



POLICIES, PROCEDURES AND CRITERIA
FOR FACULTY PROMOTION¹

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1 BACKGROUND

The Policies, Procedures, and Criteria for Faculty Personnel Actions of The University at Buffalo (UB), The State University of New York (a section within the UB Faculty/Staff Handbook) describes the requirements and policies of appointment, promotion and tenure of faculty members throughout the University. During a review of this process, information was sought from distinguished public universities about the standards for promotion and tenure currently in effect for their respective disciplines. This information was received and reviewed by the Provost. It was then submitted to the President's Review Board and the President as a statement of the special elements of the School's process and as guidelines for the evaluation of faculty members for promotion and tenure. The criteria and guidelines in this document are based on the standards of Schools of Medicine at leading public universities.

This document is designed to supplement the University policies so that the medical school's diverse faculty ranks are treated objectively and equitably. A professional school's faculty is composed of full-time, geographical full-time (for definition see Article II, section 1.j, Policies of the Board of Trustees), clinical and/or research oriented, and volunteer faculty. Each group requires standards for appointment and promotion that acknowledge and reward their efforts on behalf of the missions of UB and its medical school.

2 INTRODUCTION

The traditional criteria for academic appointment and promotion are scholarship, teaching, and service. Determination of faculty rank based on a balanced evaluation of a faculty member's achievements and contributions in these areas is usually evident from the general University guidelines. However, the mission of a University's School of Medicine places special demands on its faculty in relationship to the profession and the community it serves. In particular, service activity extends beyond the usual participation on University committees, community life and professional organizations to encompass patient care and clinical research.

3 DEFINITIONS OF TRACK, CLASSIFICATION, AND RANK

The Jacobs School of Medicine and Biomedical Sciences (JSMBS) recognizes three tracks, as designated by SUNY, and six classifications of faculty as described below. Classifications are not faculty titles, but rather designate a faculty member's specialization within a track.

3.1 Academic Track (tenure)

Two classifications provide recognition for Academic Track status: Research Scholar and Clinical Scholar. Academic ranks under both classifications are recognized by SUNY titles of Assistant Professor, Associate Professor and Professor.

3.2 Qualified Academic Track (non-tenure)

Two classifications provide recognition for Qualified Track status: Research-Educator and Clinical-Educator. Academic ranks under both classifications are recognized either by SUNY titles of Research Assistant Professor, Research Associate Professor, and Research Professor, or Clinical Assistant Professor, Clinical Associate Professor, and Clinical Professor.

The JSMBS allows Clinical-Educators in the Non-Tenure Track to use the in-house titles of Assistant Professor, Associate Professor, and Professor for all professional communication and correspondence. Research-Educators may use the in-house titles Research Assistant Professor, Associate Professor, and Professor.

3.3 Volunteer Track

Two classifications provide recognition for the Volunteer Track status: Researcher and Clinician. Volunteer ranks under both classifications are recognized either by SUNY titles of Research Assistant Professor, Research Associate Professor, and Research Professor, or Clinical Assistant Professor, Clinical Associate Professor, and Clinical Professor.

Volunteer faculty are recognized by JSMBS in-house titles of Research Assistant Professor, Research Associate Professor, and Research Professor, or Clinical Assistant Professor, Clinical Associate Professor, and Clinical Professor. The JSMBS titles may be used for all professional communication and correspondence.

3.4 JSMBS Faculty Promotion Tracks, Classifications and Rank Titles (Flowchart)



n.b.. For purposes of clarity and consistency the Academic, Qualified Academic and Volunteer tracks will be referred to throughout the remainder of this document as “Tenure Track”, “Non-tenure Track”, and “Volunteer Track”, respectively.

4 APPOINTMENT TO FACULTY PROMOTION TRACKS

Faculty members, regardless of classification, receive an initial appointment to a specific faculty track; either Tenure, Non-tenure, or Volunteer. All appointees must be notified of their faculty track and the employment conditions that will be applied during future promotion considerations. In each case, it is the responsibility of the department Chair to provide new faculty, at the time of hire, with all relevant promotion documents pertaining to the expectations and conditions for attaining promotion.

5 PROMOTION DOSSIER PREPARATION AND PROMOTION PROCEDURES FOR JSBMS FACULTY

Dossiers are prepared by the Chair of the primary department. Faculty appointments at the Associate Professor level in any track must be accompanied by dossier consideration within 3 years following appointment (most commonly dossier review is completed within the 2nd year of appointment).

Appointments at the Professor level must be accompanied by dossier consideration/completion within 1 year of appointment.

5.1 Tenure-track Faculty

5.1.1 Procedure

Tenure Track dossiers are evaluated sequentially at the level of the department, School's Ad Hoc Committee on Promotions to Academic (Tenure) Ranks, Dean, President's Review Board (PRB), Provost and Presidential levels, and SUNY Chancellor for the granting of tenure.

It is expected that tenure review will be conducted and completed no later than the sixth year after the initial appointment. Candidates with exceptional qualifications may be proposed for promotion and continuing appointment before the sixth year.

There is no time limit on faculty review to ranks above associate professor.

5.1.2 Ad Hoc Committee for Promotion and Tenure

The composition of the Ad Hoc Committee for Promotion and Tenure to tenure track shall consist of 4 members from each School (8 members total) who hold rank equal to or higher than that of the candidate. A quorum will be satisfied by 6 voting members.

Ideally, the members should be drawn from each School's standing Committee for Promotion and Tenure. Selection of the members will be decided by the Dean or Dean's designee for each School. One member from the Committee will be selected by the Department Chair to present the case. The Chair of the Ad Hoc Committee will be a voting member selected by the Department Chair.

5.1.3 Dossier Evaluation

An advocate may be enlisted by the candidate and will include their written statement with the dossier, and appear before the ad hoc committee as described in the UB Faculty/Staff Handbook.

The vote outcome will be included in the dossier and reported to the Deans of both Schools, the Department Chair and to the candidate.

The report of the ad hoc Committee prepared by the Committee Chair will be shared with both Deans.

The Deans of both Schools will meet to discuss and decide on approval of the promotion/appointment. The Deans will decide between them which Dean will be responsible for preparing the Dean's Letter to be included in the dossier. The Letter will be co-signed by both of the cognizant Deans. Should the Deans not be able to agree on

approval, the decision will be considered a negative outcome and the promotion/appointment denied in one letter signed by both Deans.

Should the candidate choose to withdraw their dossier, both Deans must be so notified in writing.

5.2 Non-Tenure Track and Volunteer Faculty

5.2.1 Procedure

Non-tenure Track and Volunteer Track dossiers are evaluated sequentially at the Department, School's Ad Hoc Committee on Promotions to Clinical Ranks or the Ad Hoc Committee on Promotions to Research Ranks, and Dean's level.

There is no time limit on faculty review to ranks above assistant professor.

5.2.2 Ad Hoc Committee for Promotion to Non-Tenure Track

For promotion in a non-tenure track, an equal number of committee members from each School (no less than 3) who hold rank equal to or higher than that of the candidate will be selected as an Ad Hoc Committee. If possible these members should be drawn from the School's standing committee on Promotions to Qualified Track. A quorum will be satisfied by 4 voting members.

One member of the Ad Hoc Committee will be selected by the Department Chair to present the case. The Chair of the Ad Hoc Committee will be a voting member selected by the Department Chair.

5.2.3 Dossier Evaluation

An advocate may be enlisted and will include his or her written statement with the dossier, and appear before the ad hoc committee as described in the UB Faculty/Staff Handbook.

The committee's vote outcome will be reported to the cognizant Deans.

The Deans of both Schools will discuss the outcome, prior to making their recommendation. If there is disagreement by the Deans on the decision to promote, then this will be considered a negative outcome and the promotion/appointment denied. The cognizant Deans will prepare one letter to be co-signed by both of them and transmitted to the candidate and the Chair of the department.

Should the candidate choose to withdraw his or her dossier, both Deans must be so notified in writing.

5.3 Faculty with Secondary Qualified Appointments

Faculty with secondary qualified appointments in departments within the medical school will go through the promotions process in their primary department only. The rank title of the primary department appointment will not necessarily apply to qualified appointments in secondary departments for that faculty member. The Chair of the department where the faculty member holds their secondary appointment designates the rank of that appointment.

5.4 Faculty Appointed to Jointly Operated Departments

Certain departments at the University at Buffalo are co-administered by two different Schools. Faculty hired into those departments have unique requirements in meeting the expectations of two Schools.

The appointment and promotion process begins in the respective department. As a jointly administered department, everyone involved in the process must be sensitive to the different emphasis placed on scholars whose profile is more or less similar to others in Engineering, Medicine, or Arts and Sciences. These differences should be reflected in the letters of evaluation and those provided by the department Chair and advocate.

It is the intention of this policy to adopt a consistent process that reflects the best practices drawn from the Schools involved while maintaining a coherent whole that is supportive of the candidate. Such a process must include agreed-upon language that is to be used to solicit letters of evaluation, and in directions to the departments. It is also incumbent on the departments and the Schools to develop a single set of mentoring materials.

6 AREAS OF ACHIEVEMENT CONSIDERED DURING PROMOTION REVIEW

Scholarship, teaching, and service are the three domains evaluated in consideration of promotion. The UB JSMBS values all three domains as crucial to the vitality and strength of the School. The relative importance of each domain in the promotion process varies depending on the track being considered for a given faculty member.

6.1 Scholarship

Scholarship in a major research university professional school of medicine takes three related forms: 1. Original research; 2. Integration and synthesis of existing knowledge; and 3. Application of research or knowledge to consequential problems.

6.1.1 Original Research

Original Research is defined as systematic investigation that leads to the discovery of new knowledge and/or the elaboration of a field of knowledge. The research may be empirical, theoretical and conceptually developmental, and/or applied. It should result in appropriate publication and dissemination that serves to demonstrate its importance, validation and acceptance by peers.

Within UB's basic science departments, research is published, evaluated by peer review, and recognized for quality and quantity consistent with established standards for scholarship in scientific disciplines. Within clinical departments, research by faculty members may follow a form similar to research conducted by basic science departments, or the research activity may emphasize clinical studies that involve patients, original case reports, and community and practice based research.

In clinical disciplines, scholarly activity may include evaluations of health care processes, social health determinants, or community-level factors that influence individual or public health, including efforts to address population health or health care disparities. The published scholarship is subject to comparable review as research performed by basic science faculty, as described below.

Non-tenure Track faculty members will typically publish less frequently and their research will generally not lead to the same degree of national recognition or external funding as those on the tenure track.

Volunteer Track faculty will typically publish less and more typically in a collaborative role, although they will be encouraged to earn national recognition and external funding.

Specific research activities that should be documented and evaluated in a candidate's dossier include:

6.1.1.1 Original Contributions

Publications are evaluated based upon the quality of the journal they appear in (i.e., premier peer-reviewed journals), the number and types of publications that evidence scholarship, and the quality of the studies in terms of impact on the field. In the CV, each publication should be accompanied by a brief description of the candidate's 'role' or contribution to the publication (e.g., supervised and designed experiments, provided reagents or data analysis, etc.).

For community and practice research, the complexity of the partnerships required to do quality work must be considered.

Where research publications reflect the ‘team’ efforts of several or many individuals, the contributions/role of the candidate must be specifically identified and evaluated. The role of community partners should also be reflected in instances where community partners are co-authors.

6.1.1.2 Abstracts and Presentations

Presentation of original research data at scientific meetings is evidenced in the bibliography of the candidate by the "Abstracts" section. Abstracts are an indication of the activity of the candidate in accepted scientific forums for dissemination of new observations. When compared with the original publications section, it gives a sense of the "follow through" of the candidate.

In addition, selection for oral presentation at national or international meetings may signify the quality and impact of the research on the field.

6.1.1.3 Citation Indices

Citation indices, such as h-index, or journal ranking metrics (e.g., Impact Factor) are complex and depend on factors outside of the importance of the scientific work. These indices may be provided in the CV, the Chair’s letter, or other documentation when proposing a candidate’s academic appointment or promotion.

6.1.1.4 Funded Research

Extramural funding from any source evidences a candidate’s ability to initiate an externally valued research program and provides a measure of competitiveness and significance of the investigator’s research. Funding through competition at a national level should carry more weight than funding through competition at local levels, but all levels should be considered.

Co-investigator status in research programs may be a recognizable measure of responsibility and activity. Similarly, the role of an investigator on a grant awarded to a community partner must be a recognizable measure of responsibility and activity. The specific contribution (i.e., title and brief description of the candidate’s role in the project) and percent effort and level of funding of the candidate to any project must be documented.

6.1.1.5 Non-Funded Research

Candidates for promotion may be actively involved in research projects that are not currently supported or that are "pilot studies" using available supplies and equipment. The dossier must cite previous funding and the potential for securing funds in the future.

6.1.1.6 Pending Grant Applications

Such applications provide information on the enthusiasm and perseverance of the candidate in the search for support of research projects. Priority scores of recent applications that have been evaluated should be included in the dossier.

6.1.1.7 Study Sections and Editorial Boards

Membership on NIH Study Sections, NSF Committees, study sections of other national professional associations, editorial boards of professional journals, and membership on site visit teams demonstrate acceptance and recognition of the candidate as an expert by peer groups.

6.1.1.8 Integration and Synthesis of Existing Knowledge

Integration and synthesis are the products of analyzing and presenting knowledge in new and effective ways. Examples include: software designed for teaching or education; a critical overview of the current work in a field of study; curriculum and novel educational program development; a textbook, chapter or review written from a fresh perspective; case studies and related materials that illustrate important issues and/or teaching methods; books and articles that may improve lay understanding of some aspect of medicine, medical education or medical care.

This intellectual work can be assessed for originality and effectiveness in approach, and success in better communicating the content of the discipline. Authors must demonstrate mastery of the research done by others, and beyond that, skill in fitting the pieces together so they form a whole, a pattern, or a trend, which is within the grasp of their readers. Again, source of publications, citations and reputations in the field are indicators of quality, impact and relevance.

- a. Books and Chapters: These publications demonstrate a desire on the part of the candidate to educate and clarify in areas where they have expertise, and the candidate's recognition by others of their leadership in the field.
- b. Journal Reviews: Invited reviews show recognition of the candidate's expertise particularly when the review is single-authored. If reviews are multi-authored, the Chair and candidate must confirm the principal contributions.

6.1.2 Application of Research or Knowledge to Consequential Problems

The application of research or knowledge requires the judicious evaluation of available research or knowledge for quality and appropriateness to the issues in question and the technical ability to make the research or knowledge work in a practical context.

Examples of application might include preparing carefully annotated policy documents; testing of new materials, procedures, techniques of teaching or medical care against established standards; evaluating programs of teaching, learning, counseling or medical care for their effectiveness (including but not limited to quality improvement); creating a new test or assessment procedure; or designing new programs in light of new understanding.

Evaluation in this area is perhaps more pragmatic than the others. The successful use of research or knowledge to solve a problem means that one actually solves the problem. However, upon failing, one can say how and why the research or knowledge was inadequate to the purpose or was not successfully applied because of external constraints.

Relevance may be assessed by the importance of the problem addressed and impact by the extent to which the solution has wide application.

Specific scholarly activities for Integration and Synthesis of Existing Knowledge and Application of Research or Knowledge to Consequential Problems (#2 and #3 above), which should be documented and evaluated in a candidate's dossier are similar to those of other scholars, but are evaluated based on the criteria discussed above. These activities include:

- a. Original contributions
- b. Books and chapters
- c. Journal reviews
- d. Abstracts and presentations
- e. Citation index, h-index
- f. Funded research
- g. Non-funded research
- h. Pending grant applications
- i. Study sections and editorial boards
- j. Membership and participation in professional societies
- k. Publication of nontraditional educational materials

6.1.3 Team Scholarship

Increasingly science involves multidisciplinary teams. UB JSMBS recognizes that assessing contributions of team scholars is more complex. Criteria for judging excellence of funding or publications is similar to that described under Research Scholarship, except

that collaborative output (e.g., funding and publications) may represent a significant portion of the portfolio. The portfolio should include a detailed explanation of the candidate's role and contribution on each of the collaborative activities. While order of authorship on publications will be considered, there is recognition that the order may not reflect the importance of the contributions made. Similarly, the indicated role of principle investigator is valued, but lesser titles (e.g. Investigator, Collaborator) may not capture sufficiently the significance of the role played by multidisciplinary team science faculty. These considerations will be assessed on an individual basis to fully appreciate the value of the contribution. For some, principal interests may be in development and successful implementation of academic or technical core facilities and/or in the leadership and administration of technical programs that are critical to the success of research endeavors across multiple areas.

6.2 Teaching

Education is a major function and requirement for every faculty member and it is usually reflected through participation in teaching. The quality and quantity of a faculty member's teaching are a major consideration in evaluation for promotion. However, with rare exceptions, it is never the sole criterion used for promotion.

Teaching effectiveness is required of ALL faculty members. A commitment to sharing knowledge, developing skills and fostering the values of the profession is essential. Positive interactions with students, trainees, residents, fellows and colleagues in the instructional process are important.

Student/trainee evaluations and peer review, including periodic reviews of performance with the department Chair, should clearly indicate the candidate's effectiveness as an educator.

In the case of a candidate for whom teaching is considered the significant element of the promotion or appointment dossier, the quality and the quantity of teaching activity must be fully documented. Faculty, whose promotions rest almost exclusively on research productivity, must show evidence of participation in teaching through contributions to the teaching programs of the Department or Division within the School. Emphasis is given to the following criteria of teaching effort and teaching effectiveness that will determine the weight to be given such activity.

Excellence as a teacher requires influencing and affecting how students learn. Faculty must direct students by providing a process designed to focus a student's ability to analyze and synthesize information to solve a problem and by ensuring that the informational content is timely, accurate and appropriate to the educational needs and settings.

In evaluating the teaching effort and effectiveness of the JSMBS faculty, it is important to note that in addition to the primary mission of training medical students and residents, teaching responsibilities are extended to include the training of professional, graduate and undergraduate students from across the University.

6.2.1 Criteria for Teaching Effort and Teaching Effectiveness

6.2.1.1 Quantity

Although not necessarily a measure of teaching effectiveness, teaching load represents a consideration at least as legitimate as service load. In general, an above average teaching load reflects an indication of the confidence that the faculty and administration have placed in a particular faculty member's teaching ability.

6.2.1.2 Breadth and Variety of Assignments

Ability to participate in a variety of available teaching formats is a challenge of effective teaching and to a degree reflects the skills of an individual teacher. Different formats may include, but are not limited to, formal lectures, group seminars, laboratory demonstrations, tutorials, clinical bedside teaching, one-on-one preceptorships, and teaching by example or demonstration.

Presumably, better teachers are asked to apply their teaching skills in other courses. The extent of this activity may itself be a criterion, as well as the formal evaluations from both the faculty and students participating in these other courses. Evaluations of teaching performance should be accompanied by letters from learning constituencies, particularly when this performance is the leading justification for promotion. Participation in teaching and conference activities outside the University, both for lay organizations, and for local, regional and national professional meetings, is an important measure of accomplishment. The fact that a faculty member is asked to participate in such activities represents a positive evaluation of the faculty member's teaching ability and academic stature. Obviously, if formal evaluations of these outside activities are available they should also be included in the promotion or appointment dossier.

6.2.1.3 Quality

Teaching evaluations should document the quality of the teaching performance. Some faculty members will excel in the classroom, others as mentors, and others in serving as preceptors or leading small groups.

- a. Classroom: This form of teaching is evaluated by the School and the departments. The content of material presented should be evaluated as well as the style, clarity and ability of the teacher. Such characteristics as punctuality and involvement of the class should be included in the evaluation.

- b. **Small Groups or Seminars:** A great deal of student education is performed in small groups and seminars. Here the ability of a teacher to interact and to stimulate group participation may be paramount.
- c. **Graduate Students:** Mentoring and supervision of these are two major requirements of teaching that should be included in the evaluation of faculty who participate in graduate education.
- d. **Bedside and Ambulatory Teaching:** This is a major component of clinical teaching, and thus, must be evaluated for every clinical faculty member.
- e. **Other:** Informal education and continuing education should also be valued and evaluated.

6.2.2 Documentation of Teaching Effectiveness

6.2.2.1 Faculty Evaluation

Faculty are often in a position to evaluate critically a colleague's teaching effectiveness. When deemed necessary or important, this type of evaluation should be gathered in an organized fashion and not simply left until it is time to consider promotion. It should include an established set of criteria for each teaching activity and should enable some form of quantitative measurement for purposes of comparison. It should also provide for narrative comment. It is recognized that this type of documentation may be difficult to obtain in some clinical areas.

6.2.2.2 Student Evaluation

Student evaluations should be gathered at every appropriate opportunity. These should include broad assessments of how the teacher engages, explains, challenges, inspires, provides a role model, and promotes the interests of students being taught. Both quantitative assessments and narrative comments should be sought. When considered a significant component of the dossier, substantial and regularly obtained student evaluations collected over a period of at least the past five years should be obtained if possible and/or appropriate.

6.2.2.3 Resident and/or Fellow Evaluation

Resident and/or fellow evaluations should be gathered at every appropriate opportunity. These should include broad assessments of how the teacher engages, explains, challenges, inspires, provides a role model, and promotes the interest of the residents and fellows being taught. Both quantitative assessments and narrative comments should be sought. When considered a significant component of the dossier, substantial and regularly obtained resident and fellow evaluations collected over a period of at least the most recent five years should be obtained if possible and/or appropriate.

6.3 Service

Service related activities represent an important contribution to overall institutional aspirations and goals. Indeed, all faculty should contribute to the service activities of the division, Department, School, university-at-large or teaching hospital, and such activities should be documented in the dossier. The service-related component of a candidate's dossier that may be weighed in the appointment or promotion decision, however, relates particularly to a candidate's professional expertise, achievement, and leadership, which contribute to the University's regional and/or national stature. Therefore, the major focus should be on evidence of significant and substantial service, particularly in leadership, patient care, or policy-making capacities.

6.3.1 Department

Activities in support of Departmental goals such as participation in Departmental committees, clinical service committees, and administrative affairs contribute to the orderly and effective operation of the academic unit and are to be encouraged. Particularly important is the organization, implementation, and leadership provided to Departmental programs and activities.

6.3.2 School and University

Contributions to the overall missions of the School and/or University are important; particularly noteworthy in this regard are positions of leadership and responsibility in policy-making and planning committees.

This can include, for example, but is not limited to, Admissions Committees, the Faculty Senate, the Faculty Council, special task forces (e.g. the Institutional Review Board [IRB], the Institutional Animal Care and Use Committee [IACUC], and the Institutional *Biosafety Committee [IBC]*) and search committees, special planning groups, and curriculum committees. Meaningful contributions to institutional affairs and operations are important to the functioning and advancement of such entities and therefore, if substantial or innovative, merit consideration.

6.3.3 Patient Care

This type of activity is particularly important if it is innovative, addresses health disparities, is unique or original and supports institutional educational goals. In preparing the dossier, recognized expertise in professional practice must be documented, and training and supervision of students or residents should be integrated into the patient care activities.

6.3.4 Community

Participation in, and contributions to, professionally relevant community-oriented programs are appropriate activities. Thus, membership in health care planning groups, or work with public health related educational programs, are important service activities at the community level. Service that addresses health disparities and social determinants of health are additional important contributions.

6.3.5 Regional, State and/or National

Contributions at the regional, state or national level clearly merit consideration as service related activities. Thus, leadership or policy-making roles in professional organizations, at the levels noted, are congruent with institutional objectives. Particularly important are those activities that provide the candidate and/or the institution regional and/or national stature.

One indication of national recognition is membership in nationally recognized prestigious research and/or scholarly societies. Some of these opportunities are available to developing faculty and others to only established, senior faculty. For clinical faculty, in particular, membership and participation in one basic science organization and a comparable clinical organization can serve to signify the academic recognition that exists.

6.3.6 Clinical Administration

In clinical departments, hospital and ambulatory services are critical in the educational process. Participation, particularly in a leadership role, in clinical affairs, especially as this relates to pursuit of academic missions, is an appropriate area for assessing service related activities.

7 TENURE TRACK PROMOTION CRITERIA

Scholarship that adds to the body of knowledge on scientific or clinical problems is the sine qua non for advancement in academia. Commitment to scholarship underlies the qualifications for attaining tenure status, and a lifelong commitment to education underlies the roots of recognition for an Academic promotion. This document recognizes that scholars in a medical school are of two types:

7.1 Research Scholars

Research Scholars are faculty members who usually perform their work in a research (basic science), clinical, or community setting, publish their work in peer reviewed journals, and educate and train future researchers as students, fellows, and postdoctoral trainees. Research Scholars develop and maintain an independent and consistently productive research program.

7.2 Clinical Scholars

Clinical Scholars are faculty members who are usually physicians, but can be individuals with other terminal degrees, whose scholarly activities result in contributions that lead to the dissemination of new knowledge benefitting the public's health, or improvement in the understanding of disease. Clinical Scholars make original contributions to the discipline or creatively and effectively apply scientific knowledge to important clinical problems. This can take the form of integration and synthesis of existing knowledge or application of research to consequential problems. They may actively participate in and contribute significant, unique elements to collaborative efforts, including the sharing of data in its many forms to multidisciplinary and consortium initiatives. For example, such work might significantly and demonstrably improve the prevention, diagnosis, and/or treatment of medical problems; reduce health care costs; advance the community public health; or elevate the standards of medical practice.

7.3 Evaluation Criteria for Tenure Track Research and Clinical Scholars

Evaluation Criteria for Tenure Track Research and Clinical Scholars may include (but is not limited to):

- a. Intellectual focus and creativity demonstrated in peer recognition for a body of work extending over a period of time
- b. Impactful seminal and groundbreaking contributions to the field
- c. Impactful contributions to the health of the community and reduction of health disparities
- d. Senior authorship on publications indicative of independent work, and collaborative publications recognizing unique contributions of each contributor
- e. Principal investigator status for nationally competitive research grants, clinical trials and awards
- f. Invited presentations/lectures/seminars at regional, national and international levels commensurate with experience
- g. Contributions to major scientific conferences/symposia
- h. Teaching, mentoring and training students, fellows and other trainees to attainment of advanced degrees as appropriate, and career success
- i. Service contributions to the profession that are recognized at the local, regional, national or international levels
- j. Engagement of the community in the planning, implementation, and dissemination of work

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- k. Recognition through international, national or local awards or honors.

7.4 Appointment or Promotion to Tenure Track

The award of tenure in the JSMBS is reserved for those faculty members who are among the best in their field of scholarly endeavor. Tenured faculty members will also be widely recognized as accomplished and influential teachers, and will show definitive promise of continuing outstanding contributions to the JSMBS. The balance between accomplishments in scholarship and teaching may vary considerably from one faculty member to another, but both scholarship and teaching contributions must be present before an award of tenure is made. Professional/administrative service, community service and clinical activities by a faculty member should be considered with any decision regarding an award of tenure. Such activities in the absence of significant accomplishments in both teaching and scholarship are not an adequate basis for an award of tenure.

Excellence in scholarship leading to a national and international reputation is the first prerequisite for the award of tenure. Scholarship is defined as the ongoing, systematic study of phenomena or events that leads to a competent mastery of one or more of the medical, allied health, or related basic science disciplines. Scholarship involves advanced study that leads to the acquisition of knowledge in a particular field, along with accuracy and skill in investigation, and the demonstration of powers of critical analysis in interpretation of such knowledge. Usually such study involves the scholarship of discovery; it may also include exceptional examples of the scholarship of application, integration, dissemination and teaching that generates new knowledge. The faculty member's scholarship must provide compelling promise of continued creativity with respect to generating new observations, new concepts, and new interpretations related to the individual's scholarly endeavors.

Tenure also depends on accomplishments in, and dedication to, teaching. The faculty member should have demonstrated a capacity and a desire to maintain teaching effectiveness and must show a capacity for continued growth as a teacher, as outlined below. It is implicit that excellence in teaching includes being a model of professional conduct for students, colleagues and patients.

Tenure also depends on evidence of the faculty member's participation in professional, departmental, School, University, hospital and patient care, and community service activities. Such activities may include service to professional organizations, committee service, scientific review committees, clinical care, and local community activities.

The promotion process to the ranks of Associate Professor and Professor recognizes continued professional growth and achievement. An associate professor is at an intermediate stage in that process, while a full professor has reached a higher level of

accomplishment. Both ranks are awarded to faculty members who have demonstrated considerable potential for continued growth. Both ranks must achieve excellence in a number of criteria, but professors have met more of these criteria and have achieved clear recognition as leaders in their fields, at the national and, where appropriate, the international level. Confirmation of such leadership should come from external referees who are at least at the same level of achievement (rank and tenure) as the candidate.

7.4.1 Associate Professor

Candidates for appointment or promotion to the rank of Associate Professor must hold an appropriate terminal degree or have equivalent scholarly or professional attainments. They must demonstrate significant achievements in teaching and scholarship or creative activity extending well beyond those involved in the attainment of the doctoral degree or its equivalent. In all cases of proposed continuing appointment as an Associate Professor, the candidate must have demonstrated a continued high level of performance as a teacher, scholar or creator, commitment to high scholarly standards, and evidence of effective participation in University and community service.

The quality of the scholarly or creative activity of such a candidate for appointment should be unambiguous and unequivocal. Evaluation of the candidate's work should be supported by substantial evidence of peer review that has been carried out in a manner characteristic of, and appropriate to the discipline. The candidate must demonstrate solid professional achievement and the potential to achieve the rank of Professor.

Associate Professors in the Tenure Track must demonstrate at least meritorious performance in teaching and service (including clinical activity where appropriate) and excellence in research/scholarship. In most cases, board certification is one necessary criterion for promotion of clinicians to the rank of Associate Professor.

7.4.2 Professor

The criteria applicable to the rank of Professor are those already indicated as applicable to the rank of Associate Professor. In addition, candidates for appointment or promotion to this rank must be clearly established, nationally visible, and highly regarded scholars, who have demonstrated the ability to direct scholarly programs and the creative activities of advanced students. Candidates must present clear and strong evidence of superior performance as a teacher and scholar or creator, and that such performance can be expected to continue. Faculty members holding this rank have the primary responsibility for the scholarship of the University, and their recognition as scholars in their disciplines must be of the first rank. Nothing short of the attainment of academic excellence is acceptable.

Professors in the Tenure Track must demonstrate continued achievement in their areas of expertise, and should have established national (and where appropriate, international) leadership in their field. Professors must demonstrate according to the parameters noted above at least meritorious performance in service/clinical activity, and excellence in research/ scholarship and in teaching.

7.5 Meritorious and Excellent Achievement in the Tenure Track

7.5.1 Scholarship

Excellence in research/scholarship is the *sine qua non* for advancement in the Tenure Track. It may include (but is not limited to) a consistent level of original senior author publications describing hypothesis-driven investigation; systematic reviews that represent a major body of work; peer-reviewed and/or other major funded research over a sustained period of time; acknowledged originality as an investigator through honors or awards; PI status on peer reviewed grants; patents awarded; national/international reputation and leadership in one's field; invitations to present at national/international meetings, service on study sections or other national grant review bodies, organizing national meetings; service as a national consultant; membership on editorial boards; published reviews that represent a major body of work that is recognized nationally or internationally; books or invited book chapters; visiting professorships; coordinator or other leadership role in multi-center or collaborative studies; strong record of development and publication of innovative educational approaches that are shown to be effective in hypothesis-driven studies.

7.5.2 Teaching

Meritorious teaching may include (but is not limited to) active participation in lectures, group discussions, student laboratories and related formal activities; advising/mentoring of students, fellows or graduate students; attending on services with regular teaching responsibilities; organizing journal clubs or seminars; development or major revision of teaching materials; invitations to seminars/grand rounds outside of the primary department; and meritorious evaluations by students and peers.

Excellence in teaching can be identified by regularly assuming substantial teaching responsibility and leadership (e.g., course director or primary instructor in a course, residency or fellowship director); consistently receiving outstanding teaching evaluations and awards; developing innovative teaching methods such as courses and software that are recognized outside the institution; leading regional continuing education courses; participation in national educational activities such as workshops and symposia; service on residency review committees and similar extramural reviews; writing textbooks; and mentoring students, residents, postdoctoral students or fellows who go on to degree conferral and/or to pursue distinguished careers.

7.5.3 Service

Meritorious service may include (but is not limited to) activities on committees and task forces within the Department, School, campus and University; service to local organizations through education, consultation and other roles; and serving on boards, committees and task forces of local professional societies.

Excellence in service may include (but is not limited to) appointment or election to university leadership positions such as faculty officer; Chair of a major committee; mentoring junior faculty; leadership in advocacy groups and professional societies; and community based organizations and committees (e.g., medical society officer, membership on a board of an advocacy group); election to important positions addressing health care issues at the state, regional or national level; consistent ongoing service as a board examiner; and service awards from local, national or international civic, advocacy and related organizations.

8 NON-TENURE TRACK PROMOTION CRITERIA

This document recognizes two classifications in the Non-tenure Track: Research-Educator and Clinical-Educator.

8.1 Research-Educators

Research Educators are faculty members who devote their greatest commitment to scholarship in the form of research. The research is usually funded by extramural resources. Research-Educators contribute actively to the education of graduate and/or other health science students.

8.2 Clinical-Educators

Clinical Educators are faculty members whose major commitments are: to patients and clinical care; to teaching medical students, residents and fellows; and, to the administration of teaching programs linked to patient care. Clinical-Educators may participate in scholarly pursuits at a more modest level and with less emphasis than required for tenure track Research Scholars and Clinical Scholars. The valuable and necessary contributions of the Clinical-Educator to the educational mission of UB's medical school are recognized in these guidelines.

The continued participation of teaching hospitals in the academic mission and fiscal health of the medical school depends on the contributions of these physicians to patient care and clinical instruction.

8.3 Evaluation Criteria for Non-tenure Track Faculty

Evaluation Criteria for Non-tenure Track Research and Clinical Educators may include (but is not limited to):

- a. Collaborations on clinical, educational, community, and demonstration projects and grants
- b. Teaching, mentoring and training students, fellows and other trainees
- c. Senior authored publications indicative of independent work, and collaborative publications recognizing unique contributions
- d. Principal investigator or collaborator on research grants, clinical trials and awards
- e. Invited presentations/lectures/seminars at a local, regional, national and international level commensurate with experience
- f. Contributions to scientific conferences/symposia
- g. Service activities to the profession that are recognized regionally and/or nationally.

8.4 Appointment or Promotion to the Non-tenure Track

A candidate for appointment or promotion in the non-tenure track must hold the appropriate terminal degree or have equivalent scholarly or professional attainments. The candidate should have achievements in research, teaching and patient care extending well beyond those involved in the attainment of the doctoral degree or its equivalent. In all cases of proposed renewal of this term appointment, the candidate must demonstrate a continued high level of performance as a teacher, clinician, and in service activities.

The quality of the teaching and clinical activities of such an appointee should be unambiguous and unequivocal. This evaluation of the candidate's teaching should be supported by substantial evidence of favorable student, resident, fellow and faculty review, together with supporting letters of the teaching evaluation from the appropriate constituents. The candidate must demonstrate solid professional achievement and the potential to meet requirements for eventual promotion to Professor.

8.4.1 Clinical-Educator Classification

8.4.1.1 Clinical Associate Professor

A candidate for appointment at or promotion to Clinical Associate Professor as a Clinical-Educator should demonstrate at least meritorious performance in clinical work/service, teaching, and scholarly activity and excellence in teaching or clinical activity. Board certification is usually necessary for promotion of clinical faculty to the rank of Clinical Associate Professor.

8.4.1.2 Clinical Professor

A candidate for appointment at or promotion to Clinical Professor as a Clinical-Educator should be clearly established in the discipline and specialty identified, and a highly-regarded teacher and clinician who demonstrates the ability to direct the clinical activities of students and residents. A candidate for the rank of Clinical Professor must present clear and compelling evidence that their performance as a teacher and clinician is first rank, and can be expected to continue.

Clinical Professors in the Clinical-Educator classification should have made an impact on their profession beyond the University and should have demonstrated leadership in clinical scholarship and skill. Criteria for promotion to the rank of Clinical Professor include at least meritorious accomplishments in clinical work/ service, teaching and scholarship and excellence in two of these areas.

8.4.2 Research-Educator Classification

8.4.2.1 Research Associate Professor

A candidate for appointment at or promotion to the rank of Research Associate Professor as a Research Educator must hold the appropriate terminal degree or have equivalent scholarly or professional attainments. The candidate must have achievements in research and teaching extending well beyond those involved in the attainment of the doctoral degree or its equivalent. In all cases of proposed renewal of term appointment as a Research Associate Professor, the candidate must demonstrate a continued high level of performance as a researcher and teacher, commitment to high scholarly standards, and evidence of effective participation in professional, University/School/Department and community service.

The quality of the research and teaching of such an appointee must be unambiguous and unequivocal. This evaluation of the candidate's work must be supported by substantial evidence in the form of solicited letters of peer review that has been carried out in a manner characteristic of and appropriate to the discipline. The candidate must demonstrate solid professional achievement and the potential to meet requirements for eventual promotion to Professor in the research track.

Research Associate Professors in the classification of Research-Educator must demonstrate at least meritorious performance in research/scholarship and excellence in at least one of the three areas (research, teaching and service).

8.4.2.2 Research Professor

A candidate for appointment at or promotion to Research Professor in the Research-Educator classification must be clearly established in the national (and where appropriate,

international) research communities, be highly regarded as a researcher and teacher, and have demonstrated the ability to direct the activities of graduate students and research assistants. A candidate for the rank of Research Professor must present clear and compelling evidence that their performance as a researcher and teacher is of the first rank and that research growth can be expected to continue.

Research-Educator Research Professors must demonstrate continued achievement in their areas of expertise and leadership in their field. Research Professors must demonstrate excellence in research/scholarship and meritorious service and teaching, according to the parameters noted in this policy.

8.5 Meritorious and Excellent Achievement in the Non-tenure Track

8.5.1 Scholarship

Meritorious scholarship in the Clinical-Educator classification involves communicating and enhancing knowledge and skill in the broader community. Associate Professors should have produced several meaningful scholarly contributions that develop and expand knowledge. In most instances, scholarly accomplishments are communicated in the form of publications, but some scholarly accomplishments may take the form of innovative computer programs and media presentations that are utilized and recognized as important beyond the institution. Meritorious publications in the clinical track are exemplified by (but not limited to) developing new treatment modalities; scholarly reviews; important case series; development of innovative teaching methodologies; community engaged scholarship; and clinical guidelines and summaries.

Excellence in scholarship in the Clinical-Educator classification may include (but is not limited to) publication of reviews that develop new concepts and influence practice; publication of textbooks or other volumes; influential chapters in major, nationally recognized textbooks; participation as an investigator or co-investigator in clinical studies; serving as a regular reviewer for major journals; national/international recognition of novel media publication; service on regional or national symposia and other groups that address translational and integrative research; and recognition as a leader in one's field.

Meritorious scholarship in the Research-Educator classification involves communicating and enhancing knowledge and skill in the research field. Associate Professors should have produced several meaningful scholarly contributions that develop and expand knowledge. In most instances, scholarly accomplishments are communicated in the form of peer-reviewed publications, but some scholarly accomplishments may take the form of innovative computer programs, publicly-accessible databases, and media presentations that are utilized and recognized as important beyond the institution. Meritorious publications in the research track are exemplified by (but not limited to) developing new paradigms, contributions to translational science, scholarly reviews, and innovative

teaching methodologies. The faculty member is also expected to contribute as a principal investigator or co-investigator on research grants, which may include community and practice-based collaborations, clinical trials and industry-sponsored research.

Excellence in scholarship in the Research-Educator classification includes (but is not limited to) publication of reviews that develop new concepts that impact the field and/or influence practice; publication of books or textbooks; influential chapters in books or textbooks; consistent record of senior-authored publications; status as principal investigator on major peer-reviewed research grants; leadership or director of research core(s) that benefit the research of others; participation as investigator or co-investigator in clinical studies; service on editorial boards and as a reviewer for major journals; regular member of NIH study section or other national grant review bodies; service on regional or national symposia that address translational and integrative research; and national/international recognition as a leader in one's field.

8.5.2 Teaching

Meritorious teaching in the Clinical-Educator and Research-Educator classifications may include (but is not limited to) lecturing on a regular basis within the Department or School; course or program director/coordinator; clinical teaching, mentoring, and supervising trainees.

Excellent teaching in the Clinical-Educator and Research-Educator classifications is exemplified by (but not limited to) significant responsibility for educational programs (e.g., residency or fellowship director or director of a major ongoing course); excellent teaching evaluations; teaching awards; service on regional or national educational panels; consistent participation in regional or national educational committees and forums; invitations by other institutions to serve as a visiting professor; evidence of trainee development and contributions to the field; and developing innovative syllabi and related materials that are used locally and/or adopted elsewhere.

Beyond overall competence, candidates for appointment or promotion to the rank of non-tenure Associate Professor must demonstrate excellence in educational modes such as:

- a. Lecturing and presenting to large groups
- b. Course organization and administration
- c. Small group instruction e.g., seminars, journal clubs
- d. Individual instruction, remedial programs and tutorials
- e. Role modeling and mentoring, especially in clerkships and preceptorships
- f. Training in the use of the methods and materials of the discipline, e.g. research, clinical and computer skills

- g. Curricular innovation and improvement, including effective course materials
- h. Teaching at the bedside, in clinic or other practice sites
- i. Continuing education and training programs

8.5.3 Service

Meritorious service for Clinical-Educators consists of (but is not limited to) active participation in clinical activities of the academic unit; board certification; recognition by internal peers; invitations to speak locally on clinical topics; participation in institutional clinical care committees; regular attending work in an inpatient or outpatient service; consistent availability for referrals from other faculty; and support of clinician peers for meritorious clinical skills. As in the tenure track, clinicians at the rank of Associate Professor normally should be certified in their specialty.

Excellence in service for Clinical-Educators is evidenced by (but is not limited to) ongoing significant participation in effective clinical activities; clinical leadership noted by peers and patients; leadership in developing new clinical initiatives that serve as national models; development of new techniques or health care delivery systems, including public health approaches; leadership in activities that enhance the effectiveness and quality of care; director of a major clinical service or division; medical staff officer; national leadership such as chairing national symposia and committees; service in professional, licensing and certifying bodies; frequent regional and national referrals; and being known for highly effective outcomes and treatment of difficult cases.

Meritorious service for Research-Educators may include (but is not limited to) serving as a committee member in a department or School; and participation in community initiatives; and professional society membership activities.

Excellence in service for Research-Educators may include (but is not limited to) playing a major role in the development and organization of important research-related services; leading resource management activities (such as equipment procurement or utilization); serving as a resource for public outreach, advocacy groups and related organizations; leadership in regional and national professional societies; recognition as a regional or national consultant; editorial board or review activities for journals or grant review bodies; and, election/appointment to major positions within the institution (e.g., membership or chair of key School/University committees).

9 VOLUNTEER TRACK PROMOTION CRITERIA

There are two classifications of faculty in the Volunteer Track: Researcher and Clinician (see Section 3.3).

9.1 Clinician Volunteer

Those individuals who are not employed by the JSMBS as a member of a faculty practice plan or a State funded appointment in a Medical School department, and whose major volunteer commitments are to teaching medical students, residents and fellows. Clinician Volunteer faculty may participate in scholarly pursuits, but typically at a modest level and in a collaborative role. The valuable and necessary contributions of the volunteer clinical faculty to the educational mission of UB's medical school are recognized in these guidelines.

The continued participation of teaching hospitals in the academic mission and the academic and fiscal health of the medical school depends on the contributions of these physicians to patient care and clinical instruction.

9.2 Researcher Volunteer

Those individuals who are engaged in research and research training, and may or may not be supported by departmental or grant funding sources.

9.3 Evaluation Criteria for Volunteer Faculty

Evaluation criteria for volunteer faculty may include (but is not limited to):

- a. Teaching, mentoring and training students, fellows and other trainees
- b. Service contributions and patient care to the Department, hospital or health care organization, medical school, or University
- c. Leadership contributions to the profession that are recognized regionally and/or nationally
- d. Participation in research projects and programs, including clinical trials
- e. Authorship of publications in the scientific literature, preferably peer reviewed
- f. Invited presentations/lectures/seminars at a local, regional, national and international level commensurate with experience
- g. Contributions to scientific conferences/symposia, including leadership or invited presentations
- h. Collaborations on clinical, educational and demonstration projects and grants.

9.4 Appointment or Promotion to Volunteer Track

9.4.1 Clinician Volunteer

Clinician Volunteer appointments are awarded in recognition of meaningful service to a medical school department or to the School as a whole. Board certification is usually necessary for promotion of volunteer clinical track faculty.

The quality of the clinical work and teaching of such an appointee must be unambiguous and unequivocal. Evaluation of the candidate's work must be supported by substantial evidence in the form of solicited letters of peer review that has been carried out in a manner characteristic of and appropriate to the discipline. To be promoted, Volunteer faculty are expected to make substantial and sustained contributions, i.e. more than giving occasional lectures or occasionally hosting a student in a practice.

9.4.1.1 Clinical Associate Professor in the Volunteer Track

A candidate for the rank of Clinical Associate Professor in the Volunteer track must hold the appropriate terminal degree or have equivalent scholarly or professional attainments. The candidate should have achievements in teaching and patient care extending well beyond those involved in the attainment of the doctoral degree or its equivalent. In all cases of proposed renewal of term appointment as a Clinical Associate Professor, the candidate must demonstrate a continued high level of performance as a teacher, clinician, and evidence of effective participation in University and community service.

The quality of the teaching and clinical activity of such an appointee should be unambiguous and unequivocal. Evaluation of the candidate's teaching should be supported by substantial evidence of favorable student, resident, fellow and faculty review, together with supporting letters of the teaching evaluation from the appropriate constituents. The candidate must demonstrate solid professional achievement and the potential to meet requirements for eventual promotion to Professor. For promotion to Clinical Associate Professor, candidates should demonstrate at least meritorious performance in clinical work/service and teaching, and excellence in one of these domains.

Associate Professors in the Volunteer track should participate in an ongoing manner in an important departmental activity and should demonstrate promise of continuing and expanding their contributions. Examples of meaningful contributions include (but are not limited to) regular lectures; ongoing use of the physician's office as a clinical practice site for students, residents or fellows; supervising students, fellows or residents in other settings; helping recruit patients for clinical trials; assisting to organize continuing education programs; performing clinical services for the department; contributing to the

department's development of new clinical, educational or research programs; and participating on clinical trials and other demonstration projects.

9.4.1.2 Clinical Professor in the Volunteer Track

A Volunteer candidate for appointment at or promotion to Clinical Professor must be a clearly established and highly regarded clinician and teacher. As in the case of appointments or promotions at all other ranks, candidates for the rank of Clinical Professor must present clear and compelling evidence that their performance as a clinician and teacher is considered of the first rank (e.g. teaching and service excellence). Research/scholarship is preferable but not required for promotion.

Professors in the Volunteer track should have made ongoing substantial contributions to the department with a high likelihood of continued major contributions and should have had an impact on the profession. Examples of such contributions include teaching major courses; regularly supervising students, residents or fellows; directing an important departmental clinical service; publications that reflect work associated with the department; participation in departmental research projects; collaborations on novel and influential clinical, educational and demonstration projects and grants; and excellent teaching reviews. In some cases, outstanding contributions to the profession that are recognized regionally and nationally (e.g., president of a national specialty society) may satisfy the criteria for promotion to Clinical Professor even when a volunteer does not regularly engage in departmental activities, if the volunteer's association with the department is a component of such recognition.

9.4.2 Research Volunteer

Researcher Volunteer appointments are awarded in recognition of meaningful participation in the research activities of the JSMBS.

The quality of the research that an appointee engages in must be unambiguous and unequivocal. Evaluation of a candidate's work must be supported by evidence in the form of solicited letters indicating their role in the research and training mission of the affiliated department. To be promoted, volunteer faculty are expected to make substantial and sustained contributions to the research enterprise.

9.4.2.1 Research Associate Professor in the Volunteer Track

Researcher volunteers must hold the appropriate terminal degree or have equivalent scholarly or professional attainments. A candidate for appointment at or promotion to Research Associate Professor must have achievements in research and teaching extending well beyond those involved in the attainment of the doctoral degree or its equivalent. In all cases of proposed renewal of term appointment as a Research Associate Professor, the candidate must demonstrate a continued high level of performance as a

researcher and teacher, commitment to high scholarly standards, and evidence of effective participation in professional, University, School, Department and community service.

The quality of the research and teaching of such an appointee must be unambiguous and unequivocal. This evaluation of the candidate's work must be supported by substantial evidence in the form of solicited letters of peer review that has been carried out in a manner characteristic of and appropriate to the discipline. The candidate must demonstrate solid professional achievement and the potential to meet requirements for eventual promotion to Research Professor in the Volunteer track.

Research Associate Professors in the Volunteer track must demonstrate at least meritorious performance in research/scholarship and excellence in at least one of the three areas (scholarship, teaching and service).

9.4.2.2 Research Professor in the Volunteer Track

A candidate for appointment at or promotion to Research Professor must be a clearly established and highly regarded researcher and teacher. As in the case of appointments or promotions at all other ranks, candidates for the rank of Research Professor must present clear and compelling evidence that their performance as a researcher and teacher is considered of the first rank (excellence).

9.5 Meritorious and Excellent Achievement in the Volunteer Track

9.5.1 Scholarship

Meritorious scholarship in the Volunteer track involves communicating and enhancing knowledge and skill in the broader community. Associate Professors ideally have evidence of meaningful scholarly contributions, including collaborations on research projects or clinical projects/trials. Scholarly accomplishments are commonly communicated in the form of publications, but may take other forms recognized as important to the field.

Excellence in scholarship in the Volunteer track may include (but is not limited to) recent senior/corresponding authored publications in peer-reviewed literature, participation as an investigator or co-investigator with a significant role on sponsored research, serving as a reviewer for journals, and making local and regional invited presentations.

9.5.2 Teaching

Meritorious teaching in the Volunteer track may include (but is not limited to) regular lectures within the department; teaching a class; regularly lecturing, training and

supervising trainees. Good-excellent evaluations by students and other trainees is expected and must be documented.

Excellent teaching in the Volunteer track is exemplified by excellent teaching evaluations; teaching awards; service on regional or national educational panels; consistent participation in regional or national educational committees and forums; invitations by other institutions to serve as a visiting professor; evidence of trainee development and contributions to the field; and developing innovative syllabi and related materials that are used locally and/or adopted elsewhere.

Beyond overall competence, candidates for appointment or promotion to the rank of Associate Professor must demonstrate excellence in educational modes such as:

- a. Lecturing and presenting to large groups
- b. Course organization and administration
- c. Small group instruction e.g., seminars, journal clubs
- d. Individual instruction, remedial programs and tutorials
- e. Role modeling and mentoring, especially in clerkships and preceptorships
- f. Training in the use of the methods and materials of the discipline, e.g. research, clinical and computer skills
- g. Curricular innovation and improvement, including effective course materials
- h. Teaching at the bedside, in clinic or other practice sites
- i. Continuing education and training programs.

9.5.3 Service

Meritorious service in the Volunteer track consists of (but is not limited to) active participation in clinical activities of the academic unit; recognition by internal peers; invitations to speak locally on clinical topics; participation in institutional clinical care committees; involvement in department, hospital, University, or other healthcare committees; regular attending work in an inpatient or outpatient service; consistent availability for referrals from other faculty; and support of clinician peers for meritorious clinical skills. Clinicians at the rank of Associate Professor normally should be certified in their specialty.

Excellence in service in the Volunteer track is evidenced by (but is not limited to) ongoing significant participation in effective clinical activities; clinical leadership noted by peers and patients; leadership in developing new clinical initiatives that serve as national or regional models; development of new techniques or health care delivery systems; leadership in activities that enhance the effectiveness and quality of care, including quality

improvement; director of a major clinical service or division; medical staff officer; regional, state, or national leadership in professional organizations; service in professional, licensing and certifying bodies; frequent regional and national referrals; and being known for highly effective outcomes and treatment of challenging cases.

10 DOCUMENT HISTORY

The background to this document is in the report prepared by the Faculty Council Committee on Appointments, Promotion and Tenure of the School of Medicine and Biomedical Sciences presented to the Faculty Council in 1988, revised Fall 2007 and updated June 2010 and August 2016.

11 APPENDIX 1: SUNY FACULTY TITLES RELEVANT TO JSMBS PROMOTION TRACKS

11.1 Academic Rank Titles

<http://www.suny.edu/hr/compensation/unclassified/other/academic-rank-titles/>

11.2 Qualified Academic Rank Titles

<http://www.suny.edu/hr/compensation/unclassified/other/qualified-academic-rank-titles/>

11.3 Volunteers

http://www.suny.edu/hr/compensation/other_service/volunteers/