



Center Workshop 10/15/20

Academic Career Advancement at UC San Diego

Presentation Materials

Academic promotions at UC San Diego (or how to get there from here)

Kim E. Barrett, Ph.D.

Distinguished Professor of Medicine

Outline of my comments

- What are the expectations of UCSD academic promotions committees (DOMCAP/SOMCAP/CAP)?
 - Implications of tracks
 - Complexity of UC system
- How can you give them what they want?

- Three term chair of DOMCAP (Department of Medicine Committee on Appointments and Promotions)
- One year as member of campus-wide CAP (Committee on Academic Personnel)
- Steering committee, NCLAM (National Center for Leadership in Academic Medicine)
- External reviewer for dozens of promotion files
- Previous Dean of Graduate Division

What are my qualifications to discuss this?

Steps to your destination



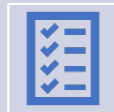
Define expectations



Take responsibility for career direction/development

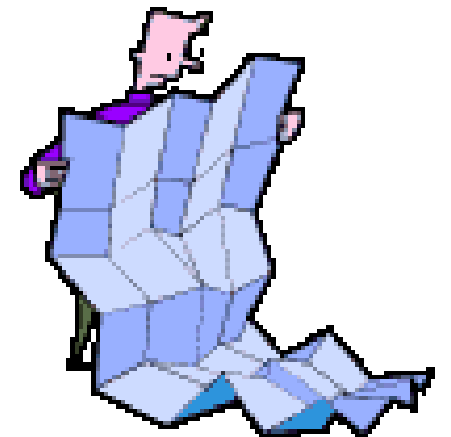


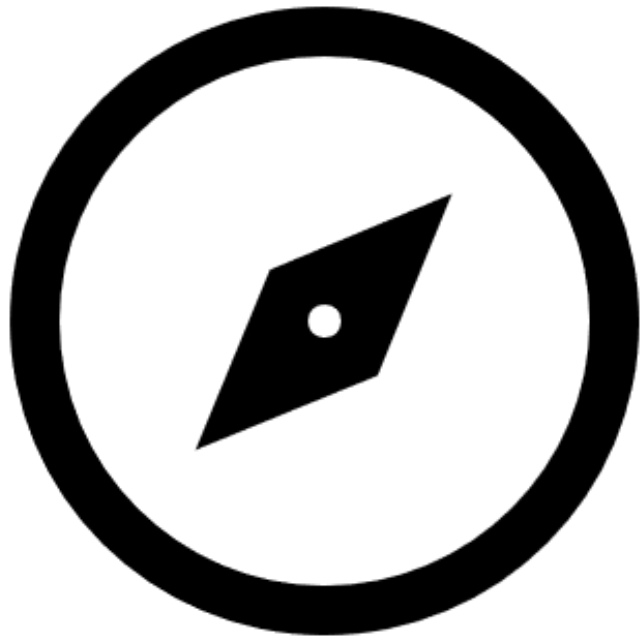
Seek ongoing feedback



Get things done

and DOCUMENT accomplishments





The importance of expectations

Formal and informal job descriptions

Written criteria for advancement

Department

Academic personnel office

Websites

Different series/tracks may have dramatically different requirements for advancement

Are you on the right path?

Am I on
the right
pathway
for me?



What will get
you
promoted?

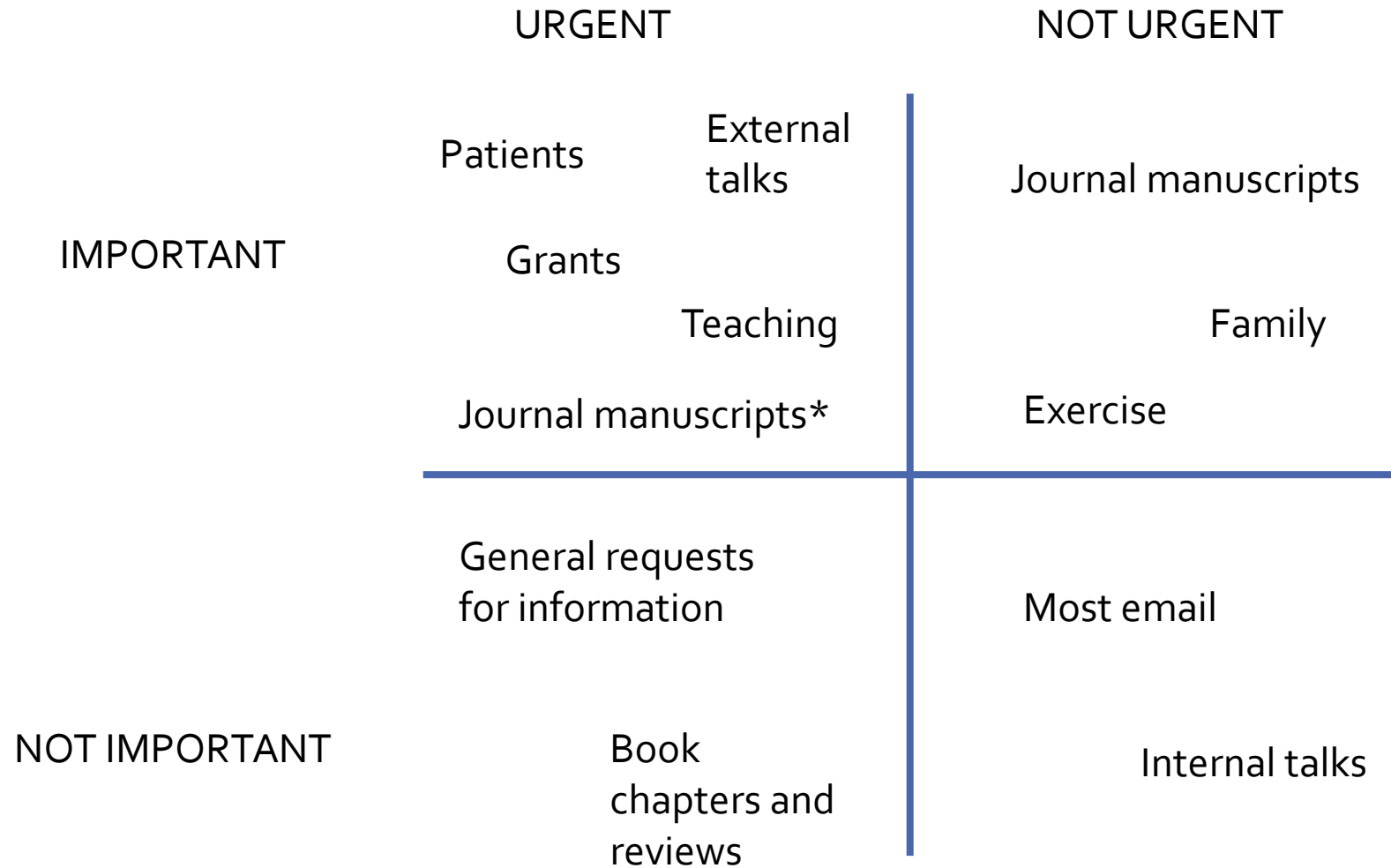


Focus

- The tenure clock moves FAST and it is easy to get off track

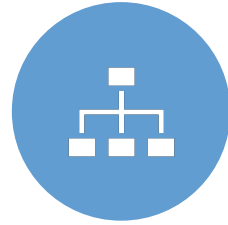


- Develop your theme
- Examine all requests in light of series requirements/job description
- Defer/deflect overly onerous service
- Seek mentors in multiple domains
- Pay attention to interim feedback



*when needed for a grant proposal, tenure packet, etc

Academic series at UC San Diego



LADDER RANK
(AKA FTE)



IN RESIDENCE



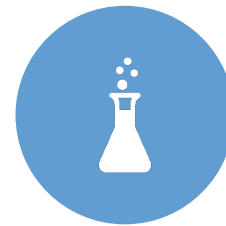
CLINICAL X



HS CLINICAL



ADJUNCT

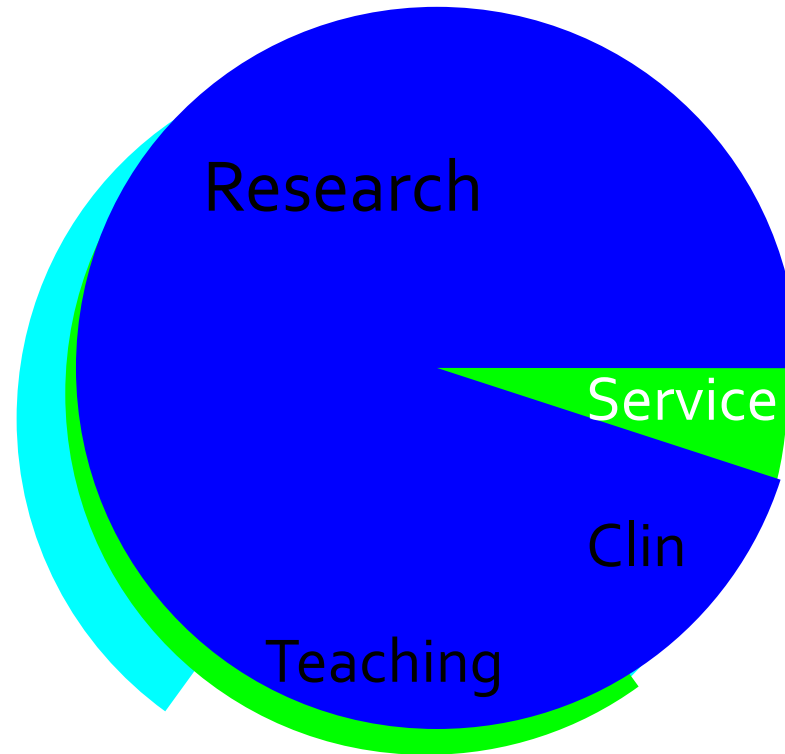


RESEARCH
SCIENTIST



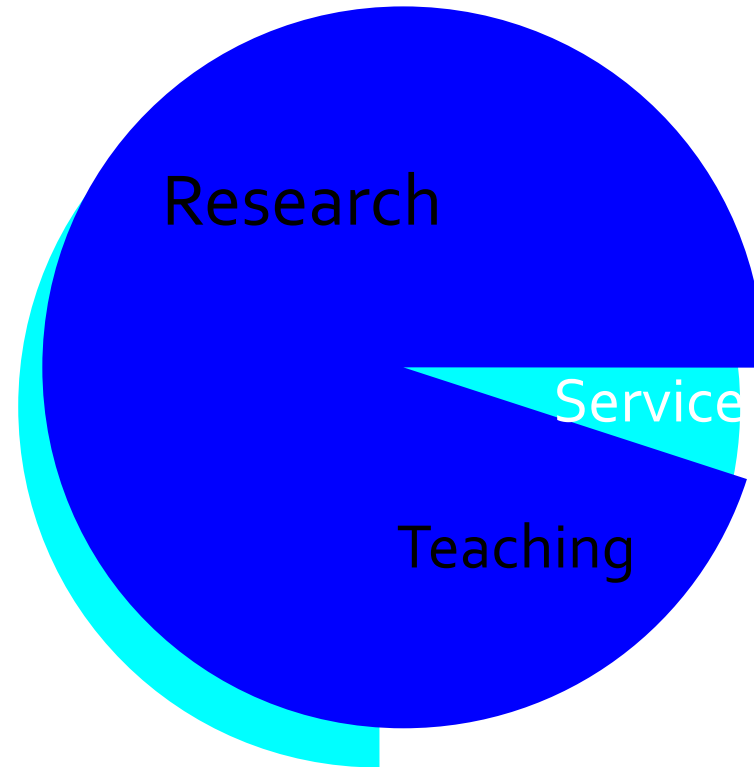
PROJECT
SCIENTIST

Promotion to Associate rank - Tenure-track physician/scientist – FTE series (also In Residence series)



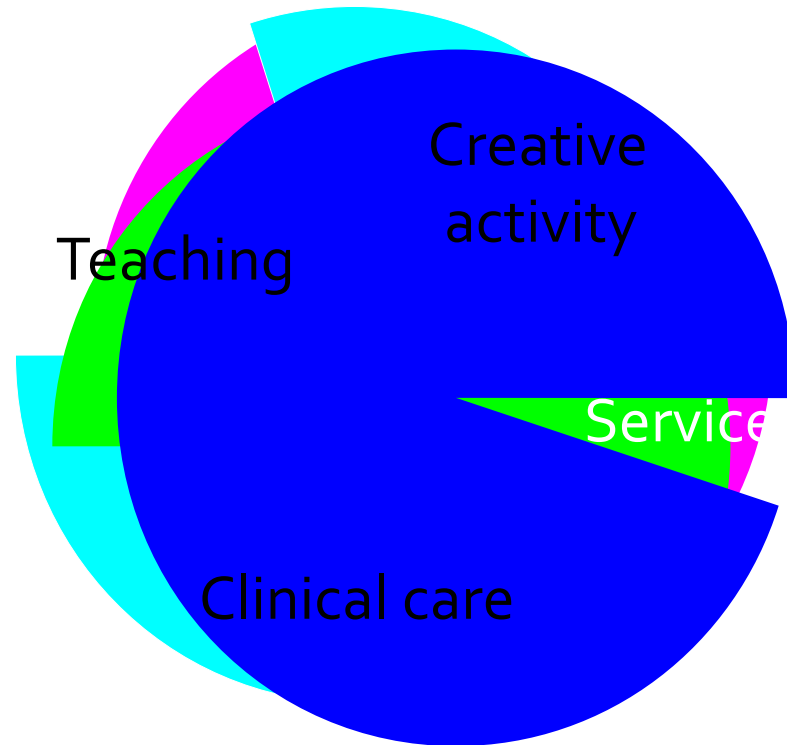
- 10-20 high caliber papers
 - at least some as first/last author
 - Independence
- Funding
- National reputation
- Defined teaching role
 - no weak evaluations
- At least competent clinical care; active service commitments

Promotion to
Associate rank -
Tenure-track basic
scientist (FTE, In
Residence)



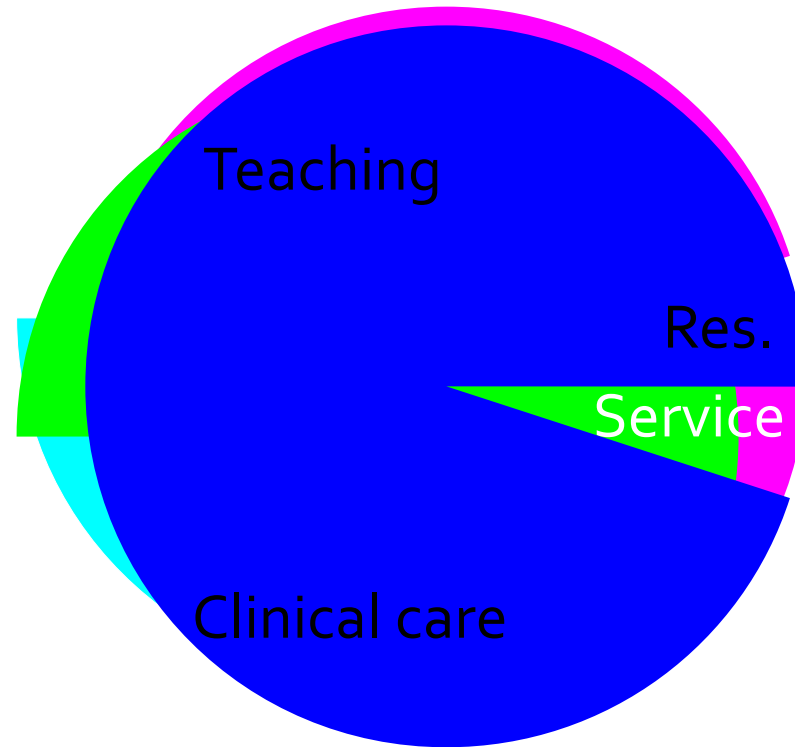
- Around 20 high caliber papers
 - at least some as first/last author
 - independence
- *Renewed* funding
- National reputation
- Defined teaching role
 - no weak evaluations
- Active service commitments

Promotion to Associate rank - Clinical scholar (Clinical X series)



- 10 or more scholarly reviews, book chapters, reports of clinical trials
 - Primary driving force in at least some of the work
- At least a regional reputation for contributions
- Preclinical and/or clinical teaching
 - No weak evaluations
- Master clinician (or on the way to being one)
- Defined service role

Promotion to Associate rank - Clinician/educator (HS Clinical series)



- Teaching mainly in clinical setting
 - No weak evaluations
- Regional reputation for clinical acumen
- Defined service role
- Creative/scholarly activity
 - Independent contributions not required
 - “Beyond the moment”
 - Case reports OK

Research appointments
(Project or Research Scientist)



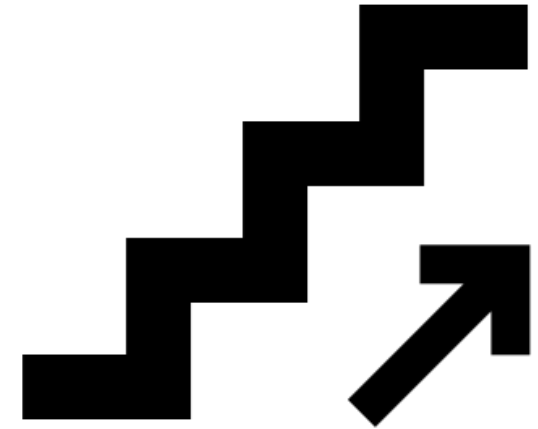
- Majority of time devoted to research activities
- Independence only required for RS series
 - Independent funding adds brownie points
- Teaching not required, but strengthens file if other criteria met

Adjunct series

- Used uniquely in UC system
 - At other institutions, usually connotes a non-salaried appointment
- Accommodates a variety of job descriptions
- Often an “entry” track
 - Change in series possible once career path is clear and/or stable funding obtained
- Teaching is an absolute requirement in this series
 - “Equivalent” of one course per year – can satisfy with classroom plus lab-based teaching, but former often vital

Steps to promotion to Associate rank

- Step reviews every two years at Assistant level
 - But review takes more than one year so first review may come very quickly
- Fourth year appraisal is a formal evaluation of your chances for promotion
 - Favorable, Favorable w/Res, Problematic or Unfavorable
 - Most appraisals are Favorable w/Res – that's OK!
- Promotion normally after two years spent at Step IV
 - But can be proposed as soon as the candidate is "ready"



Who decides (and why does it take so long)?



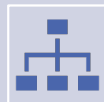
Division faculty (Associate and above) vote on appraisals as well as promotion to Associate level



DOMCAP reviews file and makes a recommendation to DOM as a whole

Eligible DOM faculty then vote

Chair writes a letter summarizing DOM action and sends forward to dean's office



Associate Dean reviews (usually rubber-stamps) and sends forward to SOMCAP (Clinical series) or APO (all others)



APO ensures file is complete; refers all remaining files except Project Scientist to CAP



CAP/SOMCAP votes are advisory to EVC or SOM Dean, respectively

EVC or Dean make final decision

How to get there



Seek interim feedback

Formal appraisal process
Annual meeting with
Division Chief and research
mentor, if appropriate



Focus on getting things finished

Record
accomplishments and
contributions in real
time

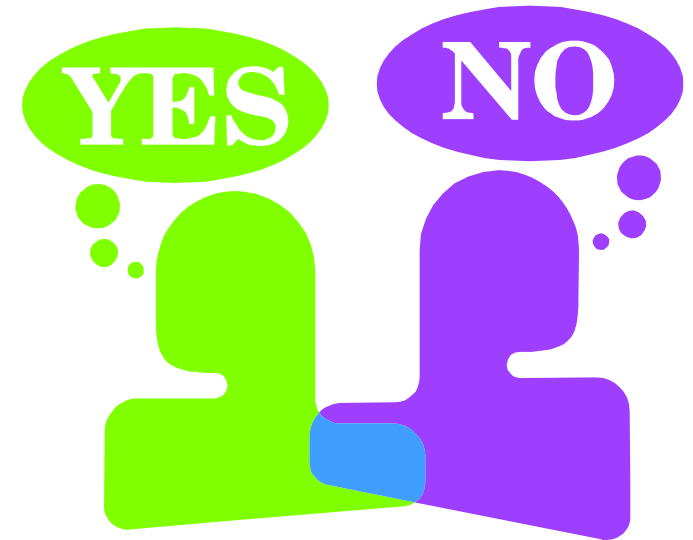


Take charge for career development and advancement

Seek mentors
proactively; embrace
formal programs

Staying on track

- Learn how and when to say YES and NO
 - *"Men are all alike in their promises, it is only in their deeds that they differ" – Moliere*
- Have a plan and a to-do list
 - Refer to them frequently
- Don't be afraid to ask



Summary of requirements for promotion to Associate rank

Excellence

Scholarly/creative activity

External reputation

National (international)

Research, clinical acumen

Independence

Publications (grants)

Defined role in teaching and service



Closing thoughts

1

Keep your academic file up to date

2

Resist the temptation to pad and obfuscate

- Reviewers will always figure it out, and you'll just make them mad

3

You can climb the mountain

GOOD LUCK!

Promotions in Clinical Series at UC San Diego

San Diego Digestive Diseases Research Center
10/15/2020

Thomas J Savides MD
Professor of Clinical Medicine

Health Sciences Clinical Series (HS Professor of Clinical Medicine)

- **Emphasis is on clinical work**
 - Most people nearly full-time clinical practice
 - Increasing use of metrics (patient experience scores, quality scores, clinical professionalism, etc)
- **Teaching/Education**
 - Expected to be involved in teaching of medical students, residents, fellows, patients, teams
- **Research/Scholarly Activity expected**
 - Activities that can be disseminated to others as a document
 - Development of care pathways, case reports, reviews, newsletters, peer-reviewed publications
- **University Service**
 - University service and/or national society involvement.

BASIC APPOINTMENT/PROMOTION CRITERIA FOR: CLINICAL SERIES

RANK AND STEP	CLINICAL AND PROFESSIONAL ACTIVITIES	TEACHING	RESEARCH, PUBLICATIONS, CREATIVE & SCHOLARLY ACTIVITIES	UNIVERSITY AND PUBLIC SERVICE
ASSISTANT PROFESSOR, STEP I	Excellence in basic clinical skills as demonstrated by letters from directors of training programs and colleagues.	Participation in teaching of housestaff and students through their clinical activities and other teaching as defined by Division Head.	Scholarly activity plan required. May include mentored training activities with clear plan to complete scholarly products. Division Head should approve. Defined by candidate and Division Head based on one or more activities listed in clinical scholarly activities document. Please see letter of the Chair, dated 10-06-03	Not required for appointment.
ASSISTANT PROFESSOR, 4TH YEAR APPRAISAL	Established clinical focus, active practice or contractual clinical activity, established excellence in clinical care delivery.	Documented effectiveness in teaching of housestaff and students through clinical activities and other teaching as defined by Division Head.	Scholarly activity required. May include participation in collaborative research; publication of case reports or reviews; presentations at local and national meetings (including CME); or development of innovative clinical procedures, teaching methods or clinical curricula. May include evidence of independent or collaborative research, creative or scholarly activities e.g. generation of data on the performance, goals, teaching contributions, or other elements of academic medicine; publication of case reports or reviews; presentations at local and national meetings (including CME); mentoring ISP efforts that are subsequently presented locally or nationally; development of innovative clinical procedures, teaching methods or clinical curricula or guidelines for patient care..	Evidence of significant University service.
ASSOCIATE PROFESSOR, STEP I	Independent clinical excellence and focus, sustaining clinical practice or contractual clinical support or other support, regional recognition for	Excellence in teaching of housestaff and students in above activities as documented in letters and teaching evaluations.	Scholarly activity required, with demonstrated independent contribution to effort. As above for Assistant Professor with	Evidence of participation in University service, or participation in local or national organizations.

	clinical excellence as defined in letters from peers. Be certified by one of the medical specialty boards, or demonstrate equivalent achievement and recognition.		documented continued productivity.	
PROFESSOR, STEP I	As above for Associate Professor with continued momentum.	As above for Associate Professor with substantial contribution to the clinical teaching program.	Scholarly activity is required. As above for Associate Professor.	Evidence of active University service, and/or leadership in local or national organizations.
PROFESSOR, STEP VI	As above for Professor with clear evidence of excellence and momentum.	As above for Professor with clear evidence of excellence and momentum.	Scholarly activity is required. As above for Professor with clear evidence of excellence and momentum.	As above for Professor with clear evidence of excellence and momentum.

June 2007

Clinical X Series (ie Professor of Clinical Medicine)

- **Regional/national recognition for clinical excellence**
- **Scholarly activity** is expected, though it may be in the form of clinical innovation rather than traditional research – with demonstrable **regional or national dissemination and impact & recognition**
- **Teaching excellence** at the institutional, **regional, national level**
- **Participation** and eventually leadership in **local and national committees**

CRITERIA FOR ADVANCEMENT IN THE PROFESSOR OF CLINICAL X SERIES

	Clinical and Professional Activity	Scholarly Activity	Teaching	Service
Assistant Professor Step I (Initial Appointment)	<p>Excellence in basic clinical skills: completion of recognized clinical training program; letters from program directors, colleagues.</p> <p>Regional or national recognition.</p>	<p>Potential for excellent scholarly activity with impact beyond our institution, to be documented by letters and/or research or review publications. Roles in collaborative research may be an important consideration, and may be somewhat flexible.</p> <p>Expressed interest in pursuing scholarly activity as a significant component of the academic position, coupled with evidence to support the promise for accomplishment. Evidence may be in the form of recommendation from the Departmental Chair, Division Chief or Program or Fellowship Director, publications to include (but not limited to) case reports, book chapters, prior collaboration with established researchers, and greater weight being given to original research, or completed special training as evidenced by MPH, MBA, PhD.</p>	<p>Excellent teaching abilities documented by letters from program directors and, if available, med student/housestaff evaluations and invitations to lecture.</p> <p>Local recognition.</p>	<p>No prior university service expected at time of appointment.</p>
Assistant Professor 4th Year Appraisal (in some cases, 6th year appraisal)	<p>Recognized clinical excellence, not precluding some limited mentoring if appropriate to developing new skills. UCSD clinical faculty and regional peer referrals, and development of unique clinical programs should be documented in the file.</p> <p>Specialty/subspecialty board certification, as appropriate.</p>	<p>Some scholarly activity is expected, though it may be in the form of clinical innovation rather than traditional research – with demonstrable regional or national dissemination and impact & recognition. Roles in collaborative research may be an important consideration. Evidence of accomplishment or a trajectory that predicts accomplishment in the scholarly arena to include one or more of the following: published original manuscripts, published or presented abstracts that are likely to lead to complete original manuscripts, book chapters, review articles, , participation in independent or collaborative research, application or securing extramural funding, appointment on National Society committees, with lesser consideration given to case reports</p>	<p>Excellent teaching- may be clinical and/or classroom or CME/invited presentations documented by student, housestaff and CME evaluations. Innovative programs, new courses or techniques may deserve special consideration.</p> <p>Teaching/ training programs directed at peers, including informal peer teaching.</p> <p>Local recognition.</p>	<p>Participation on University and community service committees/boards is expected. Actual extent of this will depend on individual's clinical activities. Invitation or election to regional or national committees, journal review boards, etc. is expected.</p>
Associate Professor of Clinical X	<p>Independent clinical excellence and focus, maintaining clinical practice or contractual clinical support or other support, regional recognition for clinical excellence documented e.g., by referrals. Letters from UCSD faculty and regional</p>	<p>Demonstrated and sustained excellence in contributions to knowledge and/or practice in chosen clinical field as indicated by dissemination of a body of publications or teaching material or programs used in other institutions, or the introduction of documented improvements/innovations that advance the</p>	<p>Teaching excellence in clinical care delivery or consultation services or precepting medical students, including: lectures, grand rounds, M&M, primary care or sub- specialty rounds or laboratory instruction in SOM core courses.</p>	<p>Membership on care delivery committees at UCSDMC, VAMC, DOM or SOM, or membership in national and local organizations or committees or boards, or review of manuscripts, or</p>

	<p>community physicians. Documentation of the amount and quality of clinical care activities.</p> <p>Recognition at the national level is desirable, but not required.</p>	<p>educational mission both within and beyond our institution. Textbook chapters or similar publications, or other contributions to the professional literature (including video and electronic media), or development and institution of new or improved methods of teaching, or principal or co-investigator status on collaborative or joint research program. Independent letters from regional authorities.</p> <p>Evidence of accomplishment in the scholarly arena as evidenced by two or more of the following: Publication of two or more original manuscripts, at least one of which is deemed to have added in a substantial manner to the knowledge base in the specialty, AND publication of one or more book chapters in leading text in the specialty or subspecialty, appointment of leadership role in specialty or subspecialty society at least at the task force or committee level, securing substantial extramural funding, either as a PI or co-PI to support a clearly defined area of clinical, educational, or basic science research, establishment of an educational module that has gained acceptance beyond the local institution.</p>	<p>Teaching evaluations from students, housestaff, peers, outside sources, external letters, etc.</p> <p>Regional recognition.</p>	<p>participation in development of organizational position papers or consensus statements. Committee rosters and external letters.</p>
<p>Professor of Clinical X</p>	<p>Independent clinical excellence and focus, maintaining clinical practice or contractual clinical support or other support, national recognition for clinical excellence documented by referrals, with continued momentum. Letters from UCSD faculty and San Diego community physicians, and national physicians or authorities.</p> <p>Activities at the international level are desirable, but not required.</p>	<p>National and continued impact and recognition for sustained excellence in scholarly contributions to knowledge and/or practice in chosen clinical field as indicated by dissemination of a body of research or other scholarly publications, or teaching material or programs used in other institutions, or other documented improvements/innovations. Textbook chapter or similar publications, or other contributions to the professional literature (including video and electronic media), or development of new or improved methods of teaching, or co-investigator status on clinical research studies. Independent letters from national or international authorities. Evidence of continued accomplishment in the scholarly arena as delineated under criteria for Associate Professor but with the added requirement for national recognition for the area of achievement. PI with substantial extramural support for a line of independent investigation in the arena of clinical, basic science or educational research.</p>	<p>Teaching excellence in clinical care delivery or consultation services or precepting medical students, including lectures, grand rounds, M&M, primary care or sub-specialty rounds or laboratory instruction in SOM core courses. Teaching evaluations from students, housestaff, peers, outside sources, external letters, etc.</p> <p>Recognition at the institutional and national level.</p>	<p>Leadership of care delivery committees at UCSDMC, VAMC, DOM or SOM, or national and local organizations or committees or boards, or review of manuscripts, or development of organizational position papers or consensus statements. Committee rosters and external letters.</p>

		Appointment at least at the level of editorial board of a peer reviewed medical journal or leadership at the level of President, President elect or Vice President of a national or regional (i.e California or greater) specialty or subspecialty organization.		
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Advice for Clinical Series Junior Faculty

- **Clinical**

- Focus on general GI/Hep or a Subspeciality – develop your niche
- Take care of your patients as if they were your family
- Finalize all patient notes in EMR same day
- Look at all items in your EMR inbox daily and delete when done
- Be nice to colleagues

Advice for Clinical Series Junior Faculty

- **Teaching**

- Be involved in GI fellow training
- Volunteer to have medical students or residents in your clinic
- Participate in 1st and 2nd year medical student training if opportunity arises – it is fun!

Advice for Clinical Series Junior Faculty

- **Scholarly Activities**

- DOM expects something that has a documented record (ie publication, patient care manual, etc)
- Help other faculty do clinical research and you can be a middle author
- Submit case reports or reviews
- National guidelines committees of professional societies
- Be a medical student Independent Study Project faculty member
- Apply for small grants meant for clinicians from Academy of Clinician Scholars (AOCS) or national societies

Advice for Clinical Series Junior Faculty

- **University and Public Service**

- Volunteer for Medical School committees such as Admissions Committee – it is a fun experience
- Hospital/Medical staff committees are good ways to meet clinical faculty from other departments
 - Credentials, Risk Management, Peer Review, etc
- Be involved in GI division committees (ie fellow interviews, quality committee, etc)
- Participate in national society committees (AGA, ASGE, ACG, AASLD, etc)

Keep track of all your activities in real time

- Consider adding to your personal CV the following sections
 - Talks given (section meeting, grand rounds, students, DDW)
 - Students taught (name and year)
 - Committees (including fellowship applicants)
 - Abstracts published (in clinical series these may count even if not published)
 - Clinical duties (ie #weeks inpatient or on call, special clinics, etc)
 - Volunteer medical work
- Having these lists will make creating your BioBib for academic promotions much easier

Thank you

Series Criteria

Policy on Appraisals and Advancement

Series Criteria and Policy on Appraisals and Advancement

Policy on Appraisals	Page 3
Policy on Above Scale/Further Above Scale	Page 4
Policy on Accelerated Advancement	Page 5
Policy on Advancement to Professor, Steps VI- IX	Page 7
Adjunct Series Criteria	Page 8
HS Clinical Series Criteria	Page 9
HS Clinical – Letter from Chair – Scholarly Activity	Page 11
Clinical X Series Criteria	Page 14
FTE (Ladder) Rank & In Residence Series Criteria	Page 17
Research Scientist Series Criteria	Page 18

POLICY ON APPRAISALS

An Assistant-rank appointee must receive an appraisal, which is a formal evaluation of his or her achievements and progress toward promotion. The appraisal also identifies appointees whose records of performance and achievement are below the level of excellence expected for faculty.

An appraisal should provide an appointee with a careful, considered, analytical evaluation of his or her performance to date in the areas of research and creative work, teaching, professional competence and activity, and University and public service, as well as a candid assessment of his or her potential for promotion, based upon the evidence.

Department Consideration

The following factors should be evaluated when conducting an appraisal:

- An appointee's published research and other completed creative activity and his or her potential for continued research and creative activity.
- At least one type of student or faculty evaluation each for undergraduate and graduate-level instruction, and other evidence of teaching effectiveness, such as course syllabi, reading lists, and statements of course goals.
- An appointee's departmental, University and community service contributions.
- Expertise and achievement in clinical activities

The possible appraisal ratings are:

FAVORABLE Indicates that promotion is likely, contingent on maintaining the current trajectory of excellence and on appropriate external validation.

**FAVORABLE WITH
RESERVATIONS** Indicates that promotion is likely, if identified weaknesses or imbalances in the record are corrected.

PROBLEMATIC Indicates that promotion is possible if substantial deficiencies in the present record are remedied.

UNFAVORABLE Indicates that substantial deficiencies are present; promotion is unlikely.

**POLICY ON
ABOVE SCALE**

Advancement to an above-scale salary is reserved for scholars and teachers of the highest distinction, whose work has been internationally recognized and acclaimed and whose teaching performance is excellent. Except in rare and compelling cases, advancement will not occur after less than four years at Step IX. Moreover, mere length of service and continued good performance at Step IX are not a justification for further salary advancement. There must be demonstration of additional merit and distinction beyond the performance on which advancement to Step IX was based. The file should reflect a critical career review.

(The honorary title of Distinguished Professor will be conferred on those who advance to Above Scale in the Professor [Ladder-Rank] Series.)

FURTHER ABOVE SCALE

A further merit increase in salary for a person already serving at an above-scale salary level must be justified by new evidence of merit and distinction. Continued good service is not adequate justification. Intervals between such salary increases may be indefinite, and only in the most superior cases where there is strong and compelling evidence will increases at intervals shorter than four years be approved. The normal amount of salary increase for a person in the *above-scale* category is from 50% to 100% of the difference between the top two steps of the professorial salary scale.

**POLICY ON
ACCELERATED ADVANCEMENT**

Faculty who have demonstrated exceptional achievement in their respective academic series may be considered for an accelerated merit advancement or promotion. One-year accelerations are highly discouraged, unless there are extraordinary reasons for doing so (e.g., retention cases). The academic file and division recommendation must contain, with specificity and detail, documentation of accomplishments that exceed the criteria for regular academic advancement.

The PPM states, Accelerations should be used to reward extraordinary contributions in research, teaching, or scholarly and educational contributions, or for recalibration purposes at career reviews. It should be noted that acceleration requires demonstration of unusual achievement and exceptional promise of continued growth. The degree of achievement and promise required for acceleration is greater than that expected for normal advancement; the character of achievement and promise required for acceleration is identical to that expected for normal advancement...Chairs must specifically describe the impact on the discipline of the work that is being used as a justification for acceleration...An acceleration proposal based primarily on the quality and quantity of contributions other than research must contain documentation and evidence of these extraordinary achievements.

For Professors at Step IX and Above Scale, there must be rare and compelling reasons for accelerated advancement to or as Professor, Above Scale, and departments must address the rare and compelling reasons when proposing such advancement. Further, acceleration cases should not be proposed if there is a weakness in the appointee's performance in any area of responsibility specified in the review criteria.

In keeping with DOMCAP's criteria for each series, the following will be taken into consideration:

I. Ladder-Rank and In Residence Series:

- a. Earlier than usual appointment to a prestigious society, an NIH Study Section, a governance role in a national society and/or editorial board, or scientific awards.
- b. Exceptional scholarly creativity documented by quality and/or quantity of research publications, research grant and/or scientific awards.
- c. Unique contributions to either national or local organizations in the areas of research, teaching, or University service.

II. Clinical Series:

- a. Evidence of exceptional accomplishments in either teaching, clinical activities or University service.
- b. Earlier than usual appointment to clinical/research societies, governance appointments in these organizations, appointment to editorial boards, etc.
- c. Unique contributions to the mission of the Department and/or SOM in either teaching, patient care, or administration.

III. Adjunct Series:

- a. If the major focus is research, the guidelines would be similar to the ladder-rank criteria, and based on exceptional research accomplishments.
- b. If the major focus is administration, evidence of new and novel administrative creativity, effectiveness, etc. must be demonstrated.

IV. Clinical-X Series:

- a. Exceptional achievements either as a biomedical educator, clinical investigator, or in University service.

POLICY ON

ADVANCEMENT TO PROFESSOR, STEP VI, VII, VIII AND IX

Taken from PPM 230-28

For the Full rank, the normal period of service at step is three years in each of the first four steps. Service at Step V may be of indefinite duration. Advancement to Step VI usually will not occur after less than three years of service at Step V and will be granted on evidence of highly distinguished scholarship, highly meritorious service, and evidence of excellent University teaching.

In interpreting these criteria, reviewers should require evidence of excellence and high merit in original scholarship or creative achievement, teaching, and service; and, in addition, great distinction, recognized nationally or internationally, in scholarly or creative achievement or in teaching.

Advancement to Professor, Step VII, Step VIII usually will not occur after less than three years of service at the previous step, and will only be granted on evidence of continuing achievement at the level required for advancement to Step VI. Except in rare and compelling cases, advancement will not occur after less than four years at Step IX.

CRITERIA FOR APPOINTMENT/PROMOTION IN ADJUNCT SERIES

NOTE: The Adjunct series can accommodate a variable distribution of activities. It should be noted that teaching is an essential component of this series. Teaching with either research or professional (i.e. clinical) activity may be combined. In either case, teaching the equivalent of one course per year is an absolute requirement for this series (bench teaching alone does not qualify). Therefore, the manner in which teaching is fulfilled should be explicitly stated and fully documented.

Rank	Research (or Creative Activity)	Teaching	Professional Competence and Activity	University Service
Asst Prof	<ul style="list-style-type: none"> Some peer-reviewed publications or creative output. 	<ul style="list-style-type: none"> Defined role in clinic, laboratory, or classroom teaching equivalent to at least one course per year. May provide significant contribution to the graduate or undergraduate instructional program. The basis for this equivalence should be carefully documented. 	<ul style="list-style-type: none"> As defined. 	<ul style="list-style-type: none"> Expected to emerge in service consistent with assignments.
Asst Prof 4th year and 6th year Appraisals	<ul style="list-style-type: none"> Established focus, ongoing productivity, grant support and emerging identity. 	<ul style="list-style-type: none"> Continued activities as above. Positive evaluations. Innovations and electives encouraged. 	<ul style="list-style-type: none"> Documentation of clinical excellence. Program leadership helpful. 	<ul style="list-style-type: none"> Significant service consistent with assignment.
Assoc Prof	<ul style="list-style-type: none"> Documented evidence of independent contributions, either as a PI or in a pivotal role within a larger research unit. Important established focus. Substantial body of publications or creative support. National reputation with strong external letters of support when there is substantial research effort. Grant support when substantial research effort, may be collaborative. 	<ul style="list-style-type: none"> Continued activities as above. Positive recent evaluations. Innovations and electives encouraged. External reputation. 	<ul style="list-style-type: none"> Recognized clinical excellence and focus. Program leadership helpful. 	<ul style="list-style-type: none"> Continued service with increasing external recognition.
Professor I	<ul style="list-style-type: none"> Same as Assoc Prof I. Continued productivity. Leadership role. International reputation when there is substantial research effort. 	<ul style="list-style-type: none"> Same as Assoc Prof I. Well-defined and documented teaching activity. Increased expectation of invited presentations on national/international basis. 	<ul style="list-style-type: none"> Continued clinical excellence and focus as documented by external letters. Innovations encouraged. Leadership responsibilities expected. 	<ul style="list-style-type: none"> Continued strong service with national recognition.
Professor VI	<ul style="list-style-type: none"> As for Professor, with clear evidence of continued excellence and momentum. 	<ul style="list-style-type: none"> Continued excellence in teaching. 	<ul style="list-style-type: none"> National and/or international recognition of excellence. 	<ul style="list-style-type: none"> Continued strong service with national/international recognition.

07/14/03

BASIC APPOINTMENT/PROMOTION CRITERIA FOR: CLINICAL SERIES

RANK AND STEP	CLINICAL AND PROFESSIONAL ACTIVITIES	TEACHING	RESEARCH, PUBLICATIONS, CREATIVE & SCHOLARLY ACTIVITIES	UNIVERSITY AND PUBLIC SERVICE
ASSISTANT PROFESSOR, STEP I	Excellence in basic clinical skills as demonstrated by letters from directors of training programs and colleagues.	Participation in teaching of housestaff and students through their clinical activities and other teaching as defined by Division Head.	Scholarly activity plan required. May include mentored training activities with clear plan to complete scholarly products. Division Head should approve. Defined by candidate and Division Head based on one or more activities listed in clinical scholarly activities document. Please see letter of the Chair, dated 10-06-03	Not required for appointment.
ASSISTANT PROFESSOR, 4TH YEAR APPRAISAL	Established clinical focus, active practice or contractual clinical activity, established excellence in clinical care delivery.	Documented effectiveness in teaching of housestaff and students through clinical activities and other teaching as defined by Division Head.	Scholarly activity required. May include participation in collaborative research; publication of case reports or reviews; presentations at local and national meetings (including CME); or development of innovative clinical procedures, teaching methods or clinical curricula. May include evidence of independent or collaborative research, creative or scholarly activities e.g. generation of data on the performance, goals, teaching contributions, or other elements of academic medicine; publication of case reports or reviews; presentations at local and national meetings (including CME); mentoring ISP efforts that are subsequently presented locally or nationally; development of innovative clinical procedures, teaching methods or clinical curricula or guidelines for patient care..	Evidence of significant University service.
ASSOCIATE PROFESSOR, STEP I	Independent clinical excellence and focus, sustaining clinical practice or contractual clinical support or other support, regional recognition for	Excellence in teaching of housestaff and students in above activities as documented in letters and teaching evaluations.	Scholarly activity required, with demonstrated independent contribution to effort. As above for Assistant Professor with	Evidence of participation in University service, or participation in local or national organizations.

	clinical excellence as defined in letters from peers. Be certified by one of the medical specialty boards, or demonstrate equivalent achievement and recognition.		documented continued productivity.	
PROFESSOR, STEP I	As above for Associate Professor with continued momentum.	As above for Associate Professor with substantial contribution to the clinical teaching program.	Scholarly activity is required. As above for Associate Professor.	Evidence of active University service, and/or leadership in local or national organizations.
PROFESSOR, STEP VI	As above for Professor with clear evidence of excellence and momentum.	As above for Professor with clear evidence of excellence and momentum.	Scholarly activity is required. As above for Professor with clear evidence of excellence and momentum.	As above for Professor with clear evidence of excellence and momentum.

June 2007

I write to update you on a new policy being developed within the Department of Medicine that will affect our colleagues in the Clinical series of faculty appointments. For those of you who have attended the DoM faculty meetings in either June or September, or the DoM promotion meetings in September or October you will already be familiar with the concept that for promotion in the series the DoM will expect evidence of scholarly activities in the coming years. I have also invited all of our new and junior faculty to visit with me, and have discussed this notion with those faculty with whom I have met. This policy, which continues in its developmental stage, has grown out of the need for the faculty of the UCSD DoM to exert a broader impact on our patients, learners, community and Medicine in general. Here is a draft, to stimulate further discussion. I, or your Division Heads, would be very interested in chatting further with any faculty member who would like to provide constructive input into the process, or provide additional examples of scholarly activity within the clinical setting.

A Proposal for Requiring Scholarly Activities For Clinical Track Faculty In The Department Of Medicine

It is abundantly clear that the three missions for any successful school of medicine are excellence in research, effective and inspired teaching, and delivery of outstanding clinical care. To address these goals, the University of California has developed multiple tracks for our faculty, and has set corresponding expectations for advancement in each series. This policy statement is designed to provide a clear definition of expectations for these three vital missions for faculty members in the Clinical Track in the Department of Medicine at UCSD. The policies and procedures manual of UCSD indicates that faculty in the clinical series are judged on their clinical and teaching contributions, and that scholarship is highly recommended for success in this series. In a series of meetings with faculty in the Department of Medicine, the Chair has proposed, and the faculty has seconded the notion that some form of scholarship should be *required* for successful advancement for Clinical Series faculty in the Department of Medicine. Providing excellent clinical care, and teaching to our medical students and house officers is indeed a laudatory goal, and expectations of excellence in both realms is a long-standing tradition in our Department. However, the mission of the Department of Medicine is to also advance our ability to impact not only our current

patients and learners, but to provide an expanded influence over our regional and national colleagues and the patients and learners of the future. Therefore, the following examples (by no means an exclusive list) can serve to guide decisions on faculty advancement for members of the Clinical Series in the Department of Medicine:

1. Education

- a. Evidence of innovative approaches to teaching that can be quantified
 - i. Development of new courses for medical students, residents, fellows and/or preparation of syllabi for existing courses in which the faculty member already participates
 - ii. Development of instructional tools for teaching patients e.g. newsletter, disease management handouts
 - iii. Development of unique approaches for patient education e.g. group teaching in a clinic setting
- b. Evidence of participation in teaching in advanced settings that are deemed of high quality
 - i. Lectures in medical grand rounds, morbidity and mortality conferences, and other structured venues at UCSD and at non-UCSD sites
 - ii. Lectures in community settings to physicians and allied personnel
- c. Participation in state or national clinical or educational policy or testing boards

2. Research

- a. Independent research evidenced by investigator initiated research studies
- b. Generating data on the performance, goals, teaching contributions, or other elements of academic medicine
- c. Mentoring and participation in Independent Study Project (ISP) resulting in presentation of the gathered data in a regional or national setting
- d. Collaborative research
 - i. Participation as co-investigator in patient oriented research initiated by another investigator
 - ii. Participation as investigator in clinical research sponsored by outside agency e.g. industry sponsored clinical trial
 - iii. Participation in case studies resulting in publication(s)

3. Clinical Activities

- a. Development and institution of evidence-based patient safety algorithms
- b. Development and institution of evidence-based patient care algorithms
- c. Institution and study of systems designed to improve clinical care

4. Publications

- a. Book chapters, review articles, letters to editor
- b. Reviews of articles that are published e.g. ACP Journal club
- c. Newsletters
- d. Community publications e.g. newspaper articles

In short, scholarship can be defined very broadly, but perhaps a good general definition includes activities that provide an impact on patient care, teaching or our understanding of medicine that lasts beyond the moment, that is, a document that can be disseminated to others outside of a single physician/patient or teacher/learner encounter.

As this is a new policy, the requirement for scholarly activity in the clinical series will be phased in gradually. The policy will continue to be discussed widely at Department of Medicine meetings and in mailings to the entire faculty. The first round of merit advancements in which faculty members will be expected to fulfill the scholarship requirement will be for those advancements that will take effect July 1, 2006 and at that time, we will only require evidence of participation in activities that are likely to yield scholarly productivity. The following year, advancement effective July 1, 2007, will be the first year at which clear evidence of scholarly productivity will be required for successful merit advancement/promotion. Obviously, the degree of scholarly activity will need to fit the level on the academic ladder, with Professors expected to provide evidence of mature scholarship, and Assistant Professors evidence of beginning to obtain the skill sets and opportunities to participate in scholarly activities.

CRITERIA FOR ADVANCEMENT IN THE PROFESSOR OF CLINICAL X SERIES

	Clinical and Professional Activity	Scholarly Activity	Teaching	Service
Assistant Professor Step I (Initial Appointment)	<p>Excellence in basic clinical skills: completion of recognized clinical training program; letters from program directors, colleagues.</p> <p>Regional or national recognition.</p>	<p>Potential for excellent scholarly activity with impact beyond our institution, to be documented by letters and/or research or review publications. Roles in collaborative research may be an important consideration, and may be somewhat flexible. Expressed interest in pursuing scholarly activity as a significant component of the academic position, coupled with evidence to support the promise for accomplishment. Evidence may be in the form of recommendation from the Departmental Chair, Division Chief or Program or Fellowship Director, publications to include (but not limited to) case reports, book chapters, prior collaboration with established researchers, and greater weight being given to original research, or completed special training as evidenced by MPH, MBA, PhD.</p>	<p>Excellent teaching abilities documented by letters from program directors and, if available, med student/housestaff evaluations and invitations to lecture.</p> <p>Local recognition.</p>	<p>No prior university service expected at time of appointment.</p>
Assistant Professor 4th Year Appraisal (in some cases, 6th year appraisal)	<p>Recognized clinical excellence, not precluding some limited mentoring if appropriate to developing new skills. UCSD clinical faculty and regional peer referrals, and development of unique clinical programs should be documented in the file.</p> <p>Specialty/subspecialty board certification, as appropriate.</p>	<p>Some scholarly activity is expected, though it may be in the form of clinical innovation rather than traditional research – with demonstrable regional or national dissemination and impact & recognition. Roles in collaborative research may be an important consideration. Evidence of accomplishment or a trajectory that predicts accomplishment in the scholarly arena to include one or more of the following: published original manuscripts, published or presented abstracts that are likely to lead to complete original manuscripts, book chapters, review articles, , participation in independent or collaborative research, application or securing extramural funding, appointment on National Society committees, with lesser consideration given to case reports</p>	<p>Excellent teaching- may be clinical and/or classroom or CME/invited presentations documented by student, housestaff and CME evaluations. Innovative programs, new courses or techniques may deserve special consideration. Teaching/ training programs directed at peers, including informal peer teaching.</p> <p>Local recognition.</p>	<p>Participation on University and community service committees/boards is expected. Actual extent of this will depend on individual's clinical activities. Invitation or election to regional or national committees, journal review boards, etc. is expected.</p>
Associate Professor of Clinical X	<p>Independent clinical excellence and focus, maintaining clinical practice or contractual clinical support or other support, regional recognition for clinical excellence documented e.g., by referrals. Letters from UCSD faculty and regional</p>	<p>Demonstrated and sustained excellence in contributions to knowledge and/or practice in chosen clinical field as indicated by dissemination of a body of publications or teaching material or programs used in other institutions, or the introduction of documented improvements/innovations that advance the</p>	<p>Teaching excellence in clinical care delivery or consultation services or precepting medical students, including: lectures, grand rounds, M&M, primary care or sub-specialty rounds or laboratory instruction in SOM core courses.</p>	<p>Membership on care delivery committees at UCSDMC, VAMC, DOM or SOM, or membership in national and local organizations or committees or boards, or review of manuscripts, or</p>

	<p>community physicians. Documentation of the amount and quality of clinical care activities.</p> <p>Recognition at the national level is desirable, but not required.</p>	<p>educational mission both within and beyond our institution. Textbook chapters or similar publications, or other contributions to the professional literature (including video and electronic media), or development and institution of new or improved methods of teaching, or principal or co-investigator status on collaborative or joint research program. Independent letters from regional authorities. Evidence of accomplishment in the scholarly arena as evidenced by two or more of the following: Publication of two or more original manuscripts, at least one of which is deemed to have added in a substantial manner to the knowledge base in the specialty, AND publication of one or more book chapters in leading text in the specialty or subspecialty, appointment of leadership role in specialty or subspecialty society at least at the task force or committee level, securing substantial extramural funding, either as a PI or co-PI to support a clearly defined area of clinical, educational, or basic science research, establishment of an educational module that has gained acceptance beyond the local institution.</p>	<p>Teaching evaluations from students, housestaff, peers, outside sources, external letters, etc.</p> <p>Regional recognition.</p>	<p>participation in development of organizational position papers or consensus statements. Committee rosters and external letters.</p>
<p>Professor of Clinical X</p>	<p>Independent clinical excellence and focus, maintaining clinical practice or contractual clinical support or other support, national recognition for clinical excellence documented by referrals, with continued momentum. Letters from UCSD faculty and San Diego community physicians, and national physicians or authorities.</p> <p>Activities at the international level are desirable, but not required.</p>	<p>National and continued impact and recognition for sustained excellence in scholarly contributions to knowledge and/or practice in chosen clinical field as indicated by dissemination of a body of research or other scholarly publications, or teaching material or programs used in other institutions, or other documented improvements/innovations. Textbook chapter or similar publications, or other contributions to the professional literature (including video and electronic media), or development of new or improved methods of teaching, or co-investigator status on clinical research studies. Independent letters from national or international authorities. Evidence of continued accomplishment in the scholarly arena as delineated under criteria for Associate Professor but with the added requirement for national recognition for the area of achievement. PI with substantial extramural support for a line of independent investigation in the arena of</p>	<p>Teaching excellence in clinical care delivery or consultation services or precepting medical students, including lectures, grand rounds, M&M, primary care or sub-specialty rounds or laboratory instruction in SOM core courses. Teaching evaluations from students, housestaff, peers, outside sources, external letters, etc.</p> <p>Recognition at the institutional and national level.</p>	<p>Leadership of care delivery committees at UCSDMC, VAMC, DOM or SOM, or national and local organizations or committees or boards, or review of manuscripts, or development of organizational position papers or consensus statements. Committee rosters and external letters.</p>

		clinical, basic science or educational research. Appointment at least at the level of editorial board of a peer reviewed medical journal or leadership at the level of President, President elect or Vice President of a national or regional (i.e California or greater) specialty or subspecialty organization.		
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BASIC APPOINTMENT/PROMOTION CRITERIA FOR: FTE (LADDER) RANK & IN RESIDENCE SERIES

RANK & STEP	RESEARCH PUBLICATIONS CREATIVE & SCHOLARLY ACTIVITIES	TEACHING	CLINICAL AND PROFESSIONAL ACTIVITIES	UNIVERSITY & PUBLIC SERVICE
ASSISTANT PROFESSOR STEP I	<ul style="list-style-type: none"> • Some publications/in press original research, 1st authored and peer-reviewed • Independence and grant support not required • Supporting letters positive 	<ul style="list-style-type: none"> • A defined teaching role in SOM courses (executed with positive evaluations if already performed) 	<ul style="list-style-type: none"> • As agreed by Division Head and Department Chair, (executed with positive evaluations if already clinically active) 	<ul style="list-style-type: none"> • Not required at time of appointment.
ASSISTANT PROFESSOR 4TH YEAR APPRAISAL	<ul style="list-style-type: none"> • Established research focus • Active research grant support • Evidence of productivity • Clear evidence of moving towards independence 	<ul style="list-style-type: none"> • An established well-defined SOM course teaching role • Positive recent evaluations 	<ul style="list-style-type: none"> • As agreed to by Division Head and Department Chair • Positive recent evaluations 	<ul style="list-style-type: none"> • Evidence of significant service. • Evidence of emerging national reputation by societal/grant review service desirable.
ASSOCIATE PROFESSOR STEP I	<ul style="list-style-type: none"> • Important, established research focus • Continued productivity • Independence • Active research support • National reputation, strong letters 	<ul style="list-style-type: none"> • Well-defined SOM course teaching role • Strong recent evaluations • Some training of students/fellows in research 	<ul style="list-style-type: none"> • As agreed to by Division Head and Department Chair • Strong recent evaluations 	<ul style="list-style-type: none"> • Evidence of significant service discharged well • Societal/journal/grant/ review/service as evidence of national reputation
PROFESSOR STEP I	<ul style="list-style-type: none"> • As for Associate Professor -plus- • International reputation • Leadership role in research 	<ul style="list-style-type: none"> • As above, with teaching role substantial • Past history and present training of students/ fellows in research 	<ul style="list-style-type: none"> • As for Associate Professor 	<ul style="list-style-type: none"> • As for Associate Professor
PROFESSOR STEP VI	<ul style="list-style-type: none"> • As for Professor, with clear evidence of excellence and momentum 	<ul style="list-style-type: none"> • As for Professor, with clear evidence of excellence 	<ul style="list-style-type: none"> • As for Professor with clear evidence of excellence 	<ul style="list-style-type: none"> • As above, serving with distinction

May 1993

Department of Medicine
Basic Appointment/Promotion Criteria
Research Scientist Series

RANK & STEP	RESEARCH PUBLICATIONS CREATIVE & SCHOLARLY ACTIVITIES	UNIVERSITY & PUBLIC SERVICE
ASSISTANT RESEARCH SCIENTIST STEP I	<ul style="list-style-type: none"> • Published/in press original research as key author in peer-reviewed journals. • Grant support as PI or Co-PI. Or • Clearly defined leadership role in a large center or program project requiring relatively independent effort and/or expertise. • Supporting letters. 	<ul style="list-style-type: none"> • Not required for initial appointment.
ASSISTANT RESEARCH SCIENTIST 4TH YEAR APPRAISAL	<ul style="list-style-type: none"> • Developing research focus. • Productivity as evidenced by high quality of publications. • Primary role in work as evidenced by key-authorship publications in peer-reviewed journals. • Research support as evidenced by PI, Co-PI, or leadership role in a large center or program project requiring independent effort and/or expertise. 	<ul style="list-style-type: none"> • Evidence of a plan for engaging in University and/or public service (such as participation on University committees and/or involvement in national organizations beyond simple membership). Actual participation will be required to support promotion to the associate rank.
ASSOCIATE RESEARCH SCIENTIST STEP I	<ul style="list-style-type: none"> • Established research focus. • Continued productivity. • Independence as evidenced by a series of key-authorship publications in peer-reviewed journals. • Research support as PI, Co-PI, or leadership role in a large center or program project requiring independent effort and/or expertise. • National reputation and independence as evidenced by strong outside letters. 	<ul style="list-style-type: none"> • Evidence of significant participation in University service and/or participation in national organizations is required.
RESEARCH SCIENTIST STEP I	<ul style="list-style-type: none"> • As for Associate level. -plus- • International reputation. • Continued leadership role in research. 	<ul style="list-style-type: none"> • Evidence of active University service and/or leadership roles in national organizations is required.

December 2005