Revised June 25, 2010

## I. INTRODUCTION

In this report we have attempted to create a promotion system that recognizes the diversity of faculty and goals in the Department of Medicine, yet evaluates and rewards excellence in scholarship by establishing relative parity in the promotion process among researchers, educators, and clinicians. By faculty diversity, we include diversity of interests, expertise, gender, and ethnicity/race, recognizing that it is only through the support of such diversity that we can maintain academic and clinical excellence in the department. These recommendations also are meant to serve as guidelines for career development and for mentoring of junior faculty by section chiefs.

For the majority of its faculty, the Department of Medicine recommends unmodified titles in four specific tracks: Clinician Scholar, Clinician Scientist, Basic Scientist, and Scientist Educator. The tracks are to be used for administrative purposes in order to assist in career guidance, to help establish clear expectations for faculty performance, and to provide criteria and guidelines that can be used to assist in evaluating faculty for promotion. The promotion system is designed to assist in career development and, therefore, movement between tracks is possible as individual's careers evolve; however, changing tracks will require some forethought and planning in that criteria for promotion in each track are significantly different from one another and are meant to pertain to quite different career paths. The track designation will be removed at the full Professor level. Several titles with prefixes are also recommended for appropriate candidates.

General criteria for promotion at each level are similar among tracks in terms of scholarship, productivity, mentorship and recognition of achievement and excellence within and outside the institution, although the specific definitions of scholarly activities and productivity differ among tracks (see definition of tracks for further discussion of scholarly activities). At each level, the Appointments and Promotions Committee will evaluate achievements in critical areas appropriate for the track, including assessments by students, trainees, and patients, as well as assessment of scholarly accomplishments by peers both within and outside the institution.

## II. TITLES AND BASIC REQUIREMENTS

**Instructor**: This rank is the primary entry level position for those who have recently completed residency or fellowship training but have not yet achieved independence in a specific area. This position is to be used for new faculty who have not yet focused career directions nor demonstrated productivity in scholarly activities. Individuals at the instructor level are often in positions of advanced training prior to leaving the institution or moving to the assistant professor rank.

<u>Assistant Professor</u>: This rank generally requires completion of all training with evidence of prior scholarly activity, clear definition of career goals, and expectation of moving up the career ladder via one of the specific tracks. Particular attention should be paid to developing areas of scholarly excellence and individual identity during this important career-defining phase.

<u>Associate Professor</u>: This rank generally requires at least three to six years as an assistant professor, scholarly achievements appropriate for a specific track, and recognition of these achievements at local, regional and national levels. Although the relative importance of these achievements vary by track, the following criteria are evaluated in considering candidates for promotion in this rank: the quality, quantity, and trajectory of scholarship, extramural funding, clinical and teaching excellence, institutional service, record of mentorship, success at achieving goals established jointly by the individual and department, letters of reference, selection as a speaker at regional and national meetings, and participation in regional

and national committees and programs. Creation of new programs, developing an area of individual identity, and emerging intellectual leadership in a clinical or academic area are also important.

**Professor**: This rank generally requires at least five years as an associate professor and continued scholarly productivity, with recognition of accomplishments at regional, national, and international levels. Evidence of leadership within and outside the institution and recognition as an authority in one's specific area of interest are essential. Achievement in the areas described above at the Associate Professor rank is also used to evaluate candidates for promotion to Professor. Successful candidates for promotion to Professor will require demonstrated national leadership in research and scholarship, and where appropriate, clinical and teaching excellence. Accomplishments should be documented by supportive letters from peers and membership in national committees, study sections, and advisory groups. In addition, recognition by peers through election to societies, awards, and invited lectures is also important.

## III. TRACKS

Determination of the appropriate track for a faculty member depends in large part on the amount of time devoted to various activities and to the primary areas of faculty interest and identity. Movement between tracks is possible in order to support evolving faculty careers; however, changing tracks represents a major career change and requires significant discussion and guidance with the section chief and department chair. In all tracks, successful mentoring as well as developing and/or communicating new knowledge is highly valued as is a reputation for achievement and for excellence both within and outside the institution.

<u>Clinician Scholar/Educator</u>: This track includes physicians or other health care professionals involved in clinical and educational activities, and scholarly activities that result in communication of knowledge relating to clinical practice and teaching through conventional peer reviewed publications, review articles, curriculum development, and electronic media. Scholarship in relation to teaching includes the development of new courses or curricula, course syllabi, lectures, videos, and other teaching materials. Scholarship in relation to clinical practice applications includes reports of organizational innovations and practice improvement, patient education materials and clinical reviews, and/or integration of clinical information through book chapters, editorials, oral presentations, and clinical reports. Another avenue of clinical scholarship involves advocacy to improve the health care system at the city, regional or national level.

<u>**Clinician Scientist</u>**: This track comprises physicians or other health care professionals who are involved in clinical and educational activities as well as in focused basic science, health services, or clinical research. Individuals who choose this track are expected to have the same general goals as listed for those in the basic science track, although scholarly activities similar to those listed for clinical scholars can also be taken into account for promotion.</u>

**Basic Scientist**: This track includes physician or Ph.D. scientists who devote virtually full time to scientific investigation. Emphasis is on developing a well-focused area of scientific innovation and identity, publication in peer-reviewed journals, acquisition of extramural funding by federal and private institutions, and the building of a research team. Responsibility for scientific training of others at pre- and postdoctoral levels, as well as participation in intra-departmental research programs and service, is of critical importance, as well.

<u>Scientist Educator</u>: This track includes scientists involved in educational activities, and scholarly activities that result in communication of knowledge. Scholarship in relation to teaching includes the development of new courses or curricula, course syllabi, lectures, videos, other teaching materials and scholarly reviews of scientific subjects.

### **IV. TITLES MODIFIED BY PREFIX** (criteria for promotion the same as above at each stage)

<u>**Clinical</u>**: Faculty members in this category are those with a primary focus on clinical care but who may also have educational, administrative, or scholarly activities and responsibilities. Promotion is based on the criteria established for the Clinician Scholar track, but with less emphasis on scholarship. Criteria for promotion include local reputation as a clinician and teacher, clinical productivity and quality, patient satisfaction, teaching activities and evaluations, and other contributions to the department and/or medical center. Emphasis on continued clinical excellence, teaching, and departmental "citizenship" will be of primary importance in the timing of promotions in this category.</u>

**<u>Research</u>**: Faculty in this category include primarily associate scientists with no responsibilities or expectations beyond those related to assigned projects under the aegis of a senior scientist. These faculty members depend on others for funding and for research direction. Promotion is to be judged by productivity in publications, participation in grants, and documentation of the importance of the faculty member as a technical and intellectual resource for the section, the department, and the medical school.

<u>Adjunct</u>: These scientists, physician-scientists or clinicians generally have a primary appointment at another institution and are affiliated with the department on a part-time basis with no primary obligations to or from the institution. Criteria for promotion are the same as for full-time faculty in the same track.

## V. ADDITIONAL RECOMMENDATIONS

### **Pre-review:**

All applications for appointment or promotion should be prepared by the section chief and faculty member after discussion with the Chair of Medicine. Appointment or promotion at the associate professor or professor level require pre-review by the Appointments and Promotion Committee. This entails submission of the candidate's BU-format CV, a covering letter from the section chief and a schedule of recommended internal and external reviewers. The letter from the section chief should specify the candidate's accomplishments according to the criteria for the various tracks noted above. Teaching accomplishments of clinician scholars should be detailed in a summative statement based on student and/or resident evaluations, teaching awards, etc. If the Chair and Appointments and Promotions Committee agree that the candidate should be considered further for promotion, letters of reference will be sought by the chair of the Appointments and Promotion Committee.

### **Promotion Committee:**

This nine-member committee is appointed by the Chair of Medicine and should consist of senior faculty with diverse interests that match those of the faculty. It should include a representative mix of M.D.s and Ph.D.s in each of the tracks. Approval at the assistant professor level requires a simple majority; at the associate professor level, a simple majority if the Department Chair concurs or 2/3 vote to override a contrary decision by the Chair; and at the full professor level, a simple majority if the Department Chair concurs or a 3/4 vote to override a contrary decision by the Chair.

### **Recognition of Promotion:**

Promotion should be recognized by an increase in base pay. In addition, promotions should be listed in the departmental newsletter and recognized at an annual departmental function.

## VI. PORTFOLIO FOR ACADEMIC ADVANCEMENT

Faculty in any track should establish and periodically update specific goals and objectives in conjunction with the section head or department chair as part of the annual review process. It is helpful to develop

specific plans for advancement by identifying methods, opportunities, potential barriers, means of evaluation, faculty development training, and timetables. Faculty members are advised to maintain a portfolio containing elements that would not be generally available to the Committee such as letters of commendation, new or innovative courses or electronic media, and evaluations of invited lectures at external meetings, courses or symposia. Other supporting materials such as exemplary manuscripts, teaching evaluations, clinical performance reports, and programmatic achievement should be included. This portfolio should be made available to and reviewed with the section chief who will prepare a promotion letter that provides the committee with detailed qualitative and quantitative summative information on the faculty member's research, clinical, educational, and administrative performance. Faculty members that would like assistance preparing a curriculum vitae in the Boston University format should contact Peter S. Cahn, PhD, Director of Faculty Development and Diversity (<u>peahn@bu.edu</u>).

Letters from references within the institution and from outside the institution that speak to individual identity and reputation will be used by the Appointments and Promotions Committee to evaluate faculty accomplishments in each area of primary importance. The following table shows the number of references required at each rank. External letters at the associate professor and professor level should be from referees that have not recently worked or collaborated closely with or mentored the applicant.

Rank	# Total	Minimum # from non BU faculty
Instructor	3	
Assistant Professor	3	
Associate Professor	6	3
Professor	6	4

The forms required are available at the Provost's website http://www.bumc.bu.edu/provost/ap/appforms/

The Section Chief's letter of support should describe the following for each faculty member:

- 1. With what area of scholarship is the faculty member identified? Briefly discuss his/her accomplishments in this area.
- 2. List one (assistant professor) or three (associate professor and professor) of the most important scholarly accomplishments (published papers, books, or other, as defined in the specific track system) and briefly discuss their significance.
- 3. Provide documentation of achievements in each of the following areas as appropriate for the faculty member's specific track (with some individuals, several aspects of each area may apply). The accomplishments listed under each category are examples of useful information.

#### Clinical skills and patient care accomplishments:

Evaluations by peers, patients, trainees, and/or supervisors, including awards Objective measures of clinical practice (quality measures) *Clinical:* 

Description of clinical activities New programs New techniques Quality improvement projects Integration of clinical activities with education and/or research Administrative responsibilities Health care advocacy or policy initiatives

### Mentorship

#### **Teaching accomplishments:**

Evaluation by peers, students, residents, research or clinical fellows, supervisors, including awards New courses New curricula Teaching materials (written, video, audio, computer, etc.) Visiting professorships Invited lectures Presentations at local, regional, national meetings; leadership in these organizations Leadership of educational programs Teaching in established programs: university, medical school, residency or fellowship program, other professional school, continuing medical education, community, other

Role model/mentor activities, with assessment by peers, trainees, and faculty at outside institutions

#### Scholarly accomplishments, including original research and integration of information:

Mentorship Published materials and/or presentations Original research Clinical reviews or observations Book chapters Editorials Computer software Teaching videos Book reviews Popular writings or lay press contributions World Wide Web sites/pages Patient education materials Clinical practice guidelines Editorial board membership Leadership in research societies, participation on study sections, etc. Extramural grants and funding

#### Administrative accomplishments:

Administrative portfolio

Institutional committees Administration of course/clerkship Administration of a clinical service/practice Administration of a training program Chairing task forces, sections, divisions, professional societies Service to community, health care advocacy organizations, institutions, or government