UCSF Department of Obstetrics, Gynecology & Reproductive Sciences

Departmental Guidelines on Appointment, Advancement & Promotions:

Clinical X Series

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I. INTRODUCTION

The title "Guidelines" has been chosen deliberately. The diversity of talents and accomplishments required in these series is such that the guidelines governing appointments, advancement, and promotions must be applied with some degree of flexibility. These guidelines provide faculty and reviewers (departmental, UCSF, and external reviewers) a basis for evaluating appointments, advancement, and promotion.

Within the standards set for appointment, advancement and promotion in the APM (see Appendix); Departments in the School of Medicine at UCSF may set department-specific guidelines. This document outlines the UCSF Department of Obstetrics, Gynecology, & Reproductive Sciences interpretation of the APM policies and procedures and includes several department-specific expectations for successful advancement & promotion in the Clinical X series. For academic advancement, the department expects evidence that the faculty member is continuously accelerating the rate of accomplishments in all of the domains relevant to each track.

The “correct” or “best” series usually is the one that most closely aligns with the faculty member’s career goals and academic background.

II. OVERVIEW AND GENERAL CONCEPTS

The Clinical X series is for faculty whose responsibilities are in teaching and clinical services and who are also engaged in creative activities, which may include collaborative research. Faculty in this series are members of the Academic Senate, and are appointed at the level of Clinical Instructor, Assistant, Associate and Professor of Clinical Obstetrics and Gynecology. These guidelines will specifically describe departmental expectations at each level. There will be variations on the number of publications, grants, teaching hours, administrative roles and public service activities among the faculty; however overall the ideal of this series is outstanding teaching, provision of the highest quality of clinical care within the context of UCSF teaching and training programs, original research which may include collaborative research in high impact publications and other modes of dissemination of knowledge, and involvement with university and public service. Documentation may include teaching evaluations via the EValue system, CME course evaluations, mentoring evaluation forms, letters from colleagues, published journal articles, summary of presentations with location
and title, practice guidelines that have been adopted elsewhere, and acknowledgment of the use of designed curriculum at other institutions.

Distinguishing features that separate the Clinical X series from the Clinical series are outstanding and original contributions in education and training, noteworthy innovation in clinical practice, and outstanding and original research, which may include collaborative research. Dissemination of this work through publication or presentation is a key consideration. Distinguishing features for a faculty member in Clinical X rather than in the Ladder Rank or In Residence series is that a faculty member in the Clinical X series has a heavier load of teaching and/or clinical service than in the other two series and/or the research may be as a collaborator rather than as a principal investigator.

It is anticipated that a number of faculty in the Clinical Series will qualify for the Clinical X series. After four years of appointment in the Clinical Series, faculty members will be evaluated by the Department Committee on Appointments and Promotions for appointment to the Clinical X series. However, a Change in Series to the Clinical X series will require a national search and must meet the programmatic need of the Department.

III. DOMAINS FOR THE CLINICAL X SERIES

Teaching and Education
1. Direct Medical Teaching: Excellence in teaching is heavily weighted in this series, as are key teaching roles in a major course or core training program, record of outstanding evaluations, and contribution of innovative material to an educational program. The scholarship of synthesis is appropriately considered a form of teaching; thus faculty members who contribute to wider understanding of health and disease through publication of sections in major texts, important review articles, computer or Internet-based education programs, and the like, may demonstrate the creativity and scholarship expected in the Clinical X series. Teaching awards at the departmental, school-wide, hospital-wide, campus-wide or national level are not required but are supportive evidence of excellence in direct teaching.

2. Curriculum Development, Instructional Design, and Assessment of Learner Performance: The development of new programs or significant revision of existing programs with outstanding evaluations, leadership in program innovation, creation of enduring educational materials used at UCSF and elsewhere are considered favorable.
3. Advising and Mentorship: Advising and mentorship are strong institutional and Department values. Examples of accomplishment include a continuous record of advising and mentorship, leadership in formal mentoring programs for students, residents, fellows, or junior faculty with outstanding evaluations and/or appraisals for this work.

4. Educational Administration and Leadership: Key roles in the administration of medical student, resident, fellow and other teaching programs with outstanding appraisals for the work are weighted favorably in this series, especially if there is national impact as evidenced by educational roles in courses, educational materials, and national medical societies.

5. Educational Research: The generation of educational research to assess the effectiveness of educational approaches and other key areas are vital to the effective teaching of medical knowledge. Original publications, review articles, chapters and textbooks as well as presentations of peer-reviewed work regionally and nationally, or receipt of grants or contracts based on peer review of written proposals, are all considered evidence of accomplishment in this domain.

Clinical Excellence and Innovation
1. Excellence and a high level of professionalism in the provision of clinical care.

2. Establishment of Innovative Clinical Programs: Leadership in the role of design, funding, and implementation of major clinical programs is considered evidence of clinical innovation.

3. Leadership in Clinical Programs: Primary administrative responsibility for a major clinical program whose excellence is attributed to the faculty member is valued in this series.

Research
Excellent research is distinguished by its originality, rigor, and impact. Indications of these characteristics include receipt of NIH awards, foundation funding, or intellectual leadership of industry-funded research. Clinician-researchers, if appointed in this series, shall demonstrate excellence in both their clinical and research work, and in teaching. The number of publications will be flexible, depending on the time allotment for the research in relationship to clinical and administrative responsibilities. Emphasis on outstanding investigator-initiated or collaborative research as evidenced by publication of research findings or scholarly articles in top-tier journals and successful competition for research funding that demonstrates investigator independence will be considered in the advancement for the clinician-researcher.
University and Public Service
University and public service are required: Examples include medical school or campus committee memberships, board memberships of non-profit educational organizations, service through the Academy of Medical Educators, journal reviewer, and leadership in university service. Engagement in community service is also valued. Professional and public service activities that promote diversity and equal opportunity are to be especially encouraged and given recognition for the appointment or promotion in the evaluation of the candidate’s qualifications for advancement and promotion.

IV. APPOINTMENT IN THE CLINICAL X SERIES
Appointment in the Clinical X series can be at the Clinical Instructor, Assistant, Associate, or Professor level, if the domains described above are appropriate. As mentioned above, faculty in the Clinical series will be reviewed by the Department Committee on Appointments and Promotions every four years, to check and see if a lateral transfer is appropriate to the Clinical X series, based on the domains above.

V. PROMOTION IN THE CLINICAL X SERIES
For promotion in the Clinical X series, the faculty member needs to make contributions in teaching, clinical care and research or other dissemination of knowledge as well as in university and public service. It is essential that the faculty member is clinically excellent and provides high quality patient care. It is recognized that some candidates may have portfolios that are well balanced, while others may have portfolios that are especially strong in a single domain. In all cases of appointment and promotion in the Clinical X series, excellence in teaching is required as well as university and public service.

From Instructor to Assistant Professor of Clinical
Appropriate board certification needs to be in place for consideration of promotion from Clinical Instructor to Assistant Professor, as well as the domains covered above. Excellent provision of clinical care, a high standard of professionalism, and excellent teaching are required for this promotion. Anticipated time at the level of Clinical Instructor is 2 years.

Appointment at the Assistant Professor of Clinical Level
Appointment at the Assistant Professor level is usually at Step 1 for faculty who are board-certified in obstetrics and gynecology or who have been promoted from Clinical Instructor (when applicable). Faculty who have completed subspecialty fellowship training may be considered for appointment at Step 2.
Advancement at the Assistant Professor of Clinical Level

Advancement at the Assistant Professor level requires building and establishing regional recognition through participation in professional activities such as demonstrating progressive clinical expertise, excellence in teaching, assuming leadership roles and collaboration in research and creative work.

The usual time at each Step at the Assistant Professor level is 2 years. After either Step 3 or 4, application for promotion to Associate Professor is expected. At approximately year 4 after appointment as an Assistant Professor, an Appraisal of Achievement & Promise will occur. This is a more formal and extensive evaluation than required for step advancement, and requires the same elements as a full promotion package. It is meant to provide junior faculty with constructive advice and sufficient time to address any deficiencies for successful promotion to the rank of Associate Professor. The faculty member determines the exact timing of this appraisal with his/her advisors based on perceived accomplishments and need for guidance.

If a faculty member is at Step 5 or 6, that is considered a deceleration and strong mentoring is needed to assure further advancement. It is considered an exception for a faculty member to be at Step 5 or 6 at the Assistant Professor level.

An Assistant Professor, who has completed eight years of service in that title, or in that title in combination with other titles as established by the President, shall not be continued after the eighth year unless promoted to Associate Professor or Professor (APM 133-0).

The University gives unsuccessful candidates in this series a one-year terminal appointment; thus, review for promotion must be completed no later than the seventh year. The eight year clock starts with the initial appointment, includes years as an instructor. Your progress will be evaluated during the fourth year by an Appraisal of Achievement & Promise as described in the previous section.

From Assistant Professor to Associate Professor of Clinical

Promotion to Associate Professor requires regional recognition for independent or collaborative contributions, excellent provision of clinical care, a high standard of professionalism, excellent teaching as well as public and university service. Dissemination of one’s work is a key consideration. Where applicable, subspecialty certification is expected prior to promotion to Associate Professor.
Criteria for advancement includes:

- **Contribution to the Advancement of Science**: Evolving leadership in a focused area of clinical practice or education that addresses important questions in the investigator’s chosen field.
- **Recognition by Peers**: Invitations to write editorials or evidence-based reviews, service on public research review committees or committees that set clinical guidelines, speaking invitations at major conferences or academic venues; letters of support for promotion, etc., attesting to the investigator’s leadership role in the academic community.
- **Training & Mentoring**: Excellence in teaching and participation in mentoring new clinicians and educators.

**Advancement at the Associate Professor of Clinical Level**

Advancement at the Associate Professor level requires building and establishing national recognition through assuming leadership roles in the clinical and educational arenas as well as demonstrating progressive clinical expertise, a high standard of professionalism, collaborative research/creative work and excellence in teaching.

Appointment at the Associate level is usually at Step 1, with advancement every two years to Step 2 and then to Step 3 and to Step 4 (if needed). After either Step 3 or 4 is completed, promotion to Professor is expected. If a faculty member is not ready academically for promotion to Professor, the faculty member continues on at Step 5 at this level, which is considered a deceleration and strong mentoring is needed to assure further advancement.

**From Associate Professor to Professor of Clinical**

Promotion to Professor of Clinical requires recognition for independent or collaborative contributions as well as distinguished leadership, outstanding teaching, a high standard of professionalism, excellent provision of clinical care, public and university service at a leadership level, and mentoring of junior faculty.

- **Contribution to the Advancement of Science**: Assuming leadership responsibilities in a focused area of clinical practice or education that addresses important questions in the investigator’s chosen field.
- **Recognition by Peers**: Invitations to write editorials or evidence-based reviews, service on public research review committees or committees that set clinical guidelines, speaking invitations/leadership roles at major conferences or academic venues; letters of support for promotion, etc., attesting to the investigator’s leadership role in the academic community, chairing national/international meetings or workshop committees, training foreign research fellows, service on international committees, lectures and paper presentations at national and international meetings.
• **Training & Mentoring:** Assuming responsibility for teaching and mentoring, developing programs that support new clinicians and educators, and mentoring trainees.

**Advancement at the Professor of Clinical Level**

Advancement at the Professor of Clinical level requires building and establishing national and international recognition through participation in professional activities such as research or creative activities, publishing, as well as demonstrating progressive clinical expertise, a high standard of professionalism, and excellence in teaching and University and public service.

• **Contribution to the Advancement of Science:** Leadership position(s) in a focused area of clinical practice or educational innovation that addresses important questions in the investigator’s chosen field.

• **Recognition by peers:** Invitations to write editorials or evidence-based reviews, service on public research review committees or committees that set clinical guidelines, speaking invitations/leadership roles at major national conferences or academic venues; letters of support for promotion, etc., attesting to the investigator’s leadership role in the academic community, chairing national/international meetings or workshop committees, training foreign research fellows, service on international committees, lectures and paper presentations at national and international meetings.

• **Training & Mentoring:** Assuming responsibility for teaching and mentoring, developing programs that support new clinicians and educators, mentoring trainees.

The usual time at each Step at the Professor of Clinical level is 3 years. In order to advance from Step 5 to Step 6 at the Professor of Clinical level, continued leadership is needed in the department and/or hospital and/or university, excellent provision of clinical care, continued participation in the teaching of medical students/residents and/or fellows, a high level of professionalism, mentoring of junior faculty, and evidence of original or collaborative contributions are required.
Appendix

Departmental Guidelines on Appointment, Advancement & Promotions for All Series

The Department of Obstetrics, Gynecology, & Reproductive Sciences, like all academic departments at UCSF, operates under the policy and procedures of the Academic Personnel Manual (APM: see table below).

The complete Academic Personnel Manual can be found at: http://www.ucop.edu/acadadv/acadpers/apm/welcome.html.

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Additional useful information regarding advancement and promotion can be found in the Faculty Handbook for Success: Advancement & Promotion at UCSF available at: http://www.ucsf.edu/senate/facultyhandbook/