

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

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PREAMBLE

This document is a supplement to Chapters 6 and 7 of the [Rules of the University Faculty](#), the Office of Academic Affairs procedural guidelines for promotion and tenure reviews in Volume 3 of the [Policies and Procedures Handbook](#), and any additional policies established by the College and The Ohio State University (OSU). Should the College's and University's rules and policies change, the department will follow the new rules and policies until this document is appropriately updated.

This document describes, in qualitative terms, the Department's criteria for appointments, promotion, and tenure, and evidence to be provided to support a case within the context of the Department's mission, as well as the mission and standards of the College of Medicine as set forth in Section V of this document. The document indicates with specificity how the quality and effectiveness of teaching, the quality and significance of scholarship, and the quality and effectiveness of service are to be documented and assessed. The document also describes the unit's procedures for conducting annual performance reviews of faculty and reviews for promotion and tenure. The document was drawn up or amended through broad faculty consultation with all voting members of the Department according to the principles articulated in paragraph (C)(3) of rule [3335-3-35](#) of the *Rules of the University Faculty* and was approved by the Dean of the College and the Executive Vice President and Provost.

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

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

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

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

All faculty members are to be evaluated for appointment and promotion using metrics that reflect the quality and impact of their contributions to the Department of Emergency Medicine, to the College of Medicine, to the Medical Center and OSU in the context of their assigned position descriptions. Metrics for quality and impact have been carefully determined by the Department of Emergency Medicine and defined in this Appointment, Promotion and Tenure document, and are validated, peer-reviewed and relevant to the chosen/assigned body of work

In addition, faculty members' activities may change over time, and thus may be consistent with different patterns of performance throughout the course of their careers. All of these different patterns of faculty activity will still lead to consideration for, and granting of, promotion and/or tenure, provided that the College's standard of excellence in all areas (including demonstration of national or international impact and recognition) as appropriate to the faculty level and duties, is met.

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

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

This Department of Emergency Medicine's Appointments, Promotion and Tenure document must be reviewed, and either reaffirmed or revised, upon the appointment or reappointment of the Chair of the Department. The University Executive Vice President and Provost must approve this document to indicate acceptance of the mission of the Department of Emergency Medicine, and the standards and criteria described herein. In doing so, the responsibility of applying high standards in evaluating existing faculty and candidates for faculty appointment is delegated to the Department of Emergency Medicine, with the final recommendations on promotion or tenure assigned to the Executive Vice President and Provost as prescribed in the rules of the University Faculty.

I. MISSION

A. College of Medicine Mission

The College of Medicine is dedicated to the following activities: education of skilled professionals in the basic and clinical medical sciences and allied medical professions; discovery, evaluation and dissemination of knowledge and technology; and the provision of innovative solutions for improving health, with an emphasis on personalized health care.

B. Department of Emergency Medicine Mission

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

1. To provide innovative, efficient, safe and compassionate patient care to patients presenting to the Ohio State University Hospital Emergency Departments and After Hours clinics.
2. To be a leader in the education of medical students, residents and fellows in emergency medical care.
3. To perform cutting edge research and scholarly investigation to identify the causes, treatments, and prevention of emergency medical conditions.
4. To promote faculty development and excellence. All faculty members are expected to participate in and contribute to the teaching, service, and research goals of the department in a manner that is consistent with the nature of their faculty appointment.

Faculty members on the Tenure Track are expected to have responsibilities in all aspects of the academic mission, and are expected to have a relative emphasis of their efforts on research or other scholarly accomplishments. Clinical faculty are also expected to have responsibilities in all

aspects of the academic mission, with primary emphasis dependent on their Clinical Pathway (e.g. Clinical Excellence, Clinical Educator, or Clinical Scholar). The department strives to enhance the quality of its endeavors by fostering the development and improvement of the faculty members.

II. 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

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

2. Clinical Faculty

Initial Appointment Reviews

- Appointments (hiring or appointment change from another faculty type) of clinical assistant professors are based on search committee recommendations to the department chair rather than a vote of the eligible faculty.
- For appointment (hiring) at senior rank (clinical/teaching/practice associate professor or professor), a review is performed and a vote cast by all tenured faculty of equal or higher rank than the position requested, and all nonprobationary clinical/teaching/practice 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 clinical assistant professors, the eligible faculty consists of all tenured associate professors and professors, and all nonprobationary clinical associate professors and professors.
- For the reappointment, contract renewal, and promotion reviews of clinical associate professors, and the reappointment and contract renewal reviews of clinical professors, the eligible faculty consists of all tenured professors, and all nonprobationary clinical professors.

3. Research Faculty

Initial Appointment Reviews

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

4. Associated Faculty

Initial Appointment, Reappointment, and Contract Renewal

- For the initial appointment (hiring or appointment change from another faculty type) review of probationary associated faculty members, the eligible faculty consists of all tenure-track faculty, all clinical faculty, and all research faculty in the department.

Initial appointments at senior rank, senior rank reappointments, and contract renewals require a vote by the eligible faculty (all tenured faculty of equal or higher rank than the candidate, all nonprobationary clinical faculty of equal or higher rank than the candidate, and all nonprobationary research faculty of equal or higher rank than the candidate).

Initial appointments at senior rank require the prior approval of the college dean.

Initial appointments of non-compensated assistant professors may be made at the discretion of the chair of the department.

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 both compensated and non-compensated associated faculty with tenure-track titles, the eligible faculty shall be the same as for tenure-track faculty as described in Section II.A.1 above.

For the promotion reviews of both compensated and noncompensated associated clinical faculty, the eligible faculty shall be the same as for clinical faculty as described in Section II.A.2 above.

- The promotion of a lecturer to senior lecturer is decided by the department chair in consultation with a faculty group of all tenured professors and all nonprobationary clinical professors.

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 (i.e. dissertation advisor), or has collaborated so extensively with the candidate that an objective review of the candidate's work is not possible. Generally, faculty members who have collaborated with a candidate on at least 50% of the candidate's published work since the last promotion will be expected to withdraw from a promotion review of that candidate.

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 department within the college.

B. Promotion and Tenure Committee

The Department has a Promotion and Tenure Committee that assists the eligible tenure-track, clinical, and research faculty in managing the personnel and promotion and tenure issues. Given the highly clinical leaning of the department, the committee consists of 2-4 clinical professors and 2-4 clinical associate professors, and at least 1 tenure track faculty (when eligible tenure track faculty exists at the associate or professor level). The committee's chair and membership are appointed by the Department chair. The term of service is three years, with reappointment possible. When considering cases involving research faculty the Promotion and Tenure Committee may be augmented by a non-probationary research faculty member. When considering cases involving associated faculty the Promotion and Tenure Committee may be augmented by a non-probationary associated faculty member (not including visiting faculty).

C. Quorum

The quorum required to discuss and vote on all personnel decisions is a simple majority (greater than 50%) of the eligible faculty not on an approved leave of absence. Faculty on approved leave are not considered for quorum unless they declare, in advance and in writing, their intent to participate in all proceedings. A member of the eligible faculty on Special Assignment may be excluded from the count for the purposes of determining quorum only if the department chair has approved an off-campus assignment.

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

D. Recommendation from the Committee of the Eligible Faculty

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

Absentee ballots and proxy votes are not permitted, 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 a simple majority (greater than 50%) of the votes cast are positive.

In the case of a joint appointment, the department must seek input from a candidate’s joint-appointment TIU prior to 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 a simple majority (greater than 50%) of the votes cast are positive.

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

III. APPOINTMENTS

The Department of Emergency Medicine is committed to making only faculty appointments that enhance or have strong potential to enhance the quality of the department. Important considerations include 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.

A. Criteria

1. Tenure-track Faculty

The Tenure-track exists for those faculty members who primarily strive to achieve sustained excellence in the discovery and dissemination of new knowledge, as demonstrated by national and international recognition of their scholarship and successful competition for extramural funding such as that provided by the National Institutes of Health (NIH). Although excellence in teaching and outstanding service to Ohio State is required, these alone are not sufficient for progress on this.

Appointments to this track are made in accordance with University Rule [3335-6-02](#). Each new appointment must enhance, or have strong potential to enhance, the quality of the Department. There must be an expectation that faculty members who are appointed to the tenure-track will be assigned a workload that provides sufficient time for the faculty member to meet the expectations and requirements for tenure-track appointments. The appointment process requires the Department to provide sufficient evidence in support of a Tenure-track faculty appointment so as to ensure that the faculty candidate has clearly and convincingly met or exceeded applicable criteria in teaching, scholarship, and service. [See Section V of this document for examples].

At the time of appointment, probationary Tenure-track faculty members will be provided with all pertinent documents detailing Departmental, College of Medicine, and University promotion and tenure policies and criteria. If these documents are revised during the probationary period, probationary Tenure-track faculty members will be provided with copies of the revised documents.

In clinical departments, each appointee must obtain the appropriate Ohio licensure and other required certifications.

The university will not grant tenure unless the candidate 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). Offers to foreign nationals require prior consultation with the Office of International Affairs.

Instructor

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

An appointment at the instructor level is limited to three years. When an instructor has not completed requirements for promotion to the rank of assistant professor by the beginning of the third year of appointment, the third year is a terminal year of employment. Upon promotion to assistant professor, the faculty member may request prior service credit for time spent as an instructor. This request must be approved by the department’s eligible faculty, the department chair, the dean, and the Office of Academic Affairs. Faculty members should carefully consider whether prior service credit is appropriate since prior service credit cannot be revoked once granted. In addition, all probationary faculty members have the option to be considered for early promotion.

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

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

- In aggregate, accomplishments related to the above criteria should be sufficiently compelling that the appointee is judged to have significant potential to attain tenure and a distinguished record as a faculty member in the College of Medicine.

Assistant Professor

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

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

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

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

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

Associate Professor with Tenure

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

offers at the rank of Associate Professor with tenure require prior approval of the Office of Academic Affairs and the Dean of the College.

Associate Professor without Tenure

While appointments to the rank of Associate Professor usually includes tenure, a probationary period can be granted after petition to the Office of Academic Affairs. A Department must exercise care in making these appointments, especially if the probationary period will be less than four years. For faculty without patient clinical service responsibilities the probationary period may not exceed four years. For faculty with significant patient clinical service responsibility, the probationary period may not exceed six years. Review for tenure occurs in the final year of the probationary appointment. If tenure is not granted, an additional (terminal) year of employment is offered. Requests for such appointments require the approval of the Dean of the College of Medicine, and the Executive Vice President and Provost.

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

Professor with Tenure

Criteria for initial appointment to the rank of Professor with tenure are identical to the Department's and College of Medicine's criteria for promotion to Professor with tenure, as detailed in Section V of this document. The university will not grant tenure in the absence of permanent residency. Offers to foreign nationals require prior consultation with the Office of International Affairs. Appointment to the rank of professor will include tenure unless the candidate does not have permanent residency, in which case a probationary period of up to four years may be extended to provide the faculty member with time to establish permanent residency. During the probationary period the faculty member is considered for reappointment annually. If permanent residency is not established during the probationary period, the fourth year of appointment will be the terminal year. Appointment offers at the rank of Professor with tenure require prior approval of the Office of Academic Affairs and the Dean of the College.

2. Clinical Faculty

The Clinical faculty is equivalent in importance to the College of Medicine as the Tenure-track. The designation Clinical faculty exists for those faculty members whose principal career focus is outstanding teaching, clinical and translational research, and delivery of exemplary clinical care. Clinical faculty members will generally not have sufficient protected time to meet the robust scholarship requirements of the Tenure-track within a defined probationary period. For this reason, the nature of scholarship for the Clinical faculty differs from that in the Tenure-track and may be focused on a mixture of academic pursuits including the scholarship of practice, integration, education, as well as new knowledge discovery. Faculty members appointed to the clinical faculty may choose to distinguish themselves in teaching, innovative pedagogic program development, or patient-oriented research. 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 Clinical Educator Pathway 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.

The Clinician-Scholar pathway reflects excellence in translational science, clinical research and health services (e.g., health care policy and comparative effectiveness research) as measured by publications and grant funding, respectively.

The Clinical Excellence pathway exists for faculty members who focus on exemplary clinical care, unique areas of emphasis in patient management, or outstanding service to a Department, the College of Medicine, and OSU. Faculty members on this typically devote 80% or more of their effort to patient care or administrative service. Clinical faculty members are not eligible for tenure and may not participate in promotion and tenure matters of tenure-track faculty.

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

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

Instructor of Clinical Emergency Medicine

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

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

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

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

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

Assistant Professor of Clinical Emergency Medicine

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

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

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

- An earned doctorate or other terminal degree in the relevant field of study or possession of equivalent experience; and completion of requisite post-doctoral clinical training.
- Evidence of scholarship as demonstrated by activities such as presentation of abstracts or peer reviewed articles as primary, secondary, or corresponding author; or educational or clinical program development leadership; or involvement or leadership in quality or operations initiatives; and potential to advance through the faculty ranks.
- A mindset and track record reflecting adherence to standards of professional ethical conduct consistent with the “Statement on Professional Ethics” by the American Association of University Professors [see Appendix].

Associate Professor of Clinical Emergency Medicine

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

Professor of Clinical Emergency Medicine

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

3. Research Faculty

The Research faculty exists for faculty members who focus principally on scholarship. Notably, the standards for scholarly achievement are similar to those for individuals on the Tenure-track for each faculty rank. A Research faculty member may, but is not required to, participate in educational and

service activities. Research faculty members are expected to contribute to a Department's research mission and are expected to demonstrate excellence in scholarship as reflected by high quality peer-reviewed publications and successful competition for NIH or similar funding.

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

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

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

Research Assistant Professor

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

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

Research Associate Professor

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

Research Professor

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

4. Associated Faculty

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

Associated Faculty, as defined in the *Rules of the University Faculty 3335-5-19 (D)*, include "persons with adjunct titles, clinical practice titles, visiting titles, and lecturer titles," Persons with a tenure track faculty title on an appointment of less than 50% FTE are associated faculty. Members of the associated faculty are not eligible for tenure, may not vote at any level of governance, and may not participate in promotion and tenure matters. Associated faculty appointments are for one to three years. The below titles are used for associated faculty in the Department of Emergency Medicine.

Adjunct Assistant Professor, Adjunct Associate Professor, Adjunct Professor

Adjunct appointments are never compensated. Adjunct faculty appointments are given to individuals who volunteer considerable uncompensated academic service to the department, such as teaching a course, for which a faculty title is appropriate. Typically the adjunct faculty rank is determined by applying the criteria for appointment of clinical faculty. Adjunct faculty members are eligible for promotion (but not tenure) and the relevant criteria are those for promotion of clinical faculty. Criteria for appointment at advanced rank are the same as for promotion.

Clinical Instructor of Practice, Assistant Professor of Practice, Associate Professor of Practice, Professor of Practice

Associated faculty with patient care responsibilities will be given clinical associated appointments. Associated clinical appointments may either be compensated or not compensated. This category of Associated faculty will have a paid appointment at OSU, OSUP (Ohio State University Physicians, Inc.), or Nationwide Children's Hospital (NCH) that requires a faculty appointment (e.g. for clinical credentialing or teaching a course). They may have another paid appointment at OSU (e.g. physician), but their faculty appointment can be unpaid. This may be appropriate to use for faculty appointments that are expected to be less than three years or for faculty who are paid through OSU, OSUP, or NCH but are 100% deployed in the community. Uncompensated appointments are given to individuals who volunteer uncompensated academic service such as site directorship for students/resident trainees, collaborators in research, educational contribution to the mission of the department, for which a faculty title is appropriate.

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

Lecturer

Appointment as lecturer requires that the individual have, at a minimum, a Master's degree in a field appropriate to the subject matter to be taught. Evidence of ability to provide high-quality instruction is

desirable. Lecturers are not eligible for tenure or promotion, but may be promoted to senior lecturer if they meet the criteria for appointment at that rank. The initial appointment for a lecturer should generally not exceed one year.

Senior Lecturer

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

Tenure Track Assistant Professor, Associate Professor, Professor with FTE below 50%

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

Visiting Instructor, Assistant Professor, Associate Professor, Professor

Visiting faculty appointments may either be compensated or not compensated. Visiting faculty members on leave from a regular academic appointment at another institution are appointed at the rank held in that position. The rank at which other these individuals are appointed is determined by applying the criteria for appointment of tenure-track faculty. Visiting faculty appointments may also be used for new senior rank candidates for whom the appointment process is not complete at the time of their employment. In that case the visiting rank is determined by the criteria for the appointment to which they will be ultimately employed. Visiting faculty members are not eligible for tenure or promotion. They may not be reappointed for more than three consecutive years.

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

- Associated clinical faculty with clinical responsibilities must be a licensed physician or health care provider.
- Have significant and meaningful interaction in at least one of the following mission areas of the College of Medicine:
 - a. Teaching of medical students, residents, or fellows: For community physicians providing outpatient teaching of medical students, meaningful interaction consists of supervising medical students for at least one month out of the year.
 - b. Research: These faculty members may collaborate with a Department or Division in the College in research projects or other scholarly activities.
 - c. Administrative roles within the College: This includes participation in committees or other leadership activities (e.g., membership in the Medical Student Admissions Committee).

Associated Faculty at Advanced Rank

Associated Faculty members are appointed for terms of one to three years. As such, associated faculty are not eligible for traditional promotion, but they are eligible to be reappointed at the next rank.

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

Uncompensated faculty are essential to the mission and outreach of the department, but must evidence excellence in content or pedagogic expertise, dissemination of this expertise with acknowledgement of their association with the department, and collaboration and participation with the academic mission of the department.

All new appointments at advanced rank require a review and vote of the eligible faculty (see Section II.A.4 above), an evaluation by the department chair, and an evaluation letter from a person that can attest to the faculty member's primary contribution in clinical care, teaching or scholarship.

i. Associate Professor

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

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

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

ii. Professor

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

Teaching and Mentoring: For faculty members whose principal focus is teaching and mentoring, faculty appointed or reappointed to the rank of Professor will not only have the accomplishments of an Associate Professor but will also attain broader recognition for contributions through curriculum development and recognition of excellence in education. This may come in the form of regional and national teaching awards, membership and leadership in national organizations and meetings dedicated to medical

education, adoption of teaching innovations and curricula introduced by the faculty member to institutions outside the College of Medicine, and invitations to speak at outside institutions. Although publications are not an expectation, publications or web sites conveying the faculty member's innovations will serve as an indication for dissemination of innovation outside the College.

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

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

5. Emeritus Faculty

Emeritus faculty status is an honor given in recognition of sustained contributions to the university as described in Faculty Rule [3335-5-36](#). Full-time tenure track, clinical, 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 outlining academic performance and citizenship. The Committee of Eligible faculty (tenured and non-probationary clinical associate professors and professors) will review the application and make a recommendation to the Department chair. The Department chair will decide upon the request, and if appropriate submit it to the dean. If the faculty member requesting emeritus status has in the 10 years prior to the application engaged in serious dishonorable conduct in violation of law, rule, or policy and/or caused harm to the university's reputation or is retiring pending a procedure according to Faculty Rule [3335-05-04](#), emeritus status will not be considered.

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

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

6. Courtesy Appointment for Faculty

A non-salaried appointment for a tenure-track, clinical, or research faculty member from another department is considered a Courtesy appointment with a 0% FTE. An individual with an appointment in one department may request a Courtesy appointment in another department when that faculty member's scholarly and academic activity overlaps significantly with the discipline represented by the second unit. Such appointments must be made using the same title, as that offered in the primary department. Courtesy appointments are warranted only if they are accompanied by substantial involvement in the academic and scholarly work of the Department.

B. Appointment Procedures

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

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

This document describes in detail the procedures to be utilized in faculty searches for initial appointments in each of the different faculty (see Section II of this document). Any faculty appointment forwarded from the Department for approval by the College of Medicine must have been made consistent with the department's Appointments, Promotion and Tenure document, and other relevant policies, procedures, practices, and standards established by: (1) the College of Medicine, (2) the [Rules of the University Faculty](#), (3) the Office of Academic Affairs, including the Office of Academic Affairs [Policies and Procedures Handbook](#), and (4) the Office of Human Resources. A draft letter of offer to a faculty candidate must be submitted to the Vice Dean for Academic Affairs of the College of Medicine for review and approval. The draft letter of offer will be reviewed for consistency with the essential components required by the Office of Academic Affairs, and by the College. Templates for letters of offer are found online on [OneSource](#). The department must access these templates for each letter written to ensure that they use the approved version. The following sections provide general guidelines for searches in the different faculty.

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

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

The search committee:

- Appoints a Diversity Advocate who is responsible for providing leadership in assuring that vigorous efforts are made to achieve a diverse pool of qualified applicants and conduct searches that minimize bias.
- Develops a search announcement for internal posting in the University Personnel Postings through the Office of Human Resources Employment Services (hr.osu.edu) and external advertising, subject to the Department Chair's approval. 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. The university may only award tenure to faculty members who are: (1) U.S. citizens or nationals; (2) permanent residents (“green card” holders); (3) asylees or refugees; or (4) individuals otherwise described as “protected individuals” pursuant to Title 8 U.S. Code Section 1324b(a)(3)(b).
- Screens applications and letters of recommendation and presents its findings to the Department Chair.

Virtual or on-campus interviews are arranged by the search committee chair. Interviews with candidates must include opportunities for interaction with faculty groups, including the search committee; graduate students or residents, where appropriate; the Department Chair; and the Dean or designee. In addition, it is **required** that all candidates make a presentation to the faculty, students and/or residents on their scholarly activity. All candidates interviewing for a particular position must follow the same interview format and relevant accommodations for disability/impairment should be provided.

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

If the offer involves senior rank (Associate Professor or above), solicitation of external letters of evaluation are required and follow the same guidelines as for promotion reviews. The eligible faculty members (see Section II.A above) must also vote on the appointment. If the offer may involve prior service credit, the eligible faculty members vote on the appropriateness of such credit. 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.

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 initial appointments on the Clinical faculty should follow the same procedures as those utilized by the Department and the College of Medicine for Tenure-track faculty, with the exception that the candidate is not required to give a presentation during the virtual/on-campus interview. A national search is required to ensure a diverse pool of highly qualified candidates for all clinical positions. Exceptions to this policy must be requested in advance from the Dean of the College of Medicine. Search procedures must entail substantial faculty involvement and be consistent with the OAA [Policy on Faculty Recruitment and Selection](#).

3. Research Faculty

Searches for initial appointments in the Research faculty should follow the same procedures as those utilized by the Department and the College of Medicine for Tenure-track faculty, with the exception that the candidate **is required** to make a presentation during the virtual/on-campus interview. A national search is required to ensure a diverse pool of highly qualified candidates for all research positions. Exceptions to this policy must be requested in advance from the Dean of the College of Medicine. Search procedures must entail substantial faculty involvement and be consistent with the OAA [Policy on Faculty Recruitment and Selection](#).

4. Transfer from the Tenure-track

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

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

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

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

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

5. Associated Faculty

The appointment of all **compensated** Associated faculty should follow the same procedures as those utilized by the Department and the College of Medicine for Clinical faculty, with the exception that a national search is not required. Appointments to non-compensated positions in the Associated Faculty require no formal search process.

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

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

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

IV. Annual Performance and Merit Review

The department follows the requirements for annual reviews 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. 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; and
- Document faculty performance in the achievement of stated goals in order to determine salary increases and other resource allocations, progress toward promotion, and, in the event of poor performance, the need for remedial steps.

The annual performance and merit review of every faculty member is based on expected performance in teaching, scholarship, and 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 his or her designee must conduct an annual review of every faculty member, irrespective of rank, in accordance with University Rule [3335-6-03](#) (C), and the Office of Academic Affairs [Policies and Procedures Handbook](#). If a Chair's designee conducts the annual review, there must be a mechanism for appraising the Chair of each faculty member's performance. The only exception to this guideline is that Courtesy appointments do not require formal annual renewal, but continuation of the appointment should reflect ongoing academic involvement as described in the Office of Academic Affairs [Policies and Procedures Handbook](#), Volume 1: 2.3.1.7.

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

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

The Department will follow its formal mechanism for the review of all faculty members during the course of each academic year. The Department Chair or his or her designee will supply each faculty member with a written evaluation of his or her performance, in narrative format. Faculty evaluation with respect to 1) clinical performance including personal metrics, compliance with process improvement, documentation standards 2) teaching, including student and resident verbatims and numerical scoring 3) service including that to the department, medical center, college of medicine, university, community and nationally 4) academic productivity including publications and presentations will be included. Clinical metrics and teaching scores (see Section VIII) are to be provided to the faculty member at regular intervals by administrative and education staff. Service and academic productivity are self-reported to the Chair.

For their annual performance and merit review, faculty members must submit the following documents to the Department chair no later than end of academic year:

A. Documentation

- Office of Academic Affairs dossier outline, [Policies and Procedures Handbook](#), Volume 3 (*required for probationary faculty*) or updated documentation of performance and accomplishments (*non-probationary faculty*)
- updated CV, which will be made available to all faculty in an accessible place (*all faculty*)
- Annual Evaluation Form, which will be made available to all faculty in an accessible place (*all faculty*)

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 V of this document.

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

B. Probationary Tenure-track Faculty

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

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

Each faculty member in the fourth year of probationary service must undergo a review utilizing the same process as the review for tenure and promotion, with two exceptions: external letters of evaluation will not be solicited, and the dean makes the final decision regarding renewal or nonrenewal of the probationary appointment. The objective of this review will be to determine if adequate progress towards the achievement of promotion and tenure is being made by the candidate.

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

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

2. Eighth Year Review

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

3. Exclusion of Time from Probationary Period

University guidelines for Exclusion of Time from Probationary Period are specified in University Rule [3335-6-03\(D\)](#). Additional procedures and guidelines can be found in the Office of Academic Affairs [Policies and Procedures Handbook](#).

C. Tenured Faculty

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

Professors are reviewed annually by the Department Chair or his or her designee, who meets with the faculty member to discuss his or her performance and future plans and goals. The annual review of professors is based on their having achieved sustained excellence in the discovery and dissemination of new knowledge relevant to the mission of the 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 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 his or her designee prepares a written evaluation of performance against these expectations. The faculty member may provide written comments on the review.

D. Clinical Faculty

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 the solicitation of an updated CV and a vote by the committee of eligible faculty. External letters of evaluation are not solicited.

The Department may determine the process for reappointment according to the procedures set forth in the [Faculty Annual Review and Reappointment Policy, III, A-G](#). There is no presumption of renewal of appointment.

E. Research Faculty

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

In the penultimate year of a research faculty member's appointment, a formal performance review is necessary to determine whether the faculty member will be offered reappointment. There is no presumption of renewal of contract. If the position will not continue, the faculty member is informed that the final contract year will be a terminal year of employment. The standards of notice set forth in Faculty Rule [3335-6-08](#) must be observed.

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

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 recommendation on renewal of the appointment is final. If the recommendation is to renew, the department chair may extend a multiple year appointment.

Compensated associated faculty members on a multiple year appointment are reviewed annually by the department chair, or designee. The department chair, or designee, prepares a written evaluation and meets with the faculty member to discuss his or her performance, future plans, and goals. In the final year of the appointment, the chair will decide whether or not to reappoint. The department chair's recommendation 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 IV.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.

V. Promotion and Tenure, and Promotion Reviews

a. Criteria and Documentation

Outlined below are the Department of Emergency Medicine's formal criteria for academic advancement and awarding of tenure. The College of Medicine expects that when a Department forwards the dossier of a candidate for review and has recommended promotion and/or granting of tenure, every diligent effort has been made to ensure the qualifications of the candidate meet or exceed applicable criteria.

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

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

Annually, the OSU Office of Academic Affairs establishes specific guidelines, procedures, and schedules for the review of candidates for promotion and tenure. The Dean of the College of Medicine also establishes and communicates the latest date for the receipt of dossiers for annual consideration by the College. Upon receipt of a candidate's dossier, the Dean of the College of Medicine will submit the dossier to the College's Appointments, Promotion and Tenure Advisory Committee for formal review. The committee will review the dossier, consistent with responsibilities described in Section V.B.2 of this document, and convey to the Dean in writing a recommended action to be taken. The Dean will consider the recommendations of the committee and will convey, in writing, a recommended action to the Executive Vice President and Provost.

1. Promotion to Associate Professor with Tenure

Faculty Rule [3335-6-02](#) and the College of Medicine [Appointments, Promotion and Tenure document](#) provide the following general criteria for promotion to associate professor with tenure:

The awarding of tenure is an acknowledgment of excellence and future potential for preeminence. It requires evidence of consistent achievement throughout the professional life of the faculty member. Promotion to the rank of associate professor with tenure occurs when a faculty member exhibits convincing evidence of excellence in the discovery and dissemination of new knowledge, as demonstrated

by a national level of 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.

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

National Reputation: Achievement of a national recognition and impact is a prerequisite for promotion to Associate Professor and awarding of tenure.

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

For promotion to Associate Professor with Tenure in Emergency Medicine, candidates should ideally have 15 or more peer-reviewed publications in journals with a mean impact factor of at least 1.5 or have an H index of 11 or greater. Although the total body of scholarship over the course of a career is considered in promotion and tenure decisions, the highest priority is placed on scholarly achievements while a faculty member at The Ohio State University. It should be appreciated that evidence of scholarship below the specified range does not preclude a positive promotion decision and that scholarship exceeding the specified range is not a guarantee of a positive tenure or promotion decision, especially if it occurs in isolation or in the context of poor performance in other areas.

For clinicians seeking tenure, accommodation should be made for the time devoted to clinical practice as reflected in percent effort or average RVUs/FTE. For example, a 25 to 50% clinical commitment might reduce the required number of publications and H index by 25%. Publication in specialized clinical journals would reduce the impact factor requirement.

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

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

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

Beyond basic and translational laboratory investigation, development of innovative programs in clinical science, public health and community research, comparative effectiveness research, implementation science, and diffusion research are acceptable fields of inquiry in these appointments. The department and the College of Medicine value translation research that address health equities and diversity within the pursuit of medical knowledge.

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

materials transfer activities should be considered evidence of national (or international) recognition and impact. These entrepreneurial activities will be recognized as scholarly or service activities in the promotion and tenure dossier.

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. Teaching awards and other honors are also highly supportive of teaching excellence, but are not required. Teaching effectiveness may also be documented by documented impact on teaching and training programs, including curricular innovation, new teaching modalities or methods of evaluating teaching, and program or course development, although these are not required. Development of impactful, innovative programs that integrate teaching, research and patient care are valued. Programs that improve the cultural competence of or access to teaching for underserved populations are particularly valued.

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

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

2. Associate Professor in Advance of Tenure

Promotion to associate professor in advance of tenure is available to faculty members with significant clinical responsibilities who have 11-year probationary periods. The criteria for promotion 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. This option may be utilized by 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, the Promotion and Tenure Committee or administrators (Chair or Dean) may determine that a faculty member's accomplishments do not merit tenure and may recommend promotion in advance of tenure even if a faculty member has requested promotion with tenure. Promotion in advance of tenure may only occur if a candidate is not in the mandatory review year. If a clinician candidate is promoted in advance of tenure, the tenure review must occur within six years, and no later than the mandatory review year, whichever comes first.

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. Candidates for promotion to associate professor in advance of tenure should ideally have 10 or more peer-reviewed publications since their appointment as an assistant professor. These publications should have an average impact factor of 1.5 or greater or an H-index of 9 or above. In general, the approach to assessment of scholarship will be consistent with that described for promotion to associate professor with tenure substituting the thresholds described in this section.

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 as well as other categories described under the Service section.

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

Teaching and Mentoring: A record of effective teaching and mentoring is required for promotion in advance of tenure. This may be demonstrated by positive evaluations by students, residents, fellows, local colleagues and/or national peers. Teaching awards and other honors are also highly supportive of teaching excellence, but are not required. Teaching effectiveness may also be documented by documented impact on teaching and training programs, including curricular innovation, new teaching modalities or methods of evaluating teaching, and program or course development, although these are not required. Development of impactful, innovative programs that integrate teaching, research and patient care are valued. Programs that improve the cultural competence of or access to teaching for underserved populations are particularly valued.

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

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

Similarly, innovative programs that advance the mission of the university 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 TIU, 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.

3. Promotion to Professor

Awarding promotion to the rank of professor with tenure must be based upon convincing, unequivocal evidence that the candidate has a sustained eminence in their field with a record of achievement recognized by national leadership and/or international recognition and impact. The general criteria for promotion in scholarship, teaching and service require more advanced and sustained quantity, quality and impact than that required for promotion to associate professor. Importantly, the standard for external reputation is substantially more rigorous than for promotion to Associate professor with tenure. This record of excellence must be evident from activities undertaken and accomplishments achieved since being appointed or promoted to the rank of associate professor. It is expected that the faculty member will have a consistent record of high-quality publications and funding with demonstrated impact well beyond that required for promotion to associate professor.

Examples of evidence of national leadership or an international reputation include but are not limited to election or appointment to a leaderships position in a national or international societies, service as a national committee or task force leadership role, regular membership on an NIH study section, peer recognition or awards for research, editorial boards or editorships of scientific journals, and invited lectures at hospitals or universities or at meetings of national or international societies.

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. Scholarship is broadly defined as for Associate professor. Candidates for promotion to professor should ideally have 50 or more papers with a mean impact factor of 1.5 or greater and/or an H- index of 15 or more. Ideally there should be 25 or more peer-reviewed journal papers since promotion to associate professor. It is expected that the pattern of scholarship will include a substantial proportion of publications as senior or corresponding author. While individual circumstances may vary, both the quantity and quality of publications should be considered. Metrics that are useful in assessing a candidate's record of scholarship include but are not limited to the total number of publications since their appointment as an associate professor, the number of citations of their publications, the trajectory of the publication and/or citation record, and the relative proportion of first/senior authorships. The impact factor of a journal may or may not reflect the quality of the scholarship. For example, in some areas of research the best journal in that area may have a relatively low impact factor but may be highly cited. Conversely, publication in journals with very high impact factors is a reflection of broader interest but does not in and of itself demonstrate the impact of research. Impact may be demonstrated through non-traditional metrics. This can include but is not limited to social media penetration, blog subscription, Altmetrics score, non-academic invited presentations, collaborations that advance the mission of the university or the field, and interviews by reputable national media outlets on scholarly topics. However, this does not in and of itself demonstrate the impact of research. A sustained record of scholarly productivity, reflected by both quality and quantity, as an associate professor is required for promotion to the rank of professor.

It should be appreciated that evidence of scholarship below the specified range does not preclude a positive promotion decision and that scholarship exceeding the specified range is not a guarantee of a positive tenure or promotion decision, especially if it occurs in isolation or in the context of poor performance in other areas. AS with promotion to associate professor, participation in collaborative, multidisciplinary research and team science is highly valued.

For clinicians seeking promotion to professor with tenure, accommodation should be made for the time devoted to clinical practice as reflected in percent effort or average RVUs/FTE. For example, a 25 to 50% clinical commitment might reduce the required number of publications and H index by 25%. Publication

in specialized clinical journals would reduce the impact factor requirement. Faculty on the tenure track with clinical responsibilities have 11 (eleven) years to achieve tenure.

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

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 NIH funded R01, P01, U54 or equivalent grant (e.g. but not limited to NSF, DoD, USDA, AHRQ, DARPA, RWJF, Commonwealth Fund, or Kaiser Family Foundation) with a history of at least one competitive renewal and another nationally competitive grant, or be PI/MPI on a total of two NIH R01 level awards. Other competitive grants may include support from prominent national charitable foundations (e.g., American Heart Association, American Lung Association, American Diabetes Association, American Cancer Society, the Lupus Foundation, the March of Dimes, etc.), a major industry grant, or other federal entities such as the Centers for Disease Control and Prevention, Department of Defense and the National Science Foundation. In some circumstances, (e.g. specific techniques) faculty member's expertise may not justify PI level status. In such cases serving as a co-investigator on multiple NIH grants will satisfy the requirement for extramural funding.

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

Beyond basic and translational laboratory investigation, development of innovative programs in clinical science, public health and community research, comparative effectiveness research, implementation

science, and diffusion research are acceptable fields of inquiry in these appointments. The department and the College of Medicine value translation research that address health equities and diversity within the pursuit of medical knowledge.

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

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. Active participation as a mentor in training grants such as NIH T32 or K- awards is highly valued as a teaching and mentoring activity demonstrating effectiveness. Teaching awards or consistently positive teaching evaluations or positive lecture evaluations from national audiences or T32 or K-award mentorship are all evidence of teaching effectiveness. Other avenues to demonstrate effectiveness include course or workshop leadership and design, a training program directorship, teaching awards, and organization of national programs, although these are not required Programs that improve the cultural competence of or access to teaching for underserved populations are particularly valued. 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.

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

4. Promotion of Clinical Faculty

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

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

The department places value on contributions to teaching, research, patient care, administration, and behavior that fosters excellence, integrity, respect, compassion, accountability, and a commitment to altruism in all our work interactions and responsibilities. In addition, consistent with the University's expressed commitment to excellence, equity, diversity, and inclusion, contributions in teaching, scholarship, and service that address areas of diversity and health disparities and inequities of marginalized communities will be considered among the professional and scholarly qualifications for appointments and promotion.

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

The awarding of promotion to the rank of Associate Professor in the Clinical pathway must be based upon convincing evidence that that the candidate has developed a regional or national level of impact and recognition since being appointed to the rank of Assistant Professor and has a trajectory of continued contributions.

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

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

a. Associate Professor, Clinician Educator Pathway

The awarding of promotion to the rank of Associate Professor in 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 and is demonstrating a continued trajectory for success. Evidence of national recognition and impact should be related to the primary focus of this pathway (clinical or didactic education), but may also reflect an outstanding clinician who has a demonstrated a sustained record of educating colleagues and peers, such as through invitations to serve as faculty on national medical education programs. This advancement may reflect expertise as an educator of trainees at any level. The individual also must have a scholarly focus. For faculty in this pathway, the scholarly focus is usually the scholarship of teaching and the scholarship of integration but can include original investigation and content expertise. Dissemination of scholarly work can include presentations at regional and national forums, and digital or traditional publications. These pathways include but are not limited to curriculum innovation and development, leadership (including service leadership), dissemination of content expertise, lectureships, teaching, academically productive mentorship, scholarship, or social media dissemination in high-impact and recognized outlets.

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

Teaching and Mentoring: A strong and consistent record of effective teaching and mentoring is required for promotion. Effectiveness is demonstrated by consistently positive evaluations by students, residents, fellows, local colleagues or national peers. Peer evaluation is required on a recurring basis for all faculty members. Evaluations may include but are not limited to bedside teaching, classroom teaching, procedural teaching, small group sessions and lectures. Teaching awards and other honors are considered evidence as recognition of teaching effectiveness but are not required. Nominations for teaching awards, which are adjudicated by a group of peers may be viewed as recognition of teaching accomplishment. Candidates may also demonstrate educational excellence by favorable impact on teaching and training programs, including curriculum innovation, curriculum design and implementation, innovative teaching practices, modules and publications, new teaching modalities or new methods of evaluating teaching, and program or course development. In all cases, evidence of improved educational process or outcomes (i.e. impact) is required. Clinician Educators may demonstrate national impact through invitations to serve as faculty on national continuing medical education programs or other national activities.

Development of impactful, innovative programs that integrate teaching, research and patient care are particularly valued, as are those aimed to improve cultural competence of or access to teaching for underserved populations.

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

Service: Service is broadly defined to include administrative service to the University, exemplary patient care program development relating to clinical, administrative, leadership, professional service to the faculty member's discipline, peer reviews of manuscripts and grant applications, serve on editorial boards, service to the community as it pertains to Emergency Medicine, leadership positions in professional societies, and the provision of professional expertise to public and private entities beyond the University. Evidence of service can include membership on department, College, Medical Center, or University committees. Development of service lines which create and sustain programs which deliver healthcare to the community and reduce disparities of education and/or care to under-represented (i.e. race, gender, ethnicity) groups is valued.

Scholarship: The candidate should demonstrate contributions to scholarship as reflected by a number of peer- or editor reviewed (or similarly refereed) publications with national impact. Typically, the minimum number should be 10 (ten) or greater since appointment as an assistant professor. Publications in journals with a high Impact Factor may alter the number needed. Quality metrics of all publications must be reported and considered by the committee. This information should be provided to help the committee understand comparative impact and distribution numbers for digital resources. These may include traditional manuscripts, digital resources such as web-based or video-teaching modules, book chapters, invited submissions and scholarly review articles, innovative teaching techniques or content development. Primary or senior author positions should be demonstrated in at least three of the ten or greater works. As

reflected in the College of Medicine APT document, meaningful scholarship may not be uniformly represented by first or senior authorship positions given current trends of team and collaborative scholarship. However, dossiers with the exception to a reasonable percentage of key author positions on papers should be adequately explained and delineation of authorship clearly explained. Although pedagogic publications are highly valued, they are not required for promotion in the clinical educator pathway. Content expertise suffices as subject matter for academic publications. Serving as the local lead of at least one nationally funded or multi-institutional educational project is encouraged but not required. It should be noted that collaboration is valued by the department regardless of authorship order, with increasing value attributed from departmental to institutional to multi-institutional projects. The dossier is viewed holistically by evaluating committees and the preceding guidelines do not represent an inflexible requirement for promotion.

b. Professor, Clinician Educator Pathway

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

Teaching and Mentoring: A sustained record of excellence in teaching is required for promotion. Excellence is demonstrated by consistently positive evaluations by students, residents, fellows, local colleagues or national peers. Evaluations may include but are not limited to bedside teaching, classroom teaching, procedural teaching, small group sessions and lectures.

Teaching awards and other honors are considered evidence as recognition of teaching excellence, but are not required. Nominations for teaching awards which are adjudicated by a group of peers may be viewed as recognition of teaching accomplishment. Candidates must demonstrate the impact of their teaching and mentoring on teaching and training programs, including curriculum innovation, curriculum design and implementation, innovative teaching practices, modules and publications, new teaching modalities or new methods of evaluating teaching, and program or course development. Candidates must demonstrate evidence of mentorship or other career development activities for other faculty members. This may take place internal or external to the TIU. Development of multiple impactful, innovative programs that integrate teaching, research and patient care are valued. National education leadership may also be demonstrated through leadership roles in highly selective positions focused on education. Examples include but are not limited to election to specialty boards such as the Review Committees of the Accreditation Council for Graduate Medical Education, American Board of Emergency Medicine, United States Medical Licensing Examination, Association of American Medical Colleges or similar selective nationally recognized service. An example of leadership of academic specialty organizations include elected positions in Council of Residency Directors and others which may be content and not educational based but which have similar competitiveness and national prominence.

Mentorship and sponsorship of faculty, in addition to residents or students, is expected for advancement to professor. Evidence of mentorship may include active participation in a formal mentorship program or development of long-term relationships which provides guidance, motivation, emotional support, and/or

role-modeling for the purpose of personal or professional development. Activities that demonstrate sponsorship include providing junior faculty with educational opportunities such as speaking engagements or publications.

This mentorship should be above and beyond the typical advising or coaching done as standard departmental citizenship. Outcomes of mentorship/sponsorship should be concrete and demonstrated throughout the dossier.

Service: Service is broadly defined to include administrative service to the University; program development relating to clinical, administrative, or research areas; leadership; professional service to the faculty member's discipline; and the provision of professional expertise to public and private entities beyond the University. Evidence of service can include appointment or election to College, hospital, and/or University committees or mentoring activities. Evidence of professional service to the faculty member's discipline should include journal editorships, offices held, and/or other service to national professional societies. Development of service lines which create and sustain programs which deliver healthcare to the community and reduce disparities of education and/or care to under-represented (i.e. race, gender, ethnicity) groups is valued.

Scholarship: The candidate should demonstrate contributions to scholarship as reflected by a number of peer- or editor reviewed (or similarly refereed) publications with national impact.

Typically, the minimum number should be 15 (fifteen) or greater since appointment as an associate professor. Publications in journals with a high Impact Factor may alter the number needed. These may include traditional manuscripts, digital resources such as web-based or video- teaching modules, book chapters, invited submissions and scholarly review articles, innovative teaching techniques, or content development. Primary or senior author positions should be demonstrated in at least six of the 15 or greater works. As reflected in the College of Medicine APT document, meaningful scholarship may not be uniformly represented by first or senior authorship positions given current trends of team and collaborative scholarship. However, dossiers with the exception to a reasonable percentage of key author positions on papers should be adequately explained and delineation of authorship clearly explained. The impact of these publications must be documented. Quality metrics of all publications must be reported and considered by the committee. This information should be provided to help the committee understand comparative impact and distribution numbers for digital resources. Although pedagogic publications are highly valued and preferred, they are not required for promotion in the clinical educator pathway. Content expertise suffices as subject matter for academic publications. Serving as the lead of at least one nationally funded or multi-institutional educational project is encouraged. It should be noted that collaboration is valued by the department regardless of authorship order, with increasing value attributed from departmental to institutional to multi-institutional projects. The dossier is viewed holistically by evaluating committees and the preceding guidelines do not represent an inflexible requirement for promotion.

c. Associate Professor, Clinician Scholar Pathway

The awarding of promotion to the rank of Associate Professor in the Clinical faculty– Clinician- Scholar pathway must be based upon convincing evidence that that the candidate has developed a national level of impact and recognition as a clinician scholar since being appointed to the rank of Assistant Professor and is demonstrating a continued trajectory for success. 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. Peer evaluation is required on a recurring basis for all faculty members. Excellence is

demonstrated by consistently positive evaluations by students, residents, fellows, local colleagues and national peers. Teaching evaluations may be based on presentations internally or at other academic institutions, bedside teaching scores, presentations or tutorials at scientific conferences or meetings, presentations at other medical centers or hospitals. Formal teaching is not required for clinician scholars but is of value to the Department and the University. Teaching effectiveness must be demonstrated through evaluations and peer feedback based on presentations at other academic institutions, presentations or tutorials at scientific conferences or meetings, presentations at other medical centers or hospitals, and the like. Teaching awards and other honors are also supportive of teaching excellence but are not required.

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

Scholarship: The candidate must demonstrate contributions to scholarship as reflected by primary, senior, or corresponding authorship of peer-reviewed journal publications, scholarly review articles and case reports, and participation in basic, translational or clinical research projects or in clinical trials. A general guideline of >10 peer-reviewed publications should be attained for promotion to associate. The impact of these publications can influence the total number produced. For example, 10 peer review publications in journals with an average impact factor of 1.5 or 8 publications in journals with an average impact factor of 2 would satisfy this threshold. The recognition of the publication by peers can be adjudged by calculation of the H- index. Here 5 publications cited at least 5 times would be a reasonable target.

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

Participation in collaborative, multidisciplinary research and team science is highly valued even though it may result in “middle” authorship, if the faculty member’s unique contribution can be discerned. Primary or senior authorship is valued and a significant proportion of publications should demonstrate this author position. Faculty on this pathway should have acquired external funding in support of their program of scholarship. Candidates should have a track record of being investigators in foundation, industry or NIH or other federal studies. Entrepreneurship and inventorship are also evidence of scholarly activity, as described in Section V [Criteria for promotion to Associate Professor with tenure] above and will be viewed most favorably.

Service: Service is broadly defined to include administrative service to the University, exemplary patient care, program development relating to clinical, administrative, leadership and related activities, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University. Examples of evidence of service include but are not limited to membership on department, COM, hospital, and/or University committees and mentoring activities, service on editorial boards, and leadership positions in professional societies.

d. Professor, Clinician Scholar Pathway

The awarding of promotion to the rank of Professor on the Clinician-Scholar pathway must be based upon convincing evidence that that the candidate has developed national leadership as a clinician scholar since being appointed to the rank of Associate Professor and is demonstrating a continued trajectory of success. 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. 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).

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.

Service: Promotion to the rank of Professor requires service to the College of Medicine, OSU, and in a national context. The faculty member should have made new and impactful service contributions as an Associate Professor. Candidates may have led the development of new and innovative clinical or clinical research programs which received national recognition.

Professional service could include, but is not limited to, peer reviews of manuscripts and grant applications, serve on editorial boards, 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.

Scholarship: The candidate must demonstrate contributions to scholarship as reflected by primary or senior authorship of peer-reviewed journal publications, scholarly review articles and case reports, and participation in basic, translational or clinical research projects or in clinical trials. A general guideline of >15 publications (since promotion to the associate professor- clinical level, or 30 total publications) should be attained for promotion to associate. The impact of these publications can influence the total number produced. For example, 20 peer review publications in journals with an average impact factor of 1.5 or 15 publications in journals with an average impact factor of 3 would satisfy this threshold. The recognition of the publication by peers can alternatively be adjudged by calculation of the H-index. Here 12 publications cited at least 12 times each would be a reasonable target. Faculty being considered for promotion to Professor on this pathway should have acquired external funding in support of their program of scholarship. Candidates should have a track record of being investigators in foundation, industry or NIH studies. PI, or multiple-PD/PI on a major national peer reviewed grant or co- investigator status on clinical trials or other national grants; or patents; or national reputation for clinical innovation is desirable. Entrepreneurship and inventorship are also evidence of scholarly activity, and will be viewed favorably.

e. Associate Professor, Clinical Excellence Pathway

In the circumstance where individuals are assigned major responsibilities (80% time or greater) for clinical care, clinical administrative activities, and other activities related to their defined area of clinical expertise, faculty members may seek promotion on the clinical excellence pathway.

Major responsibility is defined as 80% time dedicated to the clinical mission. Exceptions to the 80% may be granted by the chair in isolated circumstances. The clinical time commitment of these individuals may not allow the achievement of personal recognition for their accomplishments; however, their unique contributions serve to enhance the recognition of the Medical Center, the Department of Emergency Medicine, or their assigned hospital. These faculty are recognized for the scholarship of clinical practice

or novel contributions to the advancement of the practice in their field. For these individuals, their contribution to the regional and national recognition of the Medical Center or University may serve as a proxy for individual regional or national recognition. Personal National recognition is not required for Promotion.

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

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

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

Examples of evidence that may support promotion include:

- i. Establishment or enhancement of quality improvement program(s) or system-based changes that result in the enhancement of care provided to Medical Center patients. Examples may include but are not limited to major ED physical design changes or the addition and development of new clinical care delivery models that enhance and impact the system-wide care of our patients.
- ii. A sustained track record of exemplary clinical leadership and unique program development within the institution. This may include clinical or administrative work to support specific programs and missions of the Medical Center such as prehospital, critical care, trauma, stroke, STEMI, sepsis, pediatrics, geriatrics, oncology emergency patients, or other programs. This should be supported by written documentation of the individual's contribution. It is essential that multiple letters of evaluation from sources external to the department, including referring/collaborating interdisciplinary colleagues, physicians, or other Medical Center personnel be included as evidence of external validation of the program.
- iii. Demonstration or dissemination of data and expertise. This could include, but is not limited to Grand Rounds, clinical practice guidelines, seminars, podcasts, websites, small group activities, and internal benchmarking.
- iv. Demonstration of sustained collaboration with researchers and educators in the department and beyond that result directly or indirectly in excellent patient care.
- v. Evidence of a high-level of clinical quality. It is expected that multiple lines of evidence supporting excellence in clinical performance, include clinical measures such as quality indicators, mortality metrics, complication rates, and patient satisfaction rates where such measures can readily be internally and externally benchmarked for excellence be documented. These should include demonstration as a 95% compliance with specialty specific process measures such as appropriate departmental and medical center quality metrics. Additionally,

clinical productivity (quantity) within the top quartile based on departmental or national metrics is valued. Superior performance in clinical quality alone is not sufficient for promotion.

The awarding of promotion to the rank of Associate Professor on the Clinical Excellence Pathway must be based upon convincing evidence that the candidate has demonstrated a level of excellence, and a record of impact beyond the usual physician's scope or sphere of influence. This level of excellence should be supported by letters of attestation to the faculty's work product/effort/excellence by those outside of the TIU who can speak to the clinician's impact. These may include faculty in other departments, nursing leadership, community outreach, financial directors and others. Promotion will not be granted purely on the bases of length of service to the institution or satisfactory job performance.

f. Professor, Clinical Excellence Pathway

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

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

The awarding of promotion to the rank of Professor on the Clinical Excellence Pathway should demonstrate that the candidate has meaningfully contributed to the national reputation of the medical center or individually achieved a sustained national reputation as an excellent clinician. These contributions will have a sustained positive impact on patient care and require more advanced and sustained quantity, quality and impact than that required for promotion to Associate Professor. This level of excellence should be supported by letters of attestation to the faculty's work product/effort/excellence, either through their individual patient care or as it pertains to the reputation of the medical center, by those outside of the Department who can speak to the clinician's impact. These may include faculty in other departments, nursing leadership, community outreach, financial directors and others. Promotion will not be granted purely on the bases of length of service to the institution or satisfactory job performance.

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

Additional metrics of national recognition include invited national lectures regarding innovation, program development and clinical excellence, recruitment/invitation on national committees focused on clinical care, and leadership at a national level.

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

Mentoring of junior faculty/trainees is essential for the promotion to Professor on any pathway, including Clinical Excellence. Given the unique nature of the Clinical Excellence pathway mentoring should be interpreted broadly including but not limited to career advising, faculty development assistance, clinical

improvement assistance, advising junior faculty on mechanics of fulfilling their positions, or leadership recruitment/training to ensure sustained success of innovative or novel clinical improvement programs.

5. Promotion of Research Faculty

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

a. Research Associate Professor: Candidates for promotion to research associate professor are expected to demonstrate the beginnings of a national recognition of their expertise. 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. 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.

b. Research Professor: The awarding of promotion to the rank of research professor must be based upon convincing evidence that the candidate has established a national level of recognition and impact beyond that which was established for promotion to 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 multicenter studies, etc. Research faculty typically are not expected to establish an independent program of research.

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

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

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

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

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

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

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

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](#). The following sections, which state the responsibilities of each party to the review process, apply to all faculty in the Department.

1. Candidate Responsibilities

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

- **Dossier**

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

While the Promotion and Tenure Committee makes reasonable efforts to check the dossier for accuracy and completeness, the candidate bears full responsibility for all parts of the dossier that are to be completed by them.

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

The time period for teaching documentation to be included in the dossier for probationary faculty is the start date of employment of the faculty at OSU to present. For tenured or non-probationary faculty it is the date of last promotion or the last five years, whichever is less, to present.

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

The time period for service documentation to be included in the dossier for probationary faculty is the start date to present. For tenured or non-probationary faculty it is the date of last promotion to present.

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

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

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

As noted above, if external evaluations are required, candidates are responsible for reviewing the list of potential external evaluators developed according to departmental guidelines. The candidate may add no more than 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.

2. Promotion and Tenure Committee a Responsibilities

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

- To review this document annually and to recommend proposed revisions to the faculty.
- To consider annually, in spring semester, requests from faculty members seeking a non-mandatory review in the following academic year and to decide whether it is appropriate for such a review to take place. Only professors on the committee may consider promotion review requests to the rank of professor. A simple majority of those eligible to vote on a request must vote affirmatively for the review to proceed.
- The committee bases its decision on assessment of the record as presented in the faculty member's CV and on a determination of the availability of all required documentation for a full review (student and peer evaluations of teaching). Lack of the required documentation is necessary and sufficient grounds on which to deny a non-mandatory review.
- A tenured or non-probationary faculty member may only be denied a formal promotion review under Faculty Rule [3335-6-04](#) 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.
- Faculty members who are not 1) U.S. citizens or nationals; (2) permanent residents (“green card” holders); (3) asylees or refugees; or (4) individuals otherwise described as “protected individuals” pursuant to Title 8 U.S. Code Section 1324b(a)(3)(b) may not undergo a non-mandatory review for tenure, and tenure will not be awarded as the result of a mandatory review until the status is established. Faculty members not eligible for tenure due to lack of status as a “protected individual” under the immigration laws are moreover not considered for promotion by this department. The committee will confirm the status of an untenured faculty member seeking non-mandatory tenure review with the department chair.
- A decision by the committee to permit a review to take place in no way commits the eligible faculty, the department chair, or any other party to the review to making a positive recommendation during the review itself.
- Annually, in late spring through early autumn semester, to provide administrative support for the promotion and tenure review process as described below.
 - Late Spring: Select from among its members a Procedures Oversight Designee who will serve in this role for the following year. The Procedures Oversight Designee cannot be the same individual who chairs the committee. The Procedures Oversight Designee's responsibilities are described in the Office of Academic Affairs annual procedural guidelines.
 - Late Spring: Suggest names of external evaluators to the department chair.
 - Summer: Gather internal evidence of the quality of the candidate’s teaching, scholarship, and service from students and peers, as appropriate, within the department.

- Early autumn: Review candidates' dossiers for completeness, accuracy (including citations), and consistency with Office of Academic Affairs requirements; and work with candidates to assure that needed revisions are made in the dossier before the formal review process begins.
- Meet with each candidate for clarification as necessary and to provide the candidate an opportunity to comment on his or her dossier. This meeting is not an occasion to debate the candidate's record.
- Draft an analysis of the candidate's performance in teaching, scholarship and service to provide to the full eligible faculty with the dossier; and seek to clarify any inconsistent evidence in the case, where possible. The committee neither votes on cases nor takes a position in presenting its analysis of the record.
- Revise the draft analysis of each case following the faculty meeting, to include the faculty vote and a summary of the faculty perspectives expressed during the meeting; and forward the completed written evaluation and recommendation to the department chair.
- Provide a written response, on behalf of the eligible faculty, to any candidate comments that warrant response, for inclusion in the dossier.
- Provide a written evaluation and recommendation to the department chair in the case of joint appointees whose tenure-initiating unit is another department. The full eligible faculty does not vote on these cases since the department's recommendation must be provided to the other tenure-initiating unit substantially earlier than the committee begins meeting on this department's cases.

3. Eligible Faculty Responsibilities

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

- To review thoroughly and objectively every candidate's dossier in advance of the meeting at which the candidate's case will be discussed.
- To attend all eligible faculty meetings except when circumstances beyond one's control prevent attendance; to participate in discussion of every case; and to vote.
- The chair of the Promotion and Tenure Committee and the committee of the Eligible Faculty will be the Vice Chair of Academic Affairs or his/her designee.

4. Department Chair Responsibilities

The responsibilities of the department chair 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.) Faculty members who are not 1) U.S. citizens or nationals; (2) permanent residents ("green card" holders); (3) asylees or refugees; or (4) individuals otherwise described as "protected individuals" pursuant to Title 8 U.S. Code Section 1324b(a)(3)(b) may not undergo a non-mandatory review for tenure, and tenure will not be awarded as the result of a

mandatory review until the status is established. Faculty members not eligible for tenure due to lack of status as a “protected individual” under the immigration laws are moreover not considered for promotion by this department.

- Late Spring Semester: To solicit external evaluations from a list including names suggested by the Promotion and Tenure Committee, the chair and the candidate. (Also see External Evaluations below.)
- To solicit an evaluation from a TIU head of any department with 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.
- To 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 (TIU) chair will 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 days from receipt of the letter from the department chair, for inclusion in the dossier. The letter is accompanied by a form that the candidate returns to the department chair, indicating whether or not he or she expects to submit comments.
- To provide a written response to any candidate comments that warrants response for inclusion in the dossier.
- To forward the completed dossier to the college office by that office's deadline, except in the case of associated faculty for whom the department chair recommends against promotion. A negative recommendation by the department chair is final in such cases.
- To write an evaluation and recommendation to the department chair of a tenure initiating unit recommending promotion for a joint appointee by the date requested.

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 V.B above, with the exception that the review does not proceed to the college level if the department chair's

recommendation is negative, and does not proceed to the executive vice president and provost if the dean's recommendation is negative.

6. External Evaluations

External evaluations are obtained for all promotion and/or tenure reviews in which scholarship must be assessed. These include all tenure-track promotion and tenure or promotion reviews, all research appointment contract renewals and promotion reviews, and all **compensated** associated faculty promotion reviews. As described above, a list of potential evaluators is assembled by the Promotion and Tenure Committee, the department chair, and the candidate. If the evaluators suggested by the candidate meet the criteria for credibility, a letter is requested from at least one of those persons. Faculty Rule [3335-6-04](#) requires that no more than half the external evaluation letters in the dossier be written by persons suggested by the candidate. In the event that the person(s) suggested by the candidate do not agree to write, neither the Office of Academic Affairs nor this department requires that the dossier contain letters from evaluators suggested by the candidate.

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

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

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

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

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

VI 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.

VII. 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 head of the Department, and may not come from the faculty member himself/herself. Details of the criteria and procedures for a review in the final year of probation are described in University Rule [3335-6-05](#) (B).

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

VIII. Procedures for Student and Peer Evaluation of Teaching

A. Student Evaluation of Teaching

Medical Student Evaluations: These evaluation forms are designed by the College of Medicine to be both formative and summative, and are anonymous to the faculty member. These evaluations are electronic in nature and the results are collated and transmitted to the Emergency Department chair and the faculty member. The chair's staff medical student liaison will provide this information to the faculty member.

Resident Evaluations: These are to be both formative and summative, and are anonymous to the faculty member. These evaluations are web-based and designed by the departmental GME leadership and the results are collated by the Graduate Medical Education Staff and transmitted to the Emergency Department chair and to the faculty member.

B. Peer Evaluation of Teaching

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

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

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

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

IX. 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. (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 makes recommendations to the Department Chair or Dean regarding the viability of candidates for appointment, promotion and/or tenure.

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

Associated – faculty that are not tenure-track, clinical, or research faculty. These faculty fall into many sub-categories including compensated and noncompensated. (See also Clinical Associated Faculty, Adjunct Faculty, full-time Paid Associated)

Clinical Associated Faculty – 0% FTE community physicians that participate in the education and training of medical students and residents. (see also **Full-time Paid Associated Faculty**)

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

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

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

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

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

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

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

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

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

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

Non-mandatory review – voluntary promotion or tenure review

OAA – Office of Academic Affairs

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

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

Prior Service Credit –For probationary Tenure-track appointments, prior service credit shortens the length of time that a faculty member has to achieve tenure by the amount of the credit.

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

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

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

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

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

SEI – Student Evaluation of Instruction

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

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

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

b. AAUP Statement on Professional Ethics

1. Professors, guided by a deep conviction of the worth and dignity of the advancement of knowledge, recognize the special responsibilities placed upon them. Their primary responsibility to their subject is to seek and to state the truth as they see it. To this end

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

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