrimination in the within the Department, College, University or beyond, can be considered service activities. Professional service could include, but is not limited to, peer reviews of manuscripts and grant applications, serve on editorial boards, leadership positions in professional societies.

Service (with clinical responsibilities)

Evidence of commitment to the provision of service to the institution, the community or the profession, as reflected by:

1. Completion of specialty Board certification.
2. Maintenance of certification.
3. Evidence of a high-level of clinical competence as evidenced by outstanding clinical outcomes, patient evaluations and national peer recognition.
4. Director of a TIU.
5. Chairperson of divisional, department, College, Health Sciences, Health System and/or University committee functions.
6. Committee Chair for national or international organizations.
7. Elected office in national or international professional organizations.
8. Other meritorious community service activities
9. Demonstrated adherence to the values contained in the Statement of Professional Ethics of the American Association of University Professors.
10. Maintenance of appropriate licensure and medical staff appointment(s).
11. Leadership or significant involvement in a novel program to reduce race or gender-based discrimination in the within the Department, College, University or beyond and leadership positions in professional societies.

(To reach the professor level, the faculty member is expected to achieve accomplishments #1, #2 (if applicable) #3, #4, or #5 and #6 or #7 or #8 and #9 and #10 at a minimum)

**e. Associate Clinical Professor, Clinical Excellence Pathway**

Faculty members with predominantly clinical or clinical administrative responsibilities may be considered for promotion based on clinical excellence. Ordinarily these faculty have 80% or greater clinical and/or clinical administrative responsibilities; however, Departments should define any deviations for the Excellence Pathway in their department Appointment, Promotion, or Tenure documents. These faculty have distinguished themselves by having particularly outstanding clinical outcomes. These faculty are recognized for the scholarship of clinical practice or novel contributions to the advancement of the practice in their field. Local recognition for outstanding clinical care is a hallmark of qualification for Associate Professor on the Clinical Excellence Pathway. National recognition is not a requirement. The awarding of promotion to the rank of associate professor on the clinical excellence pathway must be based upon convincing evidence that the candidate has demonstrated outstanding clinical outcomes, and a record of impact relating to clinical care. Promotion will not be granted purely on the basis of length of service to the institution, clinical productivity, or satisfactory job performance. A faculty member who qualifies for promotion on this pathway should have supportive annual evaluations that document clinical effort in the years leading up to promotion on this pathway.

These faculty are expected to support the research and teaching mission of the department, but the focus of the promotion review is on demonstration of clinical excellence. The documentation and demonstration of outcomes or impact is required. It is not expected that candidates will meet all of the examples below, but meeting only one will not satisfy the demonstration of collective impact of excellence.

Examples of excellence may include, but are not limited to:

1. Multiple lines of evidence supporting excellence in clinical performance, including discipline relevant clinical measures such as, but not limited to quality indicators, mortality metrics, complication rates, turnaround times, readmission rates, process improvements, reduction in health disparities, improvements in community health outcomes and patient satisfaction rates where performance measures can easily be internally and externally benchmarked for comparison. Clinical productivity metrics (e.g. wRVU) per se, are not sufficient for supporting excellence in clinical performance.
2. Preferred provider recognition. Referral patterns or other metrics that indicate acknowledgment of a faculty member's expertise such as, but are not limited to, the number of cases referred for a second opinion, patients referred from other states or other regions within Ohio.
3. A record that demonstrates that a faculty member is frequently consulted by physicians from outside the OSU system for advice about patient care.
4. Evidence that physicians from other medical centers come to OSU/NCH for training specifically by the faculty member, or request proctoring at their home institution by the faculty member.
5. A record that demonstrates the faculty member has been invited to lecture locally, regionally or at other hospitals, academic medical centers or statewide professional societies.

6. Clinical program development. 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.
7. Evidence that a faculty member has developed clinical innovations that have been adopted by other physicians within or outside the Medical Center.
8. Evidence that the faculty member participates as an instructor or involved with the development of education activities at local or state levels that are in person, virtual, or web-based.
9. Selection for inclusion in physician rankings such as Best Doctors, Castle-Connolly, U.S. News Physicians Survey or similar rankings.
10. Receipt of awards from local, state, national organizations for clinical excellence.
11. Participation in the development of institutional or statewide practice guidelines.

For the department the following will constitute specific accomplishments characteristic of individuals worthy of promotion to associate clinical professor, Clinician Scholar Pathway in the areas of teaching, research and service:

Teaching (with clinical responsibilities)

Evidence of persistent commitment and engagement in to teaching:

1. Evidence of involvement in teaching of students and residents,
2. Evidence of development of educational materials for patients

(To reach the associate professor level the faculty member is expected to have at least one of these accomplishments)

Research and Scholarship (with clinical responsibilities)

1. Evidence of participation in clinical research including but not limited to enrollment of patients in clinical trials available in the medical center or national studies, publication of practice guidelines or publication of clinical innovation.
2. Evidence of establishing a data base on patients for the purpose of monitoring quality and outcomes in the physician's area of practice.

(To reach the associate professor level, the faculty member is expected to achieve one of these accomplishments.)

Service (with clinical responsibilities)

Evidence of commitment to the provision of service to the institution, the community or the profession, as reflected by:

1. Completion of specialty Board certification.
2. Maintenance of certification.
3. Maintenance of appropriate licensure and medical staff appointment(s).
4. Evidence of a high level of patient service as demonstrated by patient satisfaction scores.
5. Clinical productivity as measured by work RVUs with full recovery of salary, retirement and benefits, and overhead from clinical service.

6. Active participation in divisional or department activities including faculty meetings, morbidity and mortality conferences and grand rounds
7. Other meritorious community service activities
8. Demonstrated adherence to the values contained in the Statement of Professional Ethics of the American Association of University Professors.
9. Evidence of clinical excellence:
  - a) Patients from outside our primary service area regularly are referred specifically to, or seek care from the faculty member
  - b) Evidence that a faculty member is regularly consulted by physicians from outside our primary service area
  - c) Evidence that physicians from other medical centers come to OSU for training specifically by the faculty member, or request proctoring at their home institution by the faculty member
  - d) 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 by other institutions or practices.
  - e) Evidence that a faculty member has developed clinical innovations that have been adopted by other physicians within or outside the University.
  - f) Evidence that the faculty member regularly participates as an instructor in regional or national courses or seminars.
  - g) Selection for Best Doctors lists or equivalent.
10. Involvement in a novel program to reduce race or gender-based discrimination within the Department, College, University or beyond and leadership positions in professional societies.

(To reach the associate professor level, the faculty member is expected to achieve accomplishments in eight areas including #1, #2 (if applicable), #3, #4, #5, #6, #8 and 3 of 7 sub-points in #9)

#### **f. Clinical Professor, Clinical Excellence Pathway**

Faculty members with predominantly clinical or clinical administrative responsibilities may be considered for promotion based on clinical excellence. Ordinarily these faculty have 80% or greater clinical and/or clinical administrative responsibilities. These faculty have distinguished themselves by having particularly outstanding clinical outcomes. These faculty are recognized for the scholarship of practice or novel contributions to the advancement of the practice in their field. State and national recognition for outstanding clinical care is a hallmark of qualification for Professor on the Clinical Excellence Pathway. The awarding of promotion to the rank of professor in the clinical excellence pathway must be based upon convincing evidence that the candidate has demonstrated a sustained and enhanced level of excellence in clinical care and has developed a national impact and recognition since being appointed to the rank of associate professor.

Mentorship of junior faculty is an expectation for faculty being considered to the rank of



professor.

Promotion will not be granted solely on the basis of length of service to the institution, time in rank, clinical productivity, or satisfactory job performance. A faculty member who qualifies for promotion on this pathway should have supportive annual evaluations that document increasing clinical impact and performance since achieving the rank of associate professor. These faculty are expected to support the research and teaching mission of the department, but the focus of the promotion review is on demonstration of clinical excellence. The documentation and demonstration of outcomes or impact is required. It is not expected that any candidate will meet all of the examples below but meeting only one will not satisfy the demonstration of collective impact of excellence.

Examples of excellence may include, but are not limited to:

1. Multiple lines of evidence supporting excellence in clinical performance, including discipline relevant clinical measures such as, but not limited to quality indicators, mortality metrics, reduction in health disparities, improvements in community health outcomes, complication rates, turnaround times, readmission rates, process improvements and patient satisfaction rates where performance measures can easily be internally and externally benchmarked for comparison. Clinical productivity metrics (e.g. wRVU) per se, are not sufficient for supporting excellence in clinical performance.
2. Preferred provider recognition. Referral patterns or other metrics that indicate acknowledgment of a faculty member's expertise such as, but are not limited to the number of cases referred for a second opinion, patients referred from other states or other countries.
3. A record that demonstrates that a faculty member is frequently consulted by physicians from outside the OSU system for advice about patient care.
4. Evidence that physicians from other medical centers outside of Ohio come to OSU/NCH for training specifically by the faculty member, or request proctoring at their home institution by the faculty member.
5. A record that demonstrates the faculty member has been invited to lecture nationally at hospitals, academic medical centers or national professional societies.
6. Clinical program development. 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.
7. Evidence that a faculty member has developed clinical innovations that have been adopted by other physicians within or outside the Medical Center.
8. Evidence that the faculty member participates as an instructor or involved with the development of education activities at the state or national level that are in person, virtual, or web-based.
9. Selection for inclusion in physician rankings such as Best Doctors, Castle-Connolly, U.S. News Physicians Survey or similar rankings.
10. Receipt of awards from state or national organizations for clinical excellence.
11. Participation in the development of national practice guidelines.

For the department, the following will constitute specific accomplishments characteristic of

individuals worthy of promotion to Clinical Professor, Clinical Excellence Pathway in the areas of teaching, research and service:

Teaching (with clinical responsibilities)

Evidence of persistent commitment and engagement in to teaching:

1. Evidence of involvement in teaching of students and residents,
2. Evidence of development of educational materials for patients

(To reach the associate professor level the faculty member is expected to have at least one of these accomplishments,

Research and Scholarship (with clinical responsibilities)

1. Evidence of participation in clinical research including but not limited to enrollment of patients in clinical trials available in the medical center or national studies publication of national practice guidelines or publication of clinical innovation.
2. Evidence of establishing a data base on patients for the purpose of monitoring quality and outcomes in the physician's area of practice.

(To reach the professor level, the faculty member is expected to achieve one of these accomplishments.)

Service (with clinical responsibilities)

Evidence of commitment to the provision of service to the institution, the community or the profession, as reflected by:

1. Completion of specialty Board certification.
2. Maintenance of certification.
3. Maintenance of appropriate licensure and medical staff appointment(s).
4. Evidence of a high-level of clinical competence.
5. Evidence of a high level of patient service as demonstrated by patient satisfaction scores since promoted to associate professor
6. Clinical productivity as measured by work RVUs with full recovery of salary, retirement and benefits from clinical work.
7. Recognition in the Castle and Connelly or U.S. News Physicians Survey or similar (Best Doctors, Inc.) etc. or clear evidence that they receive patient referrals from throughout the State of Ohio or national awards for clinical excellence and innovation are clear indicators of achievement. (see #11)
8. Active participation in divisional or department activities including faculty meetings, morbidity and mortality conferences and grand rounds
9. Other meritorious community service activities
10. Demonstrated adherence to the values contained in the Statement of Professional Ethics of the American Association of University Professors.
11. Evidence of national reputation of clinical excellence:
  - a) Patients from outside our primary service area regularly are referred specifically to, or seek care from the faculty member
  - b) Evidence that a faculty member is regularly consulted by physicians from outside our primary service area

- c) Evidence that physicians from other medical centers come to OSU for training specifically by the faculty member, or request proctoring at their home institution by the faculty member
  - d) 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 by other institutions or practices.
  - e) Evidence that a faculty member has developed clinical innovations that have been adopted by other physicians within or outside the University.
  - f) Evidence that the faculty member regularly participates as an instructor in regional or national courses or seminars.
  - g) Selection for Best Doctors lists.
- 12 Leadership or significant involvement in a novel program to reduce race or gender-based discrimination within the Department, College, University or beyond and leadership positions in professional societies.

(To reach the professor level, the faculty member is expected to achieve accomplishments in nine areas including #1, #2 (if applicable), #3, #4, #5, #6, #7, #8, #10 and 5 of 7 sub-points in #11.)

## **5 Research Faculty**

### **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. This may be reflected by (but not limited to) invitations to review manuscripts or grant applications, invitations to lecture at scientific societies or other universities, consultation with industry or governmental agencies, requests for collaboration from other universities, request to serve in central roles on multi-center studies, etc.

Research faculty typically are not expected to establish an independent program of research. Promotion to associate professor requires documentation of a sustained and substantial record of scholarship based upon their expertise. Candidates typically should have 20-25 peer reviewed journal publications since their appointment as research assistant professors. First, senior, or corresponding authorships are typically not expected. Overall, the number of publications required for promotion should be sufficient to persuasively characterize the faculty member's influence in helping to discover new knowledge in their field (at least 20 total). Thus, both quality and quantity are important considerations. It should be appreciated that scholarship exceeding the specified range is not a guarantee of a positive promotion decision. Similarly, records of scholarship below the specified range do not preclude a positive promotion decision.

It is expected that the successful candidate will have a sustained record of 100% salary recovery from extramural sources. Research faculty typically serve as Co-Investigators, and independent extramural funding (Principal Investigator or Multiple Principal Investigator) is not required.

### **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 that which was established for promotion to associate professor. This may be reflected by (but not

limited to) invitations to review manuscripts or grant applications, invitations to lecture at scientific societies or other universities, consultation with industry or governmental agencies, requests for collaboration from other universities, request to serve in central roles on multi-center studies, etc.

Research faculty typically are not expected to establish an independent program of research. Promotion to professor requires documentation evidence of a sustained and substantial record of scholarship. Candidates should have 25-35 peer reviewed journal publications since their appointment as research associate professor. Some first, senior, or corresponding authorships are expected. Overall, the number of publications required for promotion should be sufficient to persuasively characterize the faculty member's influence in helping to discover new knowledge in their field (at least 35 total). Thus, both quality and quantity are important considerations. It should be appreciated that scholarship exceeding the specified range is not a guarantee of a positive promotion decision. Similarly, records of scholarship below the specified range do not preclude a positive promotion decision.

It is expected that the successful candidate will have a sustained record of 100% salary recovery from extramural sources. Research faculty typically serve as Co-Investigators, and independent extramural funding (Principal Investigator or Multiple Principal Investigator) is not required

## **6 Associated Faculty**

### **a. Compensated Associated Faculty (i.e. Practice)**

For compensated associated faculty (paid through OSU, OSUP, or NCH) who are principally focused on patient care, the promotion criteria will be identical to those for the Clinical Excellence Pathway. For compensated associated faculty (paid through OSU, OSUP, or NCH) who contribute principally through educational activities, the promotion criteria will be identical to those for the Clinician Educator Pathway.

### **b. Uncompensated Associated Faculty (i.e. Adjunct)**

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

Required documentation for considering promotion of associated faculty:

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

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

## **B Procedures for Tenure-Track, Clinical, and Research Faculty**

The department's procedures for promotion and tenure and promotion reviews are fully consistent with those set forth in Faculty Rule [3335-6-04](#) and the Office Academic Affairs annually updated procedural guidelines for promotion and tenure reviews found in Volume 3 of the [Policies and Procedures Handbook](#).

### **1 Candidate Responsibilities**

- **Dossier**

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

While the 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 are to be completed by him or her.

The time period for teaching documentation to be included in the dossier for probationary faculty is the start date to present. For tenured or non-probationary faculty, it is the date of last promotion or the last five years, whichever is less, to present. The eligible faculty may allow a tenured or nonprobationary candidate to include information prior to the date of last promotion if it believes such information would be relevant to the review. Any such material should be clearly indicated.

The time period for scholarship documentation to be included in the dossier for probationary faculty is the start date to present (including residency and/or post-doctoral training). 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 present. 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. All scholarship outcomes will be reviewed for increasing independence over time. There should also be an increasing trajectory of significant scholarly outcomes over time.

The time period for service documentation to be included in the dossier for probationary faculty is the start date to present. For tenured or non-probationary faculty, it is the date of last promotion to present. The eligible faculty may allow a candidate to include information prior to the date of last promotion if it believes such information would be relevant to the review. Any such material should be clearly indicated.

The complete dossier is forwarded when the review moves beyond the department. The documentation of teaching and scholarship is forwarded along with the dossier.

a) Documentation

Faculty members preparing their dossiers for promotion and/or tenure review should consult [Volume 3](#) of OAA's policies and procedures 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.

i. 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 in the College of Medicine must be engaged in teaching, development of the Department's and College's academic programs, and mentoring of students, residents and fellows. Evidence of effective teaching must be demonstrated by documentation of teaching activities over a sustained period of time.

Evidence for effective teaching may be collected from multiple different sources including students, residents, self-evaluation and administrators.

Yearly, student evaluations, resident & fellow evaluations (when applicable) and peer evaluations, at a minimum, are required. Effectiveness in teaching is demonstrated by positive evaluations from students, residents, fellows, local colleagues and national peers. Each department must establish a consistent methodology and assessment tool for teacher evaluation by students, residents & fellows in specific types of instructional settings.

Importantly, administration of an assessment tool must not be under the control of the faculty member being evaluated. Faculty members may supplement the required assessment tool with others if they wish. Students, residents & fellows must be provided an opportunity to assess the instructor and course using the required assessment tool in every regular classroom course. Guidelines must be established for the frequency with which required assessment tools should be administered in other types of instructional settings such as outpatient clinics, inpatient services, and the operating room. Regardless of the instructional setting, effort should be made to obtain evaluations from the largest number of students, residents & 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 student opinion.

Typically, documentation of teaching for the promotion dossier will include:

- Cumulative SEI reports (Student Evaluation of Instruction computer-generated summaries prepared by the Office of the University Registrar) for every formal class
- Medical student evaluations (e.g., Vitals)

- Resident evaluations (e.g., MedHub)
- Peer evaluation of teaching reports as required by the department's peer evaluation of teaching program (details provided in the Appendix to this document)
- Teaching activities as listed in the core dossier including
  - involvement in graduate/professional exams, theses, and dissertations, and undergraduate research
  - mentoring postdoctoral scholars and researchers
  - extension and continuing education instruction
  - involvement in curriculum development
  - awards and formal recognition of teaching
  - presentations on pedagogy and teaching at national and international conferences
  - adoption of teaching materials at other colleges or universities
- Other relevant documentation of teaching as appropriate

Peer evaluation is required on a recurring basis for all faculty members. Peer evaluations may include internal, and/or external review of classroom instruction, clinical teaching and course materials such as syllabi, examinations and instructional materials including textbooks. Assessment by observation of classroom and clinical teaching is most useful when done systematically over time and conducted with the specific goal of offering constructive suggestions. Responsibility for arranging for and carrying out peer review activities must rest with someone other than the faculty member whose teaching or teaching materials are to be reviewed.

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

Peer evaluation resources can be found [here](#).

## ii. Scholarship

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

All tenure track, clinical, and research faculty members (with the exception of 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. The evidence for scholarship must refer to original, substantive works that are documented achievements. Recognition of the scholarly work must also be external to the University, residing in the scientific communities apropos to the faculty member's field of scholarship.

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, development of academic modules, entrepreneurship, etc. The nature of scholarship should be pertinent to the faculty member's track and pattern of responsibilities. In addition, departments should incorporate mechanisms to recognize new and emerging methods of dissemination of scholarship including websites, social media, etc.

Evidence of scholarship can include but are 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. Departments are encouraged to develop innovative ways of defining and measuring scholarship unique to their specific discipline.

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 external departments or academic health centers, and so forth.

### iii. Service

Service is broadly defined to include administrative service to the University, exemplary patient care, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University. In the College of Medicine, a candidate's service contributions must be demonstrated to be of high quality and effectiveness. All tenure track and clinical faculty members must contribute to service as evidenced by documentation of contributions over a sustained period of time.

Evidence of administrative service to the University may include appointment or election to Department, College, and/or University committees, holding administrative 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 if desired by the department. Evidence of professional service to the faculty member's discipline can include editorships of, or service as, a reviewer for journals or other learned publications; offices held and other service to professional societies. Evidence of the provision of professional expertise to public and private entities beyond the University includes service as a reviewer of grants or other scholarly proposals, external examiner or advisor, a panel and commission participant, and as professional consultant to industry, government, and education. While provision of high quality patient care is expected of all faculty members with clinical



responsibilities, in and of itself it is insufficient for meeting the service requirement for tenure track and clinical faculty.

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

Candidates must also submit a copy of the APT document under which they wish to be reviewed. Candidates may submit the department's current APT document; or, alternatively, they may elect to be reviewed under either (a) the APT document that was in effect on their start date, or (b) the APT document that was in effect on the date of their last promotion, 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. The APT document must be submitted when the dossier is submitted to the Department.

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

If external evaluations are required, candidates are responsible for reviewing the list of potential external evaluators developed by the department chair and the Appointments, Promotion and Tenure Committee. The candidate may add no more than three additional names, but is not required to do so. The candidate may request the removal of no more than two names, providing the reasons for the request. The department chair decides whether removal is justified. (Also see External Evaluations below.) Under no circumstances should a candidate solicit evaluations from any party for purposes of the review.

## **2 Appointments, Promotion and Tenure Committee Responsibilities**

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

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

following year despite incomplete documentation, the individual should be advised that such a review is unlikely to be successful.

- A decision by the committee to permit a review to take place in no way commits the eligible faculty, the department chair or designee, or any other party to the review to making a positive recommendation during the review itself.
- Annually, in late spring through early autumn semester, to provide administrative support for the promotion and tenure review process as described below.
  - **Late Spring:** Select from among its members a Procedures Oversight Designee who will serve in this role for the following year. The Procedures Oversight Designee cannot be the same individual who chairs the committee. The Procedures Oversight Designee's responsibilities are described in the Office of Academic Affairs annual procedural guidelines.
  - **Late Spring:** Suggest names of external evaluators to the department chair or designee.
  - **Early Autumn:** Review candidates' dossiers for completeness, accuracy (including citations), and consistency with Office of Academic Affairs requirements; and work with candidates to assure that needed revisions are made in the dossier before the formal review process begins.
  - Meet with each candidate for clarification as necessary and to provide the candidate an opportunity to comment on his or her dossier. This meeting is not an occasion to debate the candidate's record.
  - Draft an analysis of the candidate's performance in teaching, scholarship and service to provide to the full eligible faculty with the dossier; and seek to clarify any inconsistent evidence in the case, where possible.
  - Revise the draft analysis of each case following the meeting of the full eligible faculty, to include the faculty vote and a summary of the faculty perspectives expressed during the meeting; and forward the completed written evaluation and recommendation to the department chair.
  - Provide a written response, on behalf of the eligible faculty, to any candidate comments that warrant response, for inclusion in the dossier.
  - Provide a written evaluation and recommendation to the department chair or designee in the case of joint appointees from another tenure-initiating unit. The full eligible faculty does not vote on these cases since the department's recommendation must be provided to the other tenure-initiating unit substantially earlier than the committee begins meeting on this department's cases.

### 3 Eligible Faculty Committee Responsibilities

The responsibilities of the members of the Eligible Faculty Committee are as follows:

- To review thoroughly and objectively every candidate's dossier in advance of the meeting at which the candidate's case will be discussed.

- To attend all eligible faculty meetings except when circumstances beyond one's control prevent attendance; to participate in discussion of every case; and to vote.
- Faculty must be present for the entire discussion to be eligible to vote.
- The Appointments, Promotion and Tenure Committee chair will serve as the chair of the Eligible Faculty Committee and will write a letter to the department chair reporting the vote and summarizing the discussion of the eligible faculty. This 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 associate professor or professor if the candidate is an assistant professor being considered for promotion to associate professor, and by a tenured professor if the candidate is an associate professor being considered for promotion to professor.

#### **4 Department Chair Responsibilities**

The responsibilities of the department chair or designees are as follows:

- To charge each member of the Eligible Faculty Committee to conduct reviews free of bias and based on criteria.
- 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.)
- **Late Spring Semester:** To solicit external evaluations from a list including names suggested by the Appointments, Promotion and Tenure Committee, the department chair or designee, and the candidate. (Also see External Evaluations below.)
- To solicit an evaluation from a TIU head or designee of any TIU in which the candidate has a joint appointment.
- To make each candidate's dossier available in an accessible place for review by the eligible faculty at least two weeks before the meeting at which specific cases are to be discussed and voted.
- To remove any member of the eligible faculty from the review of a candidate when the member has a conflict of interest but does not voluntarily withdraw from the review.
- May attend the meetings of the eligible faculty at which promotion and tenure matters are discussed and respond to questions raised during the meeting. At the request of the eligible faculty, the department chair or designee may leave the meeting to allow open discussion among the eligible faculty members.
- **Mid-Autumn Semester:** To provide an independent written evaluation and recommendation for each candidate, following receipt of the eligible faculty's completed evaluation and recommendation.

- To meet with the eligible faculty to explain any recommendations contrary to the recommendation of the committee.
- To inform each candidate in writing after completion of the department review process:
  - of the recommendations by the eligible faculty and department chair
  - of the availability for review of the written evaluations by the eligible faculty and department chair
  - of the opportunity to submit written comments on the above material, within ten calendar days from receipt of the letter from the department chair or designee, for inclusion in the dossier. The letter is accompanied by a form that the candidate returns to the department chair or designee, indicating whether or not he or she expects to submit comments.
- To 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. With the exception of Associated faculty (see Section VI.B.5 below), all dossiers including those with a negative department evaluation must be forwarded to the College. Only the faculty member may stop the review process.
- To receive the eligible faculty's written evaluation and recommendation of candidates who are joint appointees from other tenure-initiating units, and to forward this material, along with the department chair's independent written evaluation and recommendation, to the TIU head or designee of the other tenure-initiating unit by the date requested.

## **5 Procedures for Associated Faculty**

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

## **6 External Evaluations**

External evaluations of scholarly activity and research are obtained for all promotion reviews in which scholarship must be assessed. These include all tenure-track promotion and tenure or promotion reviews and all research appointment contract renewals and promotion reviews. Candidates are permitted to suggest external evaluator names following the criteria below. However, Faculty Rule [3335-6-04](#) requires that no more than half the external evaluation letters in the dossier be written by persons suggested by the candidate.

The number of credible and useful evaluations that must be obtained is described in the COM AP&T document. A credible and useful evaluation:

- Is written by a person highly qualified to judge the candidate's scholarship (or other performance, if relevant) who is not a close personal friend, research collaborator (no shared publications in the last five years, unless part of a very large multi-centered project with a large number of authors), or former academic advisor or post-doctoral mentor of the candidate. Qualifications are generally judged on the basis of the evaluator's expertise, record of accomplishments, and institutional affiliation.

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. Candidates must be provided the opportunity to propose potential external reviewers and to review the proposed list of reviewers to identify potential conflicts. Faculty being considered for promotion on the clinical excellence pathway may have evaluators from this university or from local/regional experts, including a minority of evaluators who are not faculty members, but whose positions afford them the ability to comment on the impact of the candidate's portfolio of professional activities.

- Provides sufficient analysis of the candidate's performance to add information to the review. A letter's usefulness is defined as the extent to which the letter is analytical as opposed to perfunctory. Under no circumstances will "usefulness" be defined by the perspective taken by an evaluator on the merits of the case.

In the event that the department is unable to obtain the required number external evaluations, it must document its efforts, noting the individuals who were contacted, how they were contacted, and the dates and number of times they were contacted. The department is to 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 will not stop a mandatory review from proceeding, but will halt a non-mandatory review from proceeding unless the candidate, AP&T Chair, and the department chair all agree in writing that it may proceed and agree that it will not constitute a procedural error.

Since the department cannot control who agrees to write and or the usefulness of the letters received, more letters are sought than are required, and they are 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 designee, and the candidate. If the evaluators suggested by the candidate meet the criteria for credibility, a letter is requested from at least one of those persons. Faculty Rule [3335-6-04](#) requires that no more than half the external evaluation letters in the dossier be written by persons suggested by the candidate. In the event that the person(s) suggested by the candidate do not agree to write, neither the Office of Academic Affairs nor this department requires that the dossier contain letters from evaluators suggested by the candidate.

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

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

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

## **VII Appeals**

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

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

## **VIII Seventh (Twelfth)-Year Reviews**

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

## **IX Procedures for Student and Peer Evaluation of Teaching**

### **A Student Evaluation of Teaching**

Use of standardized learner group teaching evaluations in the department is required.

### **B Peer Evaluation of Teaching**

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

Since much of Peer evaluation opportunities for faculty in the department occur outside of OSU each faculty member is responsible for identifying Peer evaluators either while teaching within the university or at national conferences or national grand rounds.

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

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. During the annual review, the department chair will discuss the plan for peer evaluation for the upcoming year and discuss past evaluations with the candidate and suggest improvement strategies if needed.

## X Appendices

### A. 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**.

#### **APT – Appointments, Promotion and Tenure**

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

**Appointments, Promotion and Tenure Document** – a document required of every TIU and College 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)

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

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

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

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

**Faculty** – the College of Medicine has four faculty types: Tenure Track, Clinical faculty, Research faculty, and the 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.

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

**Mandatory review** – a required 4<sup>th</sup> year, 8<sup>th</sup> 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 TIU and for joint appointments.)

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

**Non-mandatory review** – voluntary promotion or tenure review **OAA** – **Office of Academic Affairs**

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



**Penultimate year** – the next to last year of a contract, used to determine required clinical and research faculty review dates  
**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) through OSU, OSUP, or NCH. (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 has to achieve tenure by the amount of the credit.

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

**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.

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

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

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

**SEI – Student Evaluation of Instruction**

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

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

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

## B. AAUP Statement on Professional Ethics

1. Professors, guided by a deep conviction of the worth and dignity of the advancement of knowledge, recognize the special responsibilities placed upon them. Their primary responsibility to their subject is to seek and to state the truth as they see it. To this end professors devote their energies to developing and improving their scholarly competence. They accept the obligation to exercise critical self-discipline and judgment in using, extending, and transmitting knowledge. They practice intellectual honesty. Although professors may follow subsidiary interests, these interests must never seriously hamper or compromise their freedom of inquiry.
2. As teachers, professors encourage the free pursuit of learning in their students. They hold before them the best scholarly and ethical standards of their discipline. Professors demonstrate respect for students as individuals and adhere to their proper roles as intellectual guides and counselors. Professors make every reasonable effort to foster honest academic conduct and to ensure that their evaluations of students reflect each student's true merit. They respect the confidential nature of the relationship between professor and student. They avoid any exploitation, harassment, or discriminatory treatment of students. They acknowledge significant academic or scholarly assistance from them. They protect their academic freedom.
3. As colleagues, professors have obligations that derive from common membership in the community of scholars. Professors do not discriminate against or harass colleagues. They respect

and defend the free inquiry of associates, even when it leads to findings and conclusions that differ from their own. Professors acknowledge academic debt and strive to be objective in their professional judgment of colleagues. Professors accept their share of faculty responsibilities for the governance of their institution.

4. As members of an academic institution, professors seek above all to be effective teachers and scholars. Although professors observe the stated regulations of the institution, provided the regulations do not contravene academic freedom, they maintain their right to criticize and seek revision. Professors give due regard to their paramount responsibilities within their institution in determining the amount and character of work done outside it. When considering the interruption or termination of their service, professors recognize the effect of their decision upon the program of the institution and give due notice of their intentions.
5. As members of their community, professors have the rights and obligations of other citizens. Professors measure the urgency of these obligations in the light of their responsibilities to their subject, to their students, to their profession, and to their institution. When they speak or act as private persons, they avoid creating the impression of speaking or acting for their college or university. As citizens engaged in a profession that depends upon freedom for its health and integrity, professors have a particular obligation to promote conditions of free inquiry and to further public understanding of academic freedom.

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