

# **APPOINTMENTS, PROMOTION AND TENURE**

## **Criteria and Procedures for the Department of Emergency Medicine**

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## I. PREAMBLE

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This document is a supplement to Chapters 6 and 7 of the *Rules of the University Faculty* located at <http://trustees.osu.edu/university/facultyrules> the Office of Academic Affairs procedural guidelines for promotion and tenure reviews (Volume 3) located at <http://oaa.osu.edu/handbook.html>, and any additional policies established by the College The Ohio State University (OSU). Should the University's rules and policies change, the College of Medicine will follow the new rules and policies until its 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 VII 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. Herein are described the characteristics and qualifications that distinguish faculty members in these different tracks, and provide guidelines for appointments and promotions consistent with these distinctions.

The 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 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 (<http://trustees.osu.edu>) 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 (<http://trustees.osu.edu>) 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.

## **II. MISSION**

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### **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 centered emergency care to patients presenting to the Ohio State University Hospitals by well-trained Emergency Medicine Physicians and medical staff.
2. To be a leader in the education of medical students and allied health professionals in the basics of emergency medical care, and, at a more advanced level, train high caliber emergency physicians.
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.

### **III. Definitions**

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

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

The eligible faculty for appointment reviews of tenure-track faculty consists of all tenure-track faculty whose tenure resides in the department. For an appointment at senior rank, a second vote is taken by the faculty members eligible to vote on the rank under consideration.

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

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

##### **2. Clinical Faculty**

The eligible faculty for appointment reviews of clinical faculty consists of all tenure-track faculty whose tenure resides in the department and all regular clinical faculty whose primary appointment is in the department. For an appointment at senior rank, a second vote is taken by the faculty members eligible to vote on the rank under consideration.

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

### **3. Research Faculty**

The eligible faculty for appointment reviews of research faculty consists of all tenure-track faculty whose tenure resides in the department, all clinical faculty whose primary appointment is in the department, and all research faculty whose primary appointment is in the department. For an appointment at senior rank, a second vote is taken by the faculty members eligible to vote on the rank under consideration.

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

### **4. Associated Faculty**

The eligible faculty for appointment reviews of associated faculty consists of all tenure-track faculty whose tenure resides in the department, all clinical faculty whose primary appointment is in the department, and all research faculty whose primary appointment is in the department.

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

### **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 Committee of the Eligible Faculty in managing the personnel and promotion and tenure issues. The

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

### **C. Quorum**

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

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.

#### **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.

#### **2. Reappointment, Promotion and Tenure, Promotion**

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

## **IV. APPOINTMENTS**

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

### **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 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 VII. 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.

#### **a. 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 without a formal request for an extension of the probationary period. In addition, all probationary faculty members have the option to be considered for early promotion.

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

- Anticipated receipt of an earned doctorate or other terminal degree in the relevant field of study or possession of equivalent experience. Individuals who have completed all the requirements of their terminal degree, but who have

not obtained the final degree at the time of initial employment will be appointed as an Instructor. In addition, appointment at the rank of Instructor is appropriate for individuals who, at the time that they join the faculty, do not have the requisite skills or experience to fully assume the full range of responsibilities of an Assistant Professor.

- Evidence of potential for excellence in scholarship. Such evidence might include peer-reviewed publications in a mentored setting, but insufficient evidence of an independent, creative, and productive program of research with potential for external funding.
- A mindset and track record reflecting adherence to standards of professional ethical conduct consistent with the “Statement on Professional Ethics” by the American Association of University Professors [see Appendix D].
- In aggregate, accomplishments related to the above criteria should be sufficiently compelling that the appointee is judged to have significant potential to attain tenure and a distinguished record as a faculty member in the College of Medicine.

#### **b. 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 (6<sup>th</sup> year of appointment for faculty without clinical responsibilities, 11<sup>th</sup> 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 11<sup>th</sup> year as to whether promotion and tenure will be granted at the beginning of the 12<sup>th</sup> year. For individuals not recommended for promotion and tenure after the mandatory review, the 12<sup>th</sup> year will be the final year of employment.

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

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

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

**c. 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 VII of this document. The university will not grant tenure in the absence of permanent residency.

**d. Associate Professor without Tenure**

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

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

**e. 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 VII of this document. The university will not

grant tenure in the absence of permanent residency. Appointment to the rank of professor will include tenure unless the candidate does not have permanent residency, in which case a probationary period of up to four years may be extended to provide the faculty member with time to establish permanent residency. During the probationary period the faculty member is considered for reappointment annually. If permanent residency is not established during the probationary period, the fourth year of appointment will be the terminal year.

## 2. Clinical Faculty

The Clinical faculty is equivalent in importance to the 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 this may choose to distinguish themselves in teaching, innovative pedagogic program development, or patient-oriented research. Faculty members appointed to this may choose to distinguish themselves through several portfolios of responsibility including Clinician-Educator, Clinician-Scholar and Clinical Excellence pathways.

The Clinician-Educator pathway reflects pedagogic excellence as measured by teaching evaluations and innovative teaching practices, modules and publications.

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

The Clinical Excellence pathway 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 90% or more of their effort to patient care or administrative service. Faculty members on the Clinical 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.

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

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

- Anticipated receipt of an earned doctorate or other terminal degree in the relevant field of study.
- Evidence of potential for contributions to scholarship as demonstrated by activities such as publications or presentation of abstracts as primary or secondary author. The individual may not as yet have demonstrated substantial evidence of independent contributions as reflected by first author publications and/or presentations.
- Post-doctoral clinical training in an appropriate area.
- A mindset and track record reflecting adherence to standards of professional ethical conduct consistent with the “Statement on Professional Ethics” by the American Association of University Professors [see Appendix D].

#### **b. 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 D].

**c. 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 VII of this document.

**d. 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 VII of this document.

### **3. Research Faculty**

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

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

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

#### **a. Assistant Professor Research**

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 D]. Strong potential for career progression and advancement through the faculty ranks.

**b. Associate Professor, Research**

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 VII of this document.

**c. Professor, Research**

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 VII of this document.

**4. Associated Faculty**

Associated faculty appointments exist for faculty members who focus on a specific and well-defined aspect of the College mission, most commonly outstanding teaching and exemplary clinical care. Associated faculty may be involved in scholarly pursuits and service to the University, but this is not required for advancement 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,” plus “professors, associate professors, assistant professors, and instructors who serve on appointments totaling less than fifty per cent service to the university.” Members of the associated faculty are not eligible for tenure, may not vote at any level of governance, and may not participate in promotion and tenure matters. Associated faculty appointments are for up to three years. The below titles are used for associated faculty in the College of Medicine.

**a. 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. Criteria for appointment at advanced rank are the same as for promotion. Adjunct faculty members are eligible for promotion (but not tenure).

**b. Clinical Instructor of Practice, Assistant Professor of Practice, Associate Professor, 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. Criteria for appointment at advanced rank are the same as for promotion. Associated clinical faculty members are eligible for promotion (but not tenure).

**c. Lecturer**

Appointment as lecturer requires that the individual have, at a minimum, a Master's degree in a field appropriate to the subject matter to be taught. 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.

**d. Senior Lecturer**

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

**e. Assistant Professor, Associate Professor, Professor with FTE below 50%**

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

**f. Visiting Instructor, 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 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).

**g. 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. Appointment or reappointment at advanced rank should evidence excellence in a specific aspect of the College mission. All new appointments at advanced rank require a review and vote of the eligible faculty, an evaluation by the department chair, and an evaluation letter from a person that can attest to the faculty member's primary contribution in clinical care, teaching or scholarship.

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

- recruitment of tenure-track, clinical 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 page 3 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 Policies and Procedures Handbook, 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 be consistent with the university policies set forth in the most recent update of *A Guide to Effective Searches*, which can be found at: <http://oaa.osu.edu/assets/files/documents/RecruitmentTips.pdf>. Searches for tenure-track faculty proceed as follows:

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

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

- Screens applications and letters of recommendation and presents its findings to the Department Chair.

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 recommended that all candidates make a presentation to the faculty, students and/or residents on their scholarly activity.

Following completion of 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), the eligible faculty members must also vote on the appointment. If the offer may involve prior service credit, the eligible faculty members vote on the appropriateness of such credit.

## **2. Clinical Faculty**

Searches for initial appointments 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 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 be consistent with the university policies set forth in *A Guide to Effective Searches*.

## **3. Research Faculty**

Searches for initial appointments in the Research 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 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 be consistent with the university policies set forth in *A Guide to Effective Searches*.

## **4. Associated Faculty**

The appointment, review, and reappointment 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 unpaid positions in the Associated Faculty require no formal search process.

Compensated associated appointments are generally made for a period of one year, unless a shorter or longer period is appropriate to the circumstances. 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 usually made on a semester by semester or annual basis. After the initial appointment, and if the department's curricular needs warrant it, a multiple year appointment may be offered.

Associated faculty for whom promotion is a possibility follow the promotion guidelines and procedures for clinical faculty, with the exception that the review does not proceed to the college level if the department chair's recommendation is negative, and does not proceed to the university level if the dean's recommendation is negative.

### **5. Courtesy Appointments for Faculty**

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

### **6. Transfer from the Tenure-track**

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

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

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

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

## **V. Annual Review Procedures**

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

The Department Chair or his or her designee must conduct an annual review of every faculty member, irrespective of rank, in accordance with University Rule [3335-6-03](#) (C), and the Office

of Academic Affairs [Policies and Procedures Handbook](#). The only exception to this guideline is that Courtesy appointments do not require formal annual renewal, but continuation of the appointment should reflect ongoing academic involvement as described in the Office of Academic Affairs Policies and Procedures [Volume 1](#): 2.4.1.6.

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

Each faculty member must maintain an up-to-date approved Office of Academic Affairs electronic dossier [RIV](#). 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. Annual reviews must include a scheduled opportunity for a face-to-face meeting with the Department Chair. If a Chair's designee conducts the annual review, there must be a mechanism for appraising the Chair of each faculty member's performance. The department chair is required (per Faculty Rule [3335-3-35](#)) to include a reminder in the annual review letter that all faculty have the right (per Faculty Rule [3335-5-04](#)) to view their primary personnel file and to provide written comment on any material therein for inclusion in the file. Each department will be responsible for implementing such a plan and describing the annual review procedure in its individual Appointments, Promotion and Tenure document.

### **A. 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 faculty member may provide written comments on the review. The department chair's letter (along with the faculty member's comments, if received) is forwarded to the dean of the college. In addition, the annual review letter becomes part of the cumulative dossier for promotion and tenure (along with the faculty member's comments, if he or she chooses).

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

#### **1. Fourth Year Review**

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

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

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

## **2. Eighth Year Review**

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

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

University guidelines for Exclusion of Time from Probationary Period are specified in University Rule [3335-6-03\(D\)](#). Additional procedures and guidelines can be found in the Office of Academic Affairs Policies and Procedures Handbook (<http://oaa.osu.edu/handbook.html>).

## **B. Tenured Faculty**

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

## **C. Clinical Faculty**

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

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

## **D. 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. This review proceeds identically to the Fourth-Year Review procedures for tenure-track faculty. External letters of evaluation are not solicited. There is no presumption of renewal of contract. If the position will not continue, the faculty member is informed that the final contract year will be a terminal year of employment. The standards of notice set forth in Faculty Rule 3335-6-08 must be observed.

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.

#### **E. Associated Faculty**

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

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

## **VI. Merit Salary Increases and Other Rewards**

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

#### **A. Criteria**

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

Meritorious performance in teaching, scholarship, and service are assessed in accordance with the same criteria that form the basis for promotion decisions. The time frame for assessing performance will be the past 36 months, with attention to patterns of increasing

or declining productivity. Faculty with high-quality performance in all three areas of endeavor and a pattern of consistent professional growth will necessarily be favored. Faculty members whose performance is unsatisfactory in one or more areas are likely to receive minimal or no salary increases.

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

## **B. Procedures**

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

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.

## **C. Documentation**

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

# **VII. Promotion and Tenure, and Promotion Reviews**

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## **A. Criteria**

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.

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 X 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 of Tenure-track Faculty

### a. Associate Professor with Tenure

Faculty Rule 3335-6-02 (<http://trustees.osu.edu>) provides the following general criteria for promotion to associate professor with tenure:

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

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

National Reputation: Achievement of a national reputation is a prerequisite for promotion to Associate Professor and awarding of tenure. Objective examples of a national reputation include but are not limited to service on NIH or equivalent grant review panels, participation on federal steering, guideline or advisory

committees, selection for service in a national professional society, invitation for lectureships or scholarly reviews, receipt of national scientific awards, external letters of evaluation and other measures of national impact.

Scholarship: Scholarship is broadly defined as the discovery and dissemination of new knowledge. Achievement of excellence in scholarship is demonstrated by discovery of a substantial body of original knowledge that is published in high quality, peer-reviewed journals or proceedings, and achievement of a national reputation for expertise and impact in one's field of endeavor. Such endeavors might include 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 include the total number of citations of their publications, the impact factor of journals in which they have published and his or her H-index. A sustained record of high quality and quantity of scholarly productivity as an assistant professor is required for promotion to the rank of associate professor or professor. Specific metrics in support of excellence in scholarship are discipline-specific. For examples, clinician investigators will have less time available for research than basic investigators and appropriate adjustments of these criteria have been made. The range of publications may be slightly adjusted in relation to the proportion of the faculty member's effort that is allocated to clinical service. Participation in collaborative, multidisciplinary research and team science is highly valued, especially to the extent that a faculty member's record of collaborative scholarship includes manuscripts on which authorship is first, senior, or corresponding; or the individual input of the faculty member as a middle author is uniquely contributory and clearly evident.

This document defines an acceptable range of scholarly productivity and explicitly balances qualitative and quantitative accomplishments to guide promotion and tenure decisions. Expectations regarding scholarship may be adjusted according to the extent of the faculty member's commitment to clinical service, teaching, or administrative duties. The extent of those activities must be documented in the annual reviews of the faculty member and must be included in the Departmental promotion and/or promotion reviews.

Evidence of sustained or multiple grant support is another crucial indicator of expertise in the field. Candidates for promotion to associate professor with tenure who are without significant clinical responsibilities must have obtained NIH funding as a principal investigator (PI) on an R01 or as one of several program directors or principal investigators on a large NIH grant (multiple-PD/PI) (*i.e.*, multicenter R01 or equivalent such as a project on a P01, U54), or equivalent funding from the National Science Foundation (NSF) or have obtained a mid-career K award. They should ideally have demonstrated sustainability of their research program by renewal of the NIH award and/or by garnering a second distinct NIH grant and/or another nationally competitive, peer reviewed grants. The latter may include support from prominent national charitable foundations (*e.g.*, American Heart 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.

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

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

Entrepreneurship is a special form of scholarship valued by the COM. Entrepreneurship includes patents and licenses of invention disclosures, software development, and materials transfers (e.g., novel plasmids, transgenic animals, cell lines, antibodies, and similar reagents), technology commercialization, formation of startup companies and licensing and option agreements. Inasmuch as there are no expressly defined metrics for entrepreneurship, the 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 distinctive record of teaching and mentoring excellence is required for promotion and tenure. Excellence is demonstrated by positive evaluations by students, residents, fellows, local colleagues and national peers. Teaching awards and other honors are also highly supportive of teaching excellence. A faculty member may also demonstrate a favorable impact on teaching and training programs, including curricular innovation, new teaching

modalities or methods of evaluating teaching, and program or course development. Development of impactful, innovative programs that integrate teaching, research and patient care are valued.

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

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

**Table 1: Summary of representative metrics used to assess suitability for promotion to the rank of Associate Professor with tenure.**

Peer-review publications	Grants and Patents	Teaching	Service and National Role
25 or more in journals with average impact factors of 1.5-3 or an H-index of 11 or above. As a general guideline 15 or more peer reviewed publications since appointment as an assistant professor at OSU.	PI or multiple-PD/PI on 1 funded R01 (or equivalent) that has been renewed or the combination of a current or prior R01 <u>plus</u> either a) a second R01 <u>or</u> b) an additional funded national grant; <u>or</u> c) patents generating licensing income.	Teaching awards; or positive lecture evaluations from national audience; or K award mentorship.	University, College or Medical Center committees plus leadership roles in professional societies and/or multiple <i>Ad hoc</i> or regular NIH study section membership; and/ or service as a regular <i>ad hoc</i> reviewer or on editorial boards.

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. However, evidence of at least co-investigator status in one of the grant categories listed above is a prerequisite to tenure. For clinicians with a greater than 50% clinical commitment there should be either evidence of co-investigator status in one of the grant categories listed

above as a prerequisite to tenure and/or strong publication record (i.e.,  $\geq 50$  peer review publications) coupled with clear evidence of a national reputation for clinical excellence and innovation. Similar accommodations can be made on the basis of educational commitments.

#### **b. Associate Professor without Tenure**

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

Scholarship: Qualitative indicators consistent with promotion without tenure might include an advancing record of scholarly excellence that demonstrates substantial progress toward meeting the scholarship expectations for the award of tenure. This may be demonstrated by publications in high quality peer-reviewed journals, evidence of emerging external recognition, and progress toward an extramurally supported research program. An example might be clear evidence of escalating productivity, indicating acquisition of momentum that will propel the candidate toward the sustained record of productivity required for promotion. Publications in journals of lesser impact that reflect the preliminary stages of development of a research career, or a predominance of publications in which the candidate is not first or senior author are also examples. Criteria for a promising trajectory in extramural funding might be reflected by serving as a PI or multiple-PD/PI on a new NIH grant award, as co-investigator on several NIH projects, as PI on local extramural grants, or as local principal investigator for multi-center clinical trials may also meet the requirement of extramural funding (moved from the promotion w/tenure section). Evidence of an emerging national recognition might include invitations to lecture at statewide or regional institutions or scientific meetings. Although the quality of scholarship is of the utmost importance, quantity is also important, and the record of accomplishment must demonstrate discovery of a substantial body of important, new knowledge.

Each department must define a range of productivity that is below the range specified for promotion with tenure to serve as a guideline for faculty and for faculty annual evaluations. Departmental criteria must explicitly balance qualitative and quantitative criteria for promotion. Furthermore the departmental Appointments, Promotion and Tenure document must stipulate that evidence of scholarship below the specified range does not preclude a positive promotion

decision and evidence of scholarship above the specified range does not guarantee a favorable tenure decision.

**Teaching and Mentoring:** Indicators of teaching consistent with promotion without tenure might include a record of teaching excellence involving a single group of trainees, a clear trend of improving teaching evaluations, or divisional (as opposed to department or college-wide) teaching awards. Teaching excellence may also be demonstrated through evaluations for presentations at other academic institutions, scientific or professional societies, or other hospitals.

**Service:** Indicators of service consistent with promotion without tenure might include an insufficient volume of outstanding service; or service as a member or chair of committees within the Department or College, but the absence of significant service roles at the national level. This might also include activities as an ad hoc reviewer for journals, or service on the advisory board for local organizations.

Table 2 below provides a summary of expected benchmarks for promotion to associate professor without tenure.

**Table 2: Summary of representative metrics used to assess suitability for promotion to the rank of Associate Professor without tenure.**

<b>Peer-review publications</b>	<b>Grants and Patents</b>	<b>Teaching</b>	<b>Service and National Role</b>
10 or more papers with an average impact factor of 1.5 to 3 or an H-index of 9 or above. As a general guideline 15 or more peer reviewed publications since their appointment as an assistant professor at OSU.	PI on an R21, R03 or co-investigator on a R01 plus PI status on a major national grant; or PI status on multiple national or Pharma grants; or patent/inventorship; or an unfunded NIH R01 with a score between the 10 <sup>th</sup> and 18 <sup>th</sup> percentile for a new investigator, until average pay lines exceed 18 <sup>th</sup> ile.	Teaching awards; and Consistently positive evaluations or positive lecture evaluations from national audience.	University, College or Medical Center committees plus: Leadership role in professional society or Ad hoc NIH study section membership or committee work for national society.

For clinicians seeking promotion without tenure substantial accommodation should be made for the time devoted to clinical practice as reflected in percent effort or average RVUs/FTE. However, for clinicians with 25 to 50% clinical activity evidence of at least co-investigator status in one of the grant categories listed above is a prerequisite. For clinicians with > 50% clinical activity a strong publication record (i.e., ≥ 25 peer review publications) with emerging national reputation may be sufficient for promotion. Similar accommodations can be made on the basis of educational commitments.

### **c. Promotion to Professor (Tenure-track)**

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

Scholarship: A sustained record of external funding and an enhanced quality and quantity of scholarly productivity as an Associate Professor is required for promotion to Professor (see table 3). For example, an H-score over 25, and/or 50 to 70 peer-review publications with an average impact factor of 3 to 6. Candidates for promotion to professor should ideally have 25-35 peer-reviewed publications since their promotion to associate professor. Clear evidence of an international reputation including: election to a leadership position in an international society or repetitive appointments to a national office, service as a national committee or task force chair, chair of an NIH or other federal review panel, regular membership on an NIH study section, peer recognition or awards for research, and editorships and lectures in international venues. Candidates for promotion will be expected to have developed and maintained nationally competitive and peer reviewed extramural funding to support their research program including sustained NIH funding. At a minimum, basic science candidates for promotion to professor must be a PI or multiple-PD/PI on at least one NIH funded R01 or equivalent grant with a history of at least one competitive renewal and another nationally competitive grant, or have simultaneous funding on two NIH awards. For clinician scientists seeking promotion to professor accommodation should be made in their grant requirements based on their clinical duties.

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

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

Service: Promotion to the rank of Professor requires service with distinction to the COM, OSU, and in national and international professional societies. Service can include leadership roles on OSU committees, in professional organizations and journal editorships. Evidence of the provision of professional expertise could

include roles as a board examiner, service on panels and commissions, program development, and professional consultation to industry, government, and education.

**Table 3 Summary of representative metrics used to assess suitability for promotion the rank of Professor with tenure.**

Peer-review publications	Grants and Patents	Teaching	Service and National Role
50 or more papers with a mean impact factor of 1.5 to 3 or an H- index of 15 or more. Ideally there should be 25 or more peer-reviewed journal papers since promotion to associate professor.	Renewed R01 <u>plus</u> a) second significant national grant <u>or</u> b) a second or more simultaneous R01 or equivalent grant (e.g., project on a P01 or U54 project); <u>or</u> c) two or more patents yielding licensing income.	Teaching awards; or consistently positive teaching evaluations or positive lecture evaluations from national audience; or T32 or K-award mentorship.	University committees plus: Leadership role in international society and regular NIH study section membership or federal panel or committee work; Journal editorial board.

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. However, for those with 25 to 50% clinical effort evidence of at least co-investigator status in one of the grant categories listed above is a prerequisite to tenure. For clinicians with a greater than 50% clinical commitment there should be either evidence of co-investigator status in one of the grant categories listed above and/or strong publication record coupled with international recognition of clinical excellence. Similar accommodations can be made on the basis of educational commitments.

## 2. Promotion of Clinical Faculty

Clinical faculty members have a greater responsibility for clinical teaching and patient care than individuals in the Tenure-track. Clinical faculty members are not eligible for tenure. The criteria in the categories of teaching and service are, for the most part, similar to those for the Tenure-track for each faculty rank, although there is greater emphasis on teaching, service and patient care in these appointments, and less emphasis on traditional scholarship.

Clinical Faculty members may continue their service to the Department and the University without ever seeking promotion to the next higher faculty rank, simply through repeated reappointment at the same level. However, the goals and objectives of the College and the University are best served when all faculty members 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 must be based upon convincing evidence that that the candidate has developed a national level of impact and recognition since being appointed to the rank of Assistant Professor. Faculty members on the clinical typically pursue careers as clinician scholars, clinician educators or clinical excellence.

### a. Associate, Clinician Educator Pathway

The awarding of promotion to the rank of Associate Professor in the Clinical–Clinician-Educator Pathway should be based upon convincing evidence that that the candidate has developed a national level of impact and recognition as a clinician educator since being appointed to the rank of Assistant Professor. A national level of impact can be demonstrated in a number of ways. National presentations of scholarship such as research abstracts or educational innovations

or participation on national committees are highly desirable. National Emergency Medicine forums for presentations include but are not limited to CORD, SAEM, ACEP and AAEM.

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

Service: Service is broadly defined to include administrative service to the University, exemplary patient care, program development relating to clinical, administrative, leadership and related activities, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University. Evidence of service can include membership on department, College, Medical Center, or University committees, or mentoring activities.

Scholarship: The candidate should demonstrate contributions to scholarship as reflected by primary or senior authorship of peer-reviewed journal publications (10-15) and scholarly review articles focused on pedagogic theory, innovative teaching techniques or development of web-based or video-teaching modules.

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

The awarding of promotion to the rank of Professor in the Clinical faculty, Clinician-Educator pathway must be based upon convincing evidence that that the candidate has developed a national leadership or international recognition as an education leader since being appointed to the rank of Associate Professor.

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

Mentorship of junior faculty may also demonstrate educational excellence. It is presumed that this will take the form of a primary mentoring relationship, and not

just ad hoc career coaching. Candidates should evidence mentoring relationships by providing protégé evaluations and evidence of the protégé's productivity.

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

Scholarship: The candidate must demonstrate sustained contributions to scholarship as reflected by primary or senior authorship of peer-reviewed journal publications (16-30) and scholarly review articles focused on pedagogic theory, innovative teaching techniques or development of web-based or video-teaching modules.

### c. Associate, Clinician Scholar Pathway

The awarding of promotion to the rank of Associate Professor in the Clinical faculty– Clinician-Scholar pathway must be based upon convincing evidence that that the candidate has developed a national level of impact and recognition as a clinician scientist since being appointed to the rank of Assistant Professor (see Table 6).

Teaching and Mentoring: A distinctive record of teaching and mentoring excellence is required for promotion. Excellence is demonstrated by positive evaluations by students, residents, fellows, local colleagues and national peers. Teaching awards and other honors are also supportive of teaching excellence. Teaching excellence must be demonstrated through evaluations and peer feedback based on presentations at other academic institutions, presentations or tutorials at scientific conferences or meetings, presentations at other medical centers or hospitals, and the like. Active participation as a mentor in training grants such as NIH T32 or K-awards and other such mentored programs is very highly valued as a teaching and mentoring activity, but not required.

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. For example, 12 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 minimum threshold. Again, participation in collaborative, multidisciplinary research and team science is highly valued even though it may result in “middle” authorship, as long as the faculty member’s unique contribution can be discerned. Faculty on this should have acquired external funding in support of their program of scholarship. Candidates should have a track record of being investigators in foundation, industry or NIH studies. Entrepreneurship and inventorship are also evidence of scholarly activity, as described in Section VII [Criteria for promotion to Associate Professor with tenure] above, and will be viewed most favorably.

**Table 6: Summary of representative metrics used to assess suitability for promotion to Associate Professor in the Clinical faculty –Clinician Scholar Pathway, assuming a 60% clinical assignment**

Peer-review publications	Grants and Patents	Teaching	Service
12 x mean impact factor of 1.5; 8 x mean impact factor of 3 or H-index of 5. As a general guideline 10-20 peer reviewed publications since being appointed as an assistant professor at OSU.	Participation on at least one clinical trial or other nationally funded grant.	Excellent Evaluations; Positive lecture evaluations from national audience	University, College or Medical Center committees; Committee work in professional organization and/or service as a regular <i>ad hoc</i> reviewer or on editorial boards

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

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

The awarding of promotion to the rank of Professor in the Clinical faculty-Clinician-Scholar pathway must be based upon convincing evidence that the candidate has developed a national leadership or international recognition as a clinician scientist since being appointed to the rank of Associate Professor (see Table 7).

Teaching and Mentoring: A record of teaching excellence as an Associate Professor must continue to justify promotion to the rank of Professor. The faculty member should have made unique and impactful contributions to the teaching mission as an Associate Professor. Active participation as a mentor in training grants such as NIH T32 or K-awards and other such mentored programs is highly valued as a teaching and mentoring activity, but not required.

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

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

Scholarship: The candidate must demonstrate contributions to scholarship as reflected by primary or senior authorship of peer-reviewed journal publications, scholarly review articles and case reports, and participation in basic, translational or clinical research projects or in clinical trials. For example, 30 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 be adjudged by calculation of the H-index. Here 14 publications cited at least 14 times each would be a reasonable minimum threshold. Faculty members on these appointments should ideally have been co-investigators on multiple NIH, Pharma, or major national clinical trials. Entrepreneurship and inventorship are also evidence of scholarly activity, as described in Section VI.A. and will be viewed most favorably.

**Table 7: Summary of representative metrics used to assess suitability for promotion to Professor in the Clinical faculty-Clinician Scholar Pathway, assuming a 60% clinical assignment.**

<b>Peer-review publications</b>	<b>Grants and Patents</b>	<b>Teaching</b>	<b>Service</b>
30 x mean impact factor of 1.5; or 15 x mean impact factor of 3 or H-index of 12. As a general guideline 15 or more peer reviewed publications since being promoted to associate professor.	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.	Excellent Evaluations; Positive lecture evaluations from national audience; and/or T32 or K award mentor	University, College or Medical Center committees; Leadership role in national professional organization and/or service as a regular <i>ad hoc</i> reviewer or on editorial boards

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

In the circumstance where individuals are assigned major responsibilities (90% time or greater) for clinical care and clinical administrative activities, faculty members may seek promotion for excellence in activities categorized as “scholarship of practice” (or “scholarship of application”). The clinical time commitment of these individuals may not allow the achievement of personal national recognition for their accomplishments; however, their unique contributions serve to enhance the national recognition of the Medical Center, the Department of Emergency Medicine or their assigned hospital. For these individuals, their contribution to the regional and national recognition of the Medical Center may serve as a proxy for individual national recognition. At a minimum they should provide clear evidence supporting criteria (i.) and (ii.) and typically demonstrate achievement in criteria (iii) through (vii).

- i. Multiple lines of objective evidence supporting excellence in individual clinical performance, including clinical measures such as quality indicators, mortality metrics, complication rates, patient satisfaction scores, RVUs per hour, coding/billing distribution and throughput metrics.
- ii. Subjective evidence of excellence in clinical care. This evidence could include recognition of excellence in patient care from patients, colleagues, residents, students or other team members. Letters of support from colleagues, teaching awards, student and resident evaluations and Departmental awards from these individuals may be included to support this metric
- iii. Establishment of quality improvements or systems-based changes that result in enhancement of the care provided to OSUWMC patients. The development and support of innovative approaches that enhance the care of Emergency Department patients. This could include the development of innovative clinical care models that impact the entire OSUWMC system. Examples include major ED physical design changes or the additions and development of new clinical care delivery models that enhance and impact the system-wide care of our patients.

- iv. A sustained track record of exemplary clinical leadership and unique program development within the institution. This may include both clinical and administrative work to support OSUWMC specific programs such as critical care, trauma, stroke, STEMI, sepsis, pediatrics, geriatrics or oncologic emergency patients. This must be supported by written documentation of the individual's contribution from external letters of support, referring physicians or Medical Center or Departmental leadership.
- v. Demonstration of dissemination of peer reviewed data and expertise in the form of Grand Rounds, clinical practice guidelines, seminars, podcasts, websites, small group activities with peer reviewed data and internal benchmarking.
- vi. Demonstration of collaboration with researchers and educators in the Department and beyond that result directly or indirectly in excellent clinical care.
- vii. Referral patterns from beyond the typical distribution for Emergency Medicine. For our discipline, this might include subspecialty areas such as hyperbaric medicine, wound care, toxicology, EMS or ultrasound. Such referrals help to demonstrate a reputation external to our organization as "best in class."

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. Promotion will not be granted purely on the bases of length of service to the institution or satisfactory job performance.

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

The standards for excellence in the scholarship of practice will vary from Department to Department. If a Department wishes to propose promotion to Associate Professor for individuals with heavy (90% or greater) clinical responsibility without national recognition, specific metrics must be carefully detailed in the Department's Appointment, Promotion and Tenure document. A faculty member who qualifies for promotion on this pathway should have supportive annual evaluations that document clinical effort in the years leading up to promotion on this pathway.

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

The awarding of promotion to the rank of Professor on the Clinical Excellence Pathway must demonstrate that the candidate has individually achieved a national reputation OR demonstrably contributed to the Department's or Medical Center's national reputation. 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. Metrics such as regional,

state, or national awards 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. 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. This may be evidenced in many ways, including, but not limited to, national positive citation of OSU EM as developing best practices, adoption by other health centers of OSU EM methods, guidelines or processes, inquiries and site visits from other health centers, and increases in national Emergency Medicine rankings or programs to which Emergency Medicine makes a significant contribution. Continued recognition of clinical excellence by patients, team members and others is an expectation of the candidate.

### **3. Promotion of Research Faculty**

In the Research, the criteria for promotion focus principally on the category of research, and the standards are comparable to those used for the Tenure-track for each faculty rank.

#### **a. Associate Professor**

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

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

Although funding by the NIH is highly desirable, it is not required for promotion on this. Other nationally competitive, peer reviewed funding, including support from national charitable foundations (*e.g.*, American Heart Association or American Cancer Society), industry, or federal entities such as the CDC and the NSF will satisfy the criterion for nationally competitive peer reviewed funding should evidence exist for a sustained record of funding from these types of agencies. Faculty members are encouraged to collaborate with other investigators

and may therefore meet the requirement for extramural support for their research as a co-investigator on NIH awards, or other comparable roles on awards from private foundations. Funding through pharmaceutical or instrumentation companies for investigator initiated proposals, or as local principal investigator for multi-center trials also meets the requirement of extramural funding. Similarly, faculty members who generate support for their research programs through their contribution to the creation of patents with associated license-derived income or spin-off companies also meet the criteria for extramural funding. It is expected that the successful candidate will have a sustained record of 100% salary recovery from extramural sources.

Specific metrics in support of excellence in scholarship may be discipline-specific. Therefore, each Department will define in their formal Appointments, Promotion and Tenure document, an acceptable range of scholarly productivity, and must explicitly balance qualitative and quantitative accomplishments to guide promotion and tenure decisions. Examples of discipline specific considerations include publications in highly specialized journals that may have high impact in the field, but a relatively low overall impact factor and citation index. In addition, levels of productivity in disciplines may vary substantially and this variation must be appropriately acknowledged.

Overall, the number of publications required for promotion should be sufficient to persuasively characterize the faculty member's influence in helping to discover new knowledge in their field. Thus, both quality and quantity are important considerations. Publication as at least a co-author in the field's highest impact factor journals is an important variable that converges with other factors such as the extent of external funding, invited lectures, invited manuscripts, editorial boards, peer-review panels, and external letters of evaluation in the decision to promote. It should be appreciated that scholarship exceeding the specified range is not a guarantee of a positive promotion decision. Similarly, records of scholarship below the specified range do not preclude a positive promotion decision.

Entrepreneurship is a special form of scholarship valued by the College of Medicine. Entrepreneurship includes, but may not be limited to, invention disclosures, software development, materials transfers (*e.g.*, novel plasmids, transgenic animals, cell lines, antibodies, and similar reagents), technology commercialization, patent and copyrights, formation of startup companies and licensing and option agreements. Inasmuch as there are no expressly defined metrics for entrepreneurship, the 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 dossier.

## **b. Professor**

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

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

## **B. Procedures**

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

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

The College of Medicine is comprised of a wide array of professional disciplines. Care must be taken to apply the criteria for appointment and promotion with sufficient flexibility. In all instances, superior intellectual attainment, in accordance with the criteria set forth, is an essential qualification for appointment and promotion to all faculty positions. Insistence upon this standard for continuing members of the faculty is necessary for the maintenance and enhancement of the University as an institution dedicated to the discovery and transmission of knowledge.

### **1. Candidate Responsibilities**

Candidates are responsible for utilizing Research in View to submit a complete, accurate dossier fully consistent with Office of Academic Affairs guidelines. Candidates should not sign the Office of Academic Affairs Candidate Checklist without ascertaining that they have fully met the requirements set forth in the core dossier outline including, but not limited to, those highlighted on the checklist. Candidates are responsible for submitting a copy of the department's APT document that was in effect at the time of the candidate's hire or when the candidate was last promoted, whichever is more recent, if s/he wishes to be reviewed under that

document's criteria and procedures. This must be submitted when the dossier is submitted to the department.

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

## **2. Promotion and Tenure Committee Responsibilities**

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

- To review this document annually and to recommend proposed revisions to the faculty.

To consider annually, in spring semester, requests from faculty members seeking a non-mandatory review in the following academic year and to decide whether it is appropriate for such a review to take place. Only professors on the committee may consider promotion review requests to the rank of professor. A simple majority of those eligible to vote on a request must vote affirmatively for the review to proceed.

- The committee bases its decision on assessment of the record as presented in the faculty member's CV and on a determination of the availability of all required documentation for a full review (student and peer evaluations of teaching). Lack of the required documentation is necessary and sufficient grounds on which to deny a non-mandatory review.
- A tenured or non-probationary faculty member may only be denied a formal promotion review under Faculty Rule 3335-6-04 (<http://trustees.osu.edu/rules/university-rules/chapter-3335-6-rules-of-the-university-faculty-concerning-faculty-appointments-reappointments-promotion-and-tenure.html>.) for one year. If the denial is based on lack of required documentation and the faculty member insists that the review go forward in the following year despite incomplete documentation, the individual should be advised that such a review is unlikely to be successful.
- A decision by the committee to permit a review to take place in no way commits the eligible faculty, the department chair, or any other party to the review to making a positive recommendation during the review itself.
- Annually, in late spring through early autumn semester, to provide administrative support for the promotion and tenure review process as described below.
  - Late Spring: Select from among its members a Procedures Oversight Designee who will serve in this role for the following year. The Procedures Oversight Designee cannot be the same individual who chairs the committee. The

Procedures Oversight Designee's responsibilities are described in the Office of Academic Affairs annual procedural guidelines.

- Late Spring: Suggest names of external evaluators to the department chair.
- Summer: Gather internal evidence of the quality of the candidate's teaching, scholarship, and service from students and peers, as appropriate, within the department.
- Early autumn: Review candidates' dossiers for completeness, accuracy (including citations), and consistency with Office of Academic Affairs requirements; and work with candidates to assure that needed revisions are made in the dossier before the formal review process begins.
- Meet with each candidate for clarification as necessary and to provide the candidate an opportunity to comment on his or her dossier. This meeting is not an occasion to debate the candidate's record.
- To make adequate copies of each candidate's dossier available in an accessible place for review by the eligible faculty at least two weeks before the meeting at which specific cases are to be discussed and voted.
- Draft an analysis of the candidate's performance in teaching, scholarship and service to provide to the full eligible faculty with the dossier; and seek to clarify any inconsistent evidence in the case, where possible. The committee neither votes on cases nor takes a position in presenting its analysis of the record.
- Revise the draft analysis of each case following the faculty meeting, to include the faculty vote and a summary of the faculty perspectives expressed during the meeting; and forward the completed written evaluation and recommendation to the department chair.
- Provide a written response, on behalf of the eligible faculty, to any candidate comments that warrant response, for inclusion in the dossier.
- 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.

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

The responsibilities of the department chair are as follows:

- Where relevant, to verify the prospective candidate's residency status. Faculty are not eligible for tenure, review or promotion if they do not have citizenship or permanent residency status.
- 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 adequate copies of 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.
- 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. 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.

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

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

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

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

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

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

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

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

### **C. Documentation**

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

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 the candidate.

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

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

#### **1. Teaching**

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

All tenure-track and clinical faculty members in the Department of Emergency Medicine must be engaged in teaching, development of the department's academic programs, and mentoring of students. Evidence of effective teaching must be demonstrated by documentation of teaching activities over a sustained period of time.

In the area of teaching, it is the quality rather than quantity that is the primary determinant of teaching effort. All teaching evaluations for medical students, residents and fellows are an important measurement of effective teaching. Evaluations can include measures of teaching corresponding to bedside teaching, teaching in small groups, lecture presentations or advising and mentoring. It will be the responsibility of the individual faculty member to insure that their teaching efforts are properly documented and evaluated.

Summary of the critical components of the teaching dossier:

### **Medical Student Evaluations:**

**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.

**Peer Evaluations:** Using a form developed by the Department of Emergency Medicine Education Committee, a summative and formative 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.

**Other Evaluations:** Representative evaluations of local, national, and international presentations will be included. Evaluations from regional, state or national lectures (including invited Grand Rounds) should be included.

Other indicators of quality education efforts may include:

- the success rate of trainees in in-training examinations and in passage of specialty board examinations
- success of the candidate's mentored students, residents, fellows and junior faculty
- extent to which pedagogical materials developed by the candidate have been adopted by other faculty here and at other institutions. This would include new or novel curriculum development
- extent to which the candidate is invited to provide expertise on teaching
- peer review funding for teaching programs or new curriculum development
- local, regional or national teaching awards

## **2. Scholarship**

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

The Department's Appointments, Promotion and Tenure document must specifically establish how the evidence of a faculty member's scholarship will be documented and assessed in terms of quality and significance.

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

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

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

### **3. Service**

Service is broadly defined to include administrative service to the University, exemplary patient care, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University. In the College of Medicine, a candidate's service contributions must be demonstrated to be of high quality and effectiveness. All Tenure-track and Clinical faculty members must contribute to service as evidenced by documentation of contributions over a sustained period of time. The Department's Appointments, Promotion and Tenure document must specifically establish how the evidence of a candidate's service will be documented and assessed in terms of quality and effectiveness.

Evidence of administrative service to the University may include appointment or election to Department, College, and/or University committees, holding administrative positions; development of innovative programs, and participating in mentoring activities. Program Development, reflecting the integration of teaching,

service and research in a specific content area, may be given special recognition and significance if desired by the Department. Evidence of professional service to the faculty member's discipline can include editorships of, or service as, a reviewer for journals or other learned publications; offices held and other service to professional societies. Evidence of the provision of professional expertise to public and private entities beyond the University includes service as a reviewer of grants or other scholarly proposals, external examiner or advisor, a panel and commission participant, and as professional consultant to industry, government, and education. While provision of high quality patient care is expected of all faculty members with clinical responsibilities, in and of itself it is insufficient for meeting the service requirement for Tenure-track and Clinical faculty.

## **VIII. Appeals**

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

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

## **IX. Reviews in the Final Year of Probation**

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

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

## **X. Procedures for Student and Peer Evaluation of Teaching**

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### **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**

Using a form developed by the Department of Emergency Medicine Education Committee, a summative and formative 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 oversees the department's peer evaluation of teaching process.

The suggested process for ensuring that all faculty members annually receive peer evaluation is: annually the department chair appoints a Peer Review of Teaching Committee. The term of service is one year, with reappointment possible.

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

- to review the teaching of probationary tenure-track and probationary clinical faculty at least twice per year with the goal of assessing teaching at all the levels of instruction to which the faculty member is assigned
- to review the teaching of tenured associate professors and non-probationary associate professors on the clinical faculty, at least once per year with the goal of assessing teaching at all the levels of instruction to which the faculty member is assigned and of having at least two peer reviews of teaching before the commencement of a promotion review
- to review the teaching of tenured professors and non-probationary clinical professors at least once every four years with the goal of assessing teaching at all the levels of instruction to which the faculty member is assigned during the year of the review.
- To review, upon the department chair's request, the teaching of any faculty member not currently scheduled for review. Such reviews are normally triggered by low or declining student evaluations or other evidence of the need for providing assistance in improving teaching.
- To review the teaching of a faculty member not currently scheduled for review, upon that individual's request, to the extent that time permits.

Peer evaluation of 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.

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

## **XI. Appendices**

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### **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 considered “.” These faculty fall into many sub-categories. (See also Clinical Associated Faculty, Adjunct Faculty, full-time Paid Associated)

**Clinical Associated Faculty** – 0% FTE community physicians that participate in the education and training of medical students and residents. (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 4<sup>th</sup> year, 8<sup>th</sup> year, tenure review, or reappointment review

**MOU – Memorandum of Understanding** – a document between two academic departments expressing how a faculty member’s appointment, time, salary and other resources will be allocated and/or divided. (used during 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 (please see Appendix B for the complete list of TIUs)

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

## **B. Tenure Initiating Units in the College of Medicine**

Appointments and promotion and tenure actions may only be originated by a faculty member's Tenure Initiating Unit (TIU). These are the academic departments in the College of Medicine. The School of Health and Rehabilitation Sciences is also a Tenure Initiating Unit. Divisions are not TIUs. Neither are Centers or Institutes, i.e. the Davis Heart & Lung Research Institute, the Comprehensive Cancer Center, or the Center for Microbial Interface Biology.

Below is the list of all of the Tenure Initiating Units in the College of Medicine with their Org numbers:

Anesthesiology (25110)  
 Biomedical Education & Anatomy  
 Biomedical Informatics (25100)  
 Emergency Medicine (25120)  
 Family Medicine (25130)  
 Health and Rehabilitation Sciences, School of (25040)  
 Internal Medicine (25250)  
 Microbial Infection and Immunity (25170)  
 Molecular & Cellular Biochemistry (25700)  
 Cancer Biology & Genetics (formerly Molecular Virology, Immunology and Medical Genetics (25150)  
 Neurology (25280)  
 Neurological Surgery (25290)  
 Neuroscience (25320)  
 Obstetrics & Gynecology (25350)  
 Ophthalmology (25400)  
 Orthopaedics (25430)  
 Otolaryngology (25450)  
 Pathology (25500)  
 Pediatrics (25550)  
 Biological Chemistry and Pharmacology (25600)  
 Physical Medicine and Rehabilitation (25650)  
 Physiology and Cell Biology (25750)  
 Plastic Surgery (25940)  
 Psychiatry (25850)  
 Radiation Oncology (25890)  
 Radiology (25900)  
 Surgery (25950)  
 Urology (25970)

## **C. Faculty Rank Title Codes**

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

#### **D. 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.