UCSF Department of Obstetrics, Gynecology & Reproductive Sciences

Departmental Guidelines on Appointment, Advancement & Promotions

Clinical and Translational Researchers: Adjunct, In Residence, or Ladder Rank Series
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I. INTRODUCTION:

Note: 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, 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 Adjunct, In Residence, and Ladder Rank series for Clinical & Translational Researchers. For laboratory-based researchers, a separate departmental committee is developing guidelines.

Note: Full salary support is expected for all faculty, which consists of grants, contracts, clinical revenue, endowments or other sources.

Clinical & Translational (C&T) Researchers in Ladder Rank, In Residence, & Adjunct Series:

II. General Concepts

For academic advancement, the department expects evidence that the research faculty member is continuously accelerating the rate of accomplishments in all of the domains relevant to each track. The Department places great emphasis on two manifestations of success in these series. One is publication in first-tier, high-impact journals. Publications should reflect the focused development of a faculty member's research career as well their role in the research conducted. The second is support from extramural grants and contracts at a level of > 50% of salary*. Grant support from the NIH or similar federal agencies (CDC, DOD) is expected, and the Department also recognizes the value of other funding sources such as major foundations, cooperative agreements and contracts, professional societies and pharmaceutical or biotech companies as long as
research is investigator initiated (IIR) that contributes to the improvement of health or alleviation of disease.

**Departmental Publication Guidelines:** Peer-reviewed publications are very important for advancement. The rate of publication should increase as the faculty member proceeds through the Assistant, Associate and Full Professor ranks. For on-time advancement, the Department expects mostly first, second, or senior authored** (more senior-authored at later ranks) publications. Second authored and senior authored publications in which the faculty member has an especially significant role should be noted and described for all publications. First, second, or senior authored publications in first-tier journals that move the field forward will be weighted more heavily than multiple publications in lower impact journals. In general, publications from primary data collection from the research faculty’s research program will be weighted more heavily than publications from secondary data analysis. For research faculty with clinical responsibilities and/or clinical, teaching and/or administrative leadership that are critical to the mission of the department, the expectation for publications is slightly lower and will depend on the level and demands of these other duties (See Frequently Asked Questions at the end of this document).

**Departmental Grant Support Guidelines:** The primary compensation source for the Ladder Rank, In Residence and Adjunct series is extramural. It is expected that virtually all junior clinical and translational research faculty in these series will obtain a career development award or equivalent to attain grant support of > 50%* within the first few years on the faculty. Other sources of support that maintain > 50% funding are also acceptable and encouraged as noted above. As researchers are promoted, the Department places special emphasis on the continued likelihood of long-term extramural support beyond a career award. These criteria reflect the Department's goal of using limited resources to support individuals who will build and expand programs, mentor trainees, and generate the maximum impact from the investments and commitments associated with promotion.

In general, NIH awards will be weighted more heavily in the consideration for promotion than other types of support with the understanding that some research does not lend itself to NIH funding.

**Documentation of effort:** The Department recognizes that high quality clinical and translational research often requires multidisciplinary teamwork, a prolonged time frame for clinically meaningful results, and substantial funding. Therefore, it is especially important for researchers to document:

- Contributions to the Advancement of Health Care: Meaningful participation in high-quality multidisciplinary research that addresses important questions in the investigator's chosen field(s).
• Publications: Clear indication of role in publication, especially for second-
and senior authored manuscripts**.

• Recognition by Peers/ Public Service: Speaking invitations (or other roles)
at major conferences or academic venues, regional or national committee
assignments, service as an ad hoc reviewer for journals, national
committees, NIH consensus conferences, participation on NIH review
groups and letters of support attesting to the investigator's contributions. It
is expected there will be a progression to leadership roles (i.e., chair of
conferences, committees, societies, or NIH review groups) as researchers
progress through the ranks of Assistant, Associate and Professor.

• University Service – Includes department, school, campus, & hospital
service and should be minimal at the Assistant level with progression of
responsibilities as researchers progress through the ranks of Associate
and Professor.

• Teaching & Mentoring – Includes mentoring junior faculty, fellows,
residents & students in research projects and careers, participation in
research fellowship training, classroom lectures (focus on research
methods), and continuing medical education. At the Associate and
Professor levels, responsibility should progress to leadership roles, i.e.
lead mentorship, director of research training programs, and/or director of
mentoring programs.

Salary Support: All faculty are expected to fully support their salary. Beyond
grant support, clinician researchers may use clinical income, teaching and/or
administration funding sources. Non-clinician researchers are encouraged to
develop sources of funding from teaching or administration to fully support their
salary beyond extramural funding.

_The "correct" or "best" series usually is the one that most closely aligns
with the faculty member's career goals and academic background._

III. Ladder Rank and In Residence Series

In the Department, the Ladder Rank and In Residence tracks have identical
expectations and responsibilities. Appointment, advancement, and promotion in
both series require excellence in research, teaching and mentoring, professional
activities** (clinical activities, if appropriate), and University/public service: all of
the criteria in the APM for these series must be met.

Appointment: A national search is required to appoint a faculty member in the
Ladder Rank or In Residence series.
• Promotion to Associate Professor: **There is an "eight-year rule".**

An Assistant Professor in Ladder Rank or In Residence series who has completed eight years of service in that title, or 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. It is critical that you are aware that your eight year clock starts with your initial appointment, includes your years as an instructor, and that your progress will be evaluated during your fourth year by an Appraisal of Achievement & Promise as described in the previous section.

**Adjunct Series**

For appointment, advancement, and promotion in the Adjunct series of C & T Researchers, the Department requires excellence in research and preferably more than one of the following categories:

1. Teaching and Mentoring
2. Professional Activities** (clinical activities, if appropriate) and/or
3. University/Public Service.

Exceptional achievements in one area may compensate for less activity in another area, i.e., a balance in all four categories is not required.

- Appointment: A national search is not required for an initial appointment in this series and a search waiver can be obtained. A search for the position is expected in 2-5 years.
- Promotion to Associate Professor: There is not a required "eight-year rule" in the Adjunct series.

Many Assistant Professors who intend eventually to succeed in the In-Residence series are initially appointed in the Adjunct series to allow for the possibility of more than 8 years at the assistant level prior to evaluation for promotion to Associate and a possible change in series. However, please note that UCSF is the only campus that does not apply the 8-year rule to the Adjunct or HS Clinical series. BUT, if a faculty member transfers to another UC, their time in that series at UCSF will count for purposes of the 8-year rule. Further, if they transfer to UCSF from another UC, their time as an Assistant Adjunct or Assistant HS Clinical on that campus will count toward the 8-year rule here.
Advancement: Assistant Professors

General Concepts: Advancement at the Assistant Professor level is from step 1 to step 4, with step increases generally occurring every 2 years. Approval of step increases requires demonstrated progress in developing a clear research focus, detailed research program and in building national stature in the investigator's field. University and public service should be minimal at the Assistant level. Highly productive researchers may advance to Associate after Step 3.

Departmental Publication Guidelines: For on time advancement, the Department expects increasing productivity over time. For faculty with clinical responsibilities and/or clinical, teaching and/or administrative leadership that are critical to the mission of the department, the expectation for publications is slightly lower and will depend on the level and demands of these other duties.

Publications: Clear indication of role in publication should be stated for second and senior authored manuscripts**. Due to the multidisciplinary nature of clinical and translational research, it is understandable that publications may include a lead mentor or supervisor and the researcher should document independence for clarity.

Departmental Grant Support Guidelines: The primary compensation source for the Ladder Rank, In Residence and Adjunct series is extramural. It is expected that virtually all junior clinical and translational research faculty in these series will obtain a career development award or equivalent to attain grant support of > 50%* within the first few years on the faculty. Other sources of support that maintain > 50% funding are essential.

Recognition by Peers/Public Service: Speaking invitations (or other roles) at major conferences or academic venues, regional or national committee assignments, service as an ad hoc reviewer for journals, national committees, NIH consensus conferences, participation on NIH review groups and letters of support attesting to the investigator's contributions are required.

University Service: Should be minimal at this level.

Appraisal of Achievement & Promise: At approximately year 4 after appointment, an Appraisal of Achievement & Promise will occur for all junior faculty in the academic senate series (In Residence, Ladder Rank). For Adjunct faculty, an internal departmental review or an Appraisal of Achievement & Promise can be requested and may be approved for full CAP review. 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 with their mentoring team determines the exact timing of this
appraisal based on perceived accomplishments and need for feedback within the 3-6 years of appointment.

Promotion: Assistant to Associate

General Concepts: Promotion to Associate Professor requires national recognition for independent contributions to research. The Department places special emphasis on independence, high impact publications, and the continued likelihood of long-term extramural support. These criteria reflect the Department's goal of using limited resources to support individuals who will build programs, mentor trainees, and generate the maximum impact from the investments and commitments associated with promotion.

Departmental Publication Guidelines: A successful promotion package is expected to include many peer-reviewed publications. First, second or senior authored** publications are particularly important, and publications in high impact journals for research faculty. For research faculty with clinical responsibilities and/or clinical, teaching and/or administrative leadership that are critical to the mission of the department, the expectation for publications is slightly lower and will depend on the level and demands of these other duties.

Departmental Grant Support Guidelines: The primary compensation source for the Ladder Rank, In Residence and Adjunct series remains extramural funding. At promotion to Associate Professor level, the Department expects that a faculty member will receive support as a principal investigator on an NIH R01 or equivalent***. Collaborative grant support mechanisms for multidisciplinary projects (such as U01, P01, etc.) are as worthy as independent single-investigator initiated mechanisms if the investigator is a key contributor to the project (Co-PI or PI of a distinct component). Other sources of support that maintain > 50% funding are essential. It is expected the researcher has progressed from a mentored career development award or equivalent to independent funding.

Change in Series: Adjunct to FTE or In Residence

A junior faculty member may request a change in series at any point. A change in series to In Residence or Ladder Rank requires above all excellence in research, as demonstrated by grant support, publications and impact on the investigator's field.

For research faculty, integration into the department is also of primary importance, as shown by teaching and mentoring, collaboration and contribution to the vigor of the department.

Generally, a change in series is considered at the time of promotion to Associate Professor, or at the point considered optimal given individual progress. Change
in series requires fulfillment of the criteria for the new series and a national search.

**Advancement: Associate Professors**

**General Concepts:** In general, advancement at the Associate Professor level requires:

- expanding national recognition and beginning to build an international reputation
- building leadership of a research program
- some progression to senior authored publications
- training and mentoring of junior investigators

Advancement at the Associate Professor level is from step 1 through step 4 or 5, with step increases generally occurring every 2 years. Approval of step increases requires demonstrated progress in maintaining an active, independent research program with secure funding, and maintaining a national reputation as well as beginning to develop an international reputation. University and public service should increase at the Associate Professor level.

**Departmental Publication Guidelines:** For on time advancement, the Department expects increasing productivity over time. For faculty with clinical responsibilities and/or clinical, teaching and/or administrative leadership that are critical to the mission of the department, the expectation for publications is slightly lower and will depend on the level and demands of these other duties. At later stages, the researcher should have some senior authored publications.*

**Departmental Grant Support Guidelines:** The primary compensation source for the Ladder Rank, In Residence and Adjunct series remains extramural funding. At the Associate Professor level, the Department expects that a faculty member will receive support as a principal investigator on an NIH R01 or equivalent***. Collaborative grant support mechanisms for multidisciplinary projects (such as U01, P01, etc.) are as worthy as independent single-investigator initiated mechanisms if the investigator is a key contributor to the project (Co-PI or PI of a distinct component). Other sources of support that maintain > 50% funding are essential.
Promotion: Associate to Professor

General Concepts: Promotion to Professor requires international recognition for independent contributions to research. The Department places special emphasis on independence, high impact publications, and the continued likelihood of long-term extramural support. These criteria reflect the Department's goal of using limited resources to support individuals who continue to build programs, mentor trainees, and generate the maximum impact from the investments and commitments associated with promotion.

Departmental Publication Guidelines: A successful promotion package is expected to include mostly first-, second-, or last-authored papers and publications in high impact journals. For faculty with clinical or leadership in teaching and/or administrative responsibilities that are critical to the mission of the department, the expectation is slightly lower depending on the level of duties. (See above).

Departmental Grant Support Guidelines: A successful promotion package is expected to include a record of consistent extramural salary support for research as a principal investigator on NIH R01 grants or the equivalent**. Leadership on collaborative grant support mechanisms for multidisciplinary projects (such as U01, P01, etc.) are as worthy as independent single-investigator initiated mechanisms if the investigator is PI of the overall project (very highly valued) or of an important component. Other sources of support that maintain > 50% funding are essential.

Other criteria:

- Contribution to the Advancement of Science: Leadership positions in a focused area of research 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 and/or international meetings, workshop committees, training foreign research fellows, service on international committees, lectures and paper presentations at international meetings are highly valued. Participation and/or chair of NIH review committees are highly valued.

- Training & Mentoring: Success in developing young investigators and launching their careers as investigators.
For research faculty in the In Residence & Ladder Rank series, integration into the department is also of primary importance, as shown by teaching and mentoring, collaboration and contribution to the vigor of the department.

Advancement: Professor

General Concepts: In general, advancement at the Professor level requires:

– Maintenance and expansion of national and international recognition
– Leadership of an established research program
– Leadership in training and mentoring of junior investigators.

Advancement at the Professor level is from step 1 through step 4, with step increases generally occurring every 3 years.

Departmental Publication Guidelines: For on-time advancement in the Professor rank, the Department expects that the rate of publication should increase as the faculty member advances. For faculty with clinical or leadership in teaching and/or administrative responsibilities+, the expectation is slightly lower depending on the level of duties. Progression of publications should show movement of the faculty member to senior author.

Departmental Grant Support Guidelines: The primary compensation source for the Ladder Rank, In Residence and Adjunct series remains extramural funding. At the Professor level, the Department expects that a faculty member will receive support as a principal investigator on an NIH R01 or equivalent*** as well as collaborative grant support mechanisms for multidisciplinary projects (such as U01, P01, P50 etc.) and the role of PI is highly valued. Other sources of support that maintain > 50% funding, are essential.

Promotion: Professor 5 to 6

Departmental Publication Guidelines: A successful promotion package is expected to include an increasing rate of peer-reviewed publications with many first-, second-, or senior authored publications in high impact journals. Progression of publications should show movement of the faculty member to last or senior author.

Departmental Grant Support Guidelines: A successful promotion package is expected to include a record of consistent extramural salary support for research as a principal investigator on NIH R01 grants or the equivalent*** and PI of larger collaborative grants (U01, P01, P50 etc) is highly valued. Other sources of support that maintain > 50% funding are essential.
Other criteria:

– 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 and international meetings, workshop committees, training foreign research fellows, service on international committees, lectures and paper presentations at international meetings, participation and/or chair of NIH review committees.

– Training & Mentoring: Leadership role in developing young investigators and launching their careers as investigators.

*The lower of: salary or NIH Cap

**Senior authored is considered last authored in which the faculty member has an especially significant senior role.

*** Grant support from the NIH or similar federal agencies (CDC, DOD) is expected, and the Department also recognizes the value of other funding sources such as major foundations, cooperative agreements and contracts, professional societies and pharmaceutical or biotech companies as long as research is investigator initiated (IIR) that contributes to the improvement of health or alleviation of disease.

IV. Frequently Asked Questions:

1. For research faculty with clinical responsibilities and/or clinical, teaching and/or administrative leadership that are critical to the mission of the department, the expectation for publications is slightly lower and will depend on the level and demands of these other duties.

   What is critical to the mission of the department? Researchers should clarify these duties with their Division Director and Chair prior to accepting responsibilities to confirm the activity is acceptable to slightly lower the expectation for their level of publication and document this agreement in writing for use at the time of advancement or promotion.

2. What is University Service? University Service is department, school, campus, & hospital service

3. What is Public Service? This includes:
Professional Activities: Participation in local, national, and international societies (later ranks): regional or national committee assignments; Society officer or chair of committees at later ranks.

Research Activities: Service on grant review committees (NIH, foundation); service as an ad hoc reviewer for journals; journal editor, chair of review committees at later ranks.

Speaking invitations (or other roles) at major conferences or academic venues

4. Is there any reason not to move as quickly as possible to Associate or Professor?

In general, move at a pace that will make you successful for promotion!

If you move too quickly through the Assistant rank, you may not have a sufficient promotion package for Associate promotion. Also for C & T Researchers, once you become an Associate, you often do not qualify for many intramural and extramural grants. The same is true for Associate to Professor - if you move too quickly through the Associate rank, you may not have a sufficient promotion package for Professor. Also, for example, at many NIH institutes, Professors do not qualify to apply for a K24 mid career award that can be up to 50% support for 5 years. If you receive one as an Associate, you can apply for a renewal as a Professor.
All Series

Appendix

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/