INTRODUCTION

The clinical faculty member advances the clinical service mission of the Department by:

- Providing general and pediatric sub-specialty services in a manner that is consistent with patient expectations for timeliness and ease of access.
- Enhancing the management and efficiency of the clinical services.
- Teaching/training medical students, residents and fellows, if circumstances permit.

Clinical faculty have the title of (HSF) Instructor, Assistant Professor, Associate Professor, or Professor.

INITIAL APPOINTMENT CRITERIA

Faculty in the clinical faculty track (CFT) are persons whose:

- Appointment is 0.5 FTE or greater
- Primary responsibility is to provide direct clinical service
- Sole employer for clinical practice is Health Services Foundation (HSF)

Entry level for faculty appointment on the CFT is usually at the Instructor rank. This rank requires completion of formal training to meet Board requirements. In general, appointment at the instructor level should be not more than three years. Appointment packets must include at least three letters attesting to the clinical skills of the individual.

At the time of new clinical faculty appointments, the specific scope of responsibilities is established. These responsibilities will be reviewed annually by the Division Director and form the basis for renewal or nonrenewal of the clinical faculty appointment.

CFT appointments are annual appointments for the academic year July 1- June 30. Decisions regarding reappointment are made by March 31 of the first year and by December 31 each succeeding year.

The policy and expectation of UAB School of Medicine, the Department of Pediatrics, and HSF (UAB Enterprise) is that all faculty conduct themselves with professionalism, dignity, and respect in their interactions with patients, students, members of the public, and each other, as outlined in the UAB Enterprise Code of Conduct. Professionalism includes demonstration of excellence, integrity, respect, compassion, accountability, and a commitment to altruism in all work interactions and responsibilities.
PROMOTION CRITERIA FOR CLINICAL FACULTY

Promotion criteria are based on the quality of an individual’s substantive, documented contributions to the clinical missions of the relevant division. Time in rank alone is not sufficient for promotion, but is considered. (5 year minimum for promotion to Associate and full Professor)

Key criteria for appointment and promotion to Assistant Professor

This rank requires that the individual have training and experience substantially beyond that required for the rank of Instructor and that the person has contributed to clinical care, medical education, the medical profession, or the standing of the profession in the community in a substantial manner, exceeding the expectations for Instructor and meets expectations for professionalism. Board certification or eligibility and two years in rank is required for appointment or promotion to the rank of Assistant Professor or Associate Professor.

Key criteria for appointment and promotion to Associate Professor

- Meets expectations for professionalism
- Board certified or eligible in their respective specialty and subspecialty
- Excellence in clinical care
- Excellence in teaching, if applicable
- Administrative accomplishments when administration is a substantive part of the faculty member’s role
- Scholarly contributions will also be considered, but are not required at this rank.

This rank is reserved for those who have made high quality contributions, including clinical program development and/or service, of a substantial nature to the mission of the division, department, and the school.

Key criteria for appointment and promotion to Professor

- Meets expectations for professionalism
- Board certified in their respective specialty and subspecialty
- Excellence in clinical care
- Excellence in teaching, if applicable
- Administrative accomplishments when administration is a substantive part of the faculty member’s role
- Scholarly contributions will also be considered, but are not required at this rank.

This rank is reserved for those who have achieved local recognition as a leader in the discipline as evidenced by accomplishments in clinical care, clinical program
development, teaching, service in national or international professional societies, or scholarly contributions.

**Key criteria for appointment to Emeritus**

Emeritus status is reserved for clinical faculty who have retired from clinical activities and whose clinical, professional service, teaching or scholarly record has been highly meritorious, including sustained and substantial contributions to the missions of the division, department, and school. In general, Emeritus appointments require at least ten years of prior service and achievement of the rank of Associate Professor or Professor.

**EVALUATION CRITERIA**

**Professionalism**

Professionalism should be assessed annually by the Division Director as part of the annual review process. A faculty member is rated as consistently meeting expectations by demonstrating:

- Respect for colleagues, trainees, patients, staff, and visitors.
- Sensitivity and responsiveness to other's culture, age, gender, and disabilities.
- Responsibility as a leader and positive role model.
- A commitment to working as a team member who is accountable to others, confronts unprofessional behavior, fairly distributes finite resources, and works constructively to support established operational goals.
- HIPPA compliance, timely completion of medical records, accurate professional fee billing.
- Commitment to improving quality of care, personal and patient safety, and appropriate use of hospital resources.
- For faculty engaged in research: protection of human subjects, humane treatment of animals, intellectual integrity, and adherence to university research regulations.
- Management of conflicts of interest.

**Clinical Care**

At the time of the initial appointment as a clinical faculty member, guidelines should be established that can be used for the evaluation of clinical service and productivity. Examples of guidelines include number of patients seen, clinical revenues, half days of clinic practice, hours/shifts worked, weeks of inpatient attending and or consultations performed, and types of services to be provided. Specific guidelines should be individualized for each clinical faculty member and should be developed by the Division Director with the concurrence of the Department Chair.
**Peer clinical evaluations.** For promotion on this track, the faculty member must be an excellent clinician. Peer clinical evaluations are conducted using a structured format adopted by the Department. Evaluations focus on two main areas:

1. Medical knowledge, problem-solving skills, management of complex patients, team work, and overall clinical skills.
2. Professionalism, responsibility, compassion, and management of the psychosocial aspects of illness

At least 6 peer clinical evaluations are requested before promotion to Associate Professor and to Professor. Peer evaluators are chosen by the faculty member and Division Director. Peers are usually faculty who work with the individual in the same clinical setting; however, in some instances non-physicians who work closely with the faculty member in clinical settings, such as a nurse practitioner, may provide an evaluation. Some of the faculty evaluators should be outside of the individual’s Division.

After initial appointment, each clinical faculty member should be evaluated yearly by the Division Director to determine reappointment status and progress towards promotion.

**Teaching**

**Teaching evaluations.** If teaching is an established responsibility (circumstances permit) inclusion of any and all formal evaluations of teaching and/or mentoring in all venues is the responsibility of each faculty member. This educational portfolio should include the following:

- Teaching evaluations from students, residents, or other audiences, including practitioners participating in continuing medical education courses.
- Formal evaluations by persons who have been mentored, as well as evidence of the impact of the mentoring on the person’s career (If an established responsibility).

At the time of consideration of promotion, submitted teaching evaluations are evaluated internally by the DOP CFT Promotions Committee.

**Administration and Professional Service**

Administrative responsibilities and professional service may be focused in a hospital, the DOP, the School of Medicine or University, or other. Evaluation of the faculty member’s performance occurs at the time of promotion (in the form of letters of support), and is based on expectations and goals set annually by the faculty member and the person(s) supervising the faculty member in these administrative activities.

Service contributions should be evaluated by the role, initiation, and accomplishments of the faculty member on committees, in projects, and in groups. Examples of professional service may include (not inclusively or exclusively):
• Membership in and/or chairmanship of divisional, departmental, school, and hospital committees and/or task forces at a level that is significant to the function of the committee and/or task force.
• Establishing, implementing and/or directing clinical programs.
• Service in regional, national, and international professional societies.
• Contribution of medical expertise to non-academic organizations or groups (e.g., community, regional and/or national non-profits).

Scholarship
Objective evidence of scholarship is neither required nor expected for clinical faculty appointment or promotion. However, any scholarly accomplishments of the faculty member will be taken into consideration at the time of promotion. These may include activities such as:

• Clinical research (disease descriptions, case reports, participation in clinical trials, scholarly reviews in peer-reviewed journals, and book chapters).
• Quality improvement initiatives including implementation of care pathways, process redesign, patient safety etc.
• Medical education (e.g., development and implementation of curriculum, teaching strategies, testing methods).
• Program development in medicine or medical education, which should be published whenever possible.

OTHER

Self assessments
As part of the promotion packet, the faculty member describes the following:

• Clinical care: His/her clinical responsibilities, programs developed, and their relationship to his/her teaching, scholarly, and administrative roles (if applicable)
• Teaching (if applicable): His/her teaching/mentoring philosophy and teaching/mentoring responsibilities and goals.
• Scholarly activities (if applicable): The focus of his/her scholarly activities and the relationship of his/her scholarly activities to his/her clinical care and teaching.
• Administration (if applicable): His/her administrative responsibilities, including goals and achievements.

Switching tracks
Faculty in UABSOM academic tracks (TE/NTE) may resign from the faculty and apply for appointment to a CFT position in accordance with the process defined for CFT appointments.

Clinical faculty may apply for appointment to an academic faculty position in accordance with the process defined for academic faculty appointments.
Process

The Clinical DOP promotion committee will consist of 7 members, 4 of whom are chosen by vote of DOP faculty. The DOP Vice-Chair for Clinical Services, COA Chief Medical Officer, and DOP Director of Faculty Development will serve as the remaining 3 voting committee members. The 7 members will elect a Chair. Members will serve a term of 4 years and may be reelected. Only one member per Division may be elected at any one time for the 4 at large positions. Until the committee is elected and seated the current Clinical Faculty Promotion Task Force members will constitute the CFT promotion committee.

The process and timelines for submitting promotion applications in the CFT will be similar (but separate) to those used in the academic tracks, with the exception that the final decision of promotion rests with the DOP CFT promotion committee and DOP Chair (applications will not be sent to UAB faculty council).

Calendar for Clinical Promotion Award Process

**May 1**
Candidate(s) identified by Division Director via letter of nomination to the review committee outlining faculty’s contributions.

**May – June**
Candidate meetings with Department Chair

**May – September**
Promotion award proposal preparation period

**September**
Deadline for submitting promotion proposal to committee

**November 1**
Notification of approved proposals

**January 1**
Promotion effective date
Document adapted from Full-Time Clinical Faculty Track Appointment and Promotion Guidelines: Department of Pediatrics, University of Washington, Seattle