

School of Medicine Promotion and Tenure Instructions for Academic Year 2020-2021

Calendar for Submission of Promotion and Tenure Award Proposals

NOVEMBER 2020 - The Dean will distribute written notification and projected calendar to Department Chairs/Administrators, and Faculty Council members regarding the 2021 promotion/tenure award cycle.

DECEMBER/JANUARY/FEBRUARY - Departments/Divisions prepare promotion and/or tenure award proposals as outlined in the School of Medicine instructions. These proposals require review and approval or denial by the Department Appointment, Promotion and Tenure committee prior to submission for review and consideration by the Faculty Council.

MARCH 1, 2021 - Deadline for submitting promotion/tenure award proposals from Departments to SOM

Faculty must consult their individual Departments to determine Departmental and Divisional deadlines for promotion/tenure award proposals. As packets are approved by Department Appointment, Promotion and Tenure committees, PDF files must be bookmarked (per instructions) and uploaded to the [SOM Faculty Promotion and Tenure Management website](#). The deadline for the initial upload is **Monday, March 1, 2021; however, we encourage Departments to submit completed packets as early as possible.** The Dean's Office HR Team will review packets and notify departments about necessary revisions.

MARCH 26, 2021 - Deadline for submitting final promotion/tenure award proposals

All revisions must be made and the final PDF file uploaded to the [SOM Faculty Promotion and Tenure Management website](#) by Friday, March 26, 2021.

APRIL - The SOM Faculty Council reviews the promotion and tenure packets that have been uploaded into the SOM Faculty Promotion and Tenure Management website.

MAY 3 and 4, 2021 - Faculty Council will meet Monday, May 3 and Tuesday, May 4, 2021 to review the promotion and tenure award proposals as submitted by the Departments

MAY (Third week) - Written notification will be sent to Department Chairs regarding Faculty Council's recommendations for denial of promotion and/or tenure award. The Faculty Council Chair will also discuss recommendations for denial of promotion and/or tenure award with the Department Chair.

MAY 25, 2021 - Requests for appeals for denied promotion and/or awards of tenure are due to the SOM

JUNE 7 & 8, 2021 - Meeting(s) of the Faculty Council to hear appeals for denied promotion and tenure

JUNE (Third week) - Faculty Council will make recommendations to the Dean for approval/denial of promotion and/or awards of tenure

JULY 1, 2021 - Dean(s) submit recommendations for approval of promotions and/or awards of tenure to the Provost

JULY - The Provost reviews promotion and tenure packets and submits recommendations for approval/denial of Schools of Medicine/Dentistry faculty promotion and/or tenure award proposals to the President.

AUGUST

- A) The Provost and/or President's Office provides notification to the Dean(s) regarding approval of Schools of Medicine/Dentistry faculty promotion and/or tenure award proposals. Approved proposals are then forwarded to Personnel Records. Proposals denied at this level are returned to the School of Medicine Dean's Office for appropriate action and/or follow-up, as necessary.
- B) President/Provost and/or Dean(s) will notify department chairs and faculty regarding approval of promotion and/or tenure award proposals.
- C) Department Chairs confirm with the faculty member approval of promotion and/or tenure award or inform the faculty member of promotion and/or tenure award denial

SEPTEMBER - Department Administrators submit Faculty Data Form and ACT document for each faculty member reflecting the appropriate change in rank as approved and any associated salary increase.

INSTRUCTIONS FOR SUBMITTING PROMOTION/TENURE AWARD PROPOSALS

Faculty promotion and award of tenure are based on a faculty member's training, experience, activities, and the potential for continued growth in **teaching, research and service, as well as scholarly and other creative activities**. A faculty member's achievements will be evaluated using these criteria in proportion to their relative importance for the academic rank held by the faculty member and the program priorities of the appointing unit. Colleagues within UAB, as well as colleagues outside of the institution shall evaluate the faculty member in these areas.

Promotion and/or tenure award proposals requiring review by the Faculty Council are to be submitted by the established deadline of **March 1, 2021**. Please see the calendar for an overview of the complete promotion and tenure cycle.

Proposals should be submitted as follows:

- Each proposal packet should be uploaded as a PDF file to the School of Medicine Promotion and Tenure Management Site (<https://apps.medicine.uab.edu/Promotions>). This site is accessible to both the primary department representative and the department APTC chair.
- **The sections in the PDF must be in a specific order and properly bookmarked** (e.g., Promotion/Tenure Action Summary Form, SOM Promotion and Tenure Guidelines, etc.).
- **If the proper format and/or forms are not used, the proposal will be returned to the Department to be resubmitted with the correct, revised forms and/or format.**

DETAILED OVERVIEW FOR ASSEMBLING THE PROPOSAL:

- 1) **SOM Promotion/Tenure Action Summary Form**
Complete all applicable fields. The form must be signed and dated by the candidate who is up for promotion and/or award of tenure. **This form must be the first page of packet.** Please do not insert a cover sheet.
- 2) **SOM Promotion and Tenure Guidelines (Revised September 2016)**
Attached. **Do not include departmental guidelines.**
- 3) **Curriculum Vitae**
Must be current and in **standardized SOM format.**
- 4) **Recommendation Reports/Letters**
This section should include a **signed and dated report or letter** from the following, clearly indicating the title/role of individual(s) making the recommendation: Department Review Committee, Department Chair, School Committee and Dean. **If there are votes against a candidate at any stage of the process, or if the Chair or Dean disagree with a majority vote, these must be addressed in reports/letters.**

NOTE: Letter of support from the Department Chair and/or Division Director should include:

- a) An introductory paragraph that explicitly states the candidate's current faculty rank, current tenure status, the proposed action (Promotion and/or Award of Tenure), role in the Department, and his/her area(s) of excellence (1 for non-tenure earning appointment or 2 for tenure earning/tenure) for which he/she should be evaluated.
- b) A brief professional biographic summary of the candidate's educational and professional experience.
- c) Separate paragraphs describing why the candidate has achieved excellence in the designated area(s), and significant accomplishments in the remaining area(s).
- d) A summary, which includes an explicit statement of support (or non-support) for the proposed action(s). **If candidate is up for promotion and award of tenure, the letters need to clearly show support for both actions.**

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5) Teaching Portfolio – Evidence of Teaching Effectiveness

Summarize teaching reviews, including student ratings and other assessment methods used by the School (i.e., peer evaluation, reviews of course materials, teaching portfolio summaries). A summary table documenting all courses taught with summary scores is one way to present information. If IDEA student ratings are used, include scores for: progress on relevant objectives, overall ratings for excellent teacher, overall ratings for excellent course and summary evaluation. Teaching portfolio summary should be limited to two pages, single spaced and 11-point font. **Do not include individual student forms.**

6) Research Portfolio – Evidence of Research Productivity

This section should include any additional evidence that is not reflected in the vitae. Research portfolio summary should be limited to two pages, single spaced and 11-point font. **Reprints should not be included in this section. Reprints should be added to section 11 below.**

7) Service Portfolio – Summary of Service Activities

This section should include any additional evidence that is not reflected in the vitae. See “Portfolio” section attached. Service portfolio summary should be limited to two pages, single spaced and 11-point font.

8) Annual Reviews

Include annual performance reviews from Department Chairs, as well as pre-tenure and/or pre-promotion reviews from departmental and school review committees. The School of Medicine requires at least three annual reviews; however, it is preferable to have evaluations dating back to appointment/promotion to the current faculty rank. Arrange in chronological order within this section and make sure that evaluations are signed by the chair/evaluators and the faculty member.

9) External Reviewer Letters

Letters by references external to UAB (min=3; max=5). Letters from external and internal reviewers are an area of emphasis that can substantially influence how the candidate’s application is judged. See page 5-6 for a guide/checklist for identifying reviewers and requesting letters.

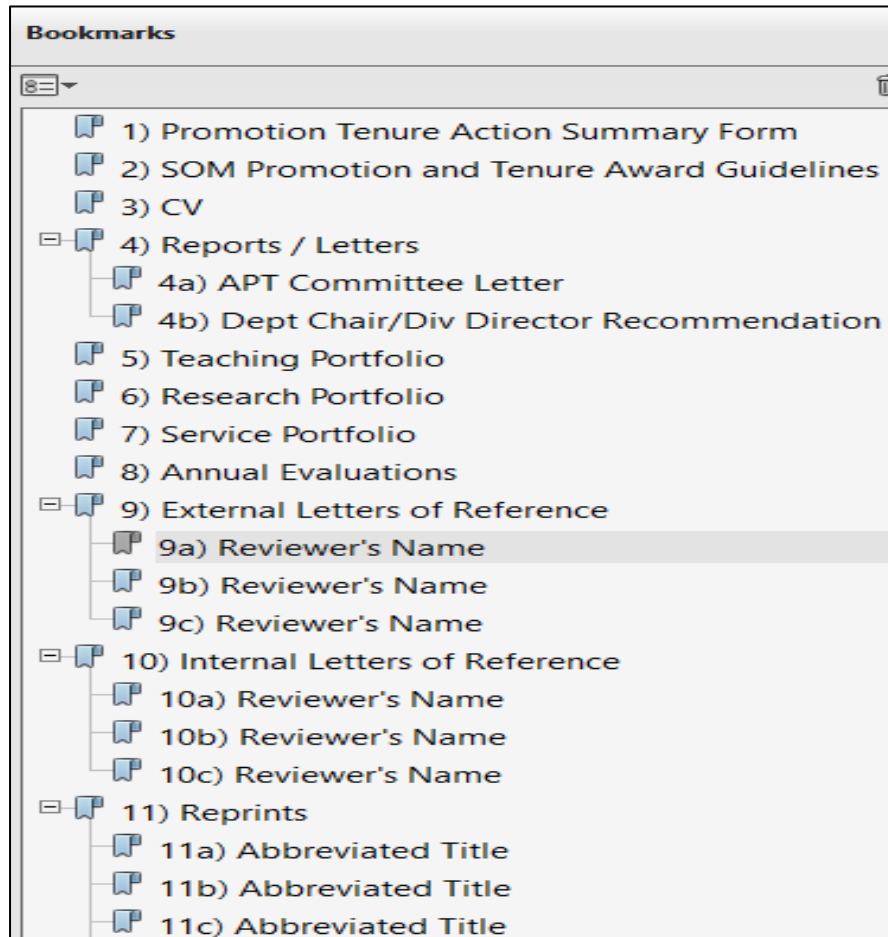
10) Internal Reviewer Letters

Letters by references internal to UAB (min=3; max=5). See page 5-6 for a guide/checklist for identifying reviewers and requesting letters.

11) Reprints

Copies of publication/reprints or other evidence of scholarship/research productivity.
(Associate Professor = 3 major reprints; Professor = 5 major reprints).

Instructions for Bookmarking and Naming Each Section of the PDF File



Identifying UAB School of Medicine Promotion Candidate Reviewers

Identifying reviewers for promotion candidates is a time-consuming activity that can substantially influence how the candidate's application is judged. Specifically, these letters are an important type of peer-review that is central to this process. The following checklist has been developed to assist you and the promotion candidates in this process. We suggest that you provide UAB School of Medicine Criteria for Promotion and/or Award of Tenure to the reviewer, the promotion candidate's CV, and a summary of the candidates list of achievements to help the letter writer focus on important facts. External letters should be returned to the Department P&T Representative, the APT Chair or the Department Chair, not the promotion candidate. Upon receipt of the letter, the Department should promptly review to ensure the letter meets all the criteria outlined below. The department should submit a minimum of three (3) and maximum of five (5) external letters and a minimum of three (3) and maximum of five (5) internal letters in the promotion packet.

Checklist for Requesting Reviewer Letters

1. Request at least five internal and external reviewers to make certain that a minimum number of properly formatted letters can be included in the packet.
2. External reviewers must not be currently affiliated with UAB nor affiliated with UAB in the last five years.
3. Internal reviewers must be currently appointed at UAB or an affiliated institution (TCH, UAHSF, SRI and/or VA).
4. Reviewers must have an academic rank equal to or higher than that being sought by the candidate
5. Reviewers should have recognized achievements within the candidate's declared area(s) of expertise, or closely aligned with such area(s).
6. Reviewers must be at "arm's length" and therefore may not be:
 - a close friend or relative
 - a recent co-worker, supervisor, advisor, student, or mentor of the candidate ('recent' being defined as within the last five years for candidates for Associate Professor and within the last ten years for candidates for Professor)
 - in a financial relationship with the candidate
 - a recent co-author, collaborator, or co-investigator of the candidate (e.g., within the last three years)
7. All letters should be on official letterhead and signed.
8. Reviewers must state the candidate's current and proposed academic rank/tenure status.
9. Reviewers should state in the letter what they are evaluating (promotion, award of tenure or both).
10. Reviewers should state and review the areas of excellence (one for Non-tenure earning and two for Tenure-earning and Tenure).

Email Template for Communication with Potential Reviewers

Dear Dr. *****,

The UAB Department of ***** plans to propose Dr. ***** for promotion to [insert rank and tenure status] from [his/her] current rank of [insert current rank and current tenure status]. Excellence in [insert appropriate number-one for NTE and two for TE and Tenure] of our three core missions (research, teaching, service) [is/are] the standard for promotion in the Department of *****. Our proposal will be supported primarily on the basis of Dr. ***** excellence in [insert areas of excellence]. A copy of the School of Medicine guidelines for promotion and award of tenure are attached.

Institutional policy requires that intramural and extramural evaluations of proposed candidates be obtained from persons who have had significant contact with the candidate, are considered to have an “arm’s length” relationship with the candidate or who are authorities in their field. Accordingly, I ask that you provide an evaluation of Dr. ***** focusing on, but not limited to, the areas mentioned above.

In your letter please state that you are evaluating Dr. ***** for promotion from [insert current rank and tenure status], to [insert proposed rank and tenure status], on the basis of [his/her] [insert areas of excellence] (research, teaching, service)] activities. It would also be helpful to reviewers to know whether Dr. ***** would be promoted and awarded tenure at your institution. To aid with your evaluation, I have attached a copy of Dr. ***** curriculum vitae and a list of significant achievements.

I recognize how much of your time and effort is needed to respond to this request, but I assure you that your evaluation is of great importance. In order to meet the various deadlines associated with this process, I am requesting your letter of evaluation by [insert deadline to respond]. You may either scan and email a copy of your letter to me at *****@uabmc.edu or fax [insert area code and number].

Please contact me with any questions or concerns. If you cannot meet the deadline or do not feel you are in a position to evaluate Dr. *****, I need to know this information as soon as possible.

Many thanks for your input and assistance.

Sincerely,

TO: Deans
FROM: Pam Benoit, PhD
RE: Promotion and Tenure Decision Guidance
DATE: October 14, 2020

The deadlines for submissions of promotion and tenure recommendations from your respective schools, college, and the UAB Libraries for the AY 2020-2021 promotion and tenure cycle is as follows:

- Business, CAS, Education, Engineering: April 16, 2021
- Dentistry, Health Professions, Nursing, Optometry, Public Health, and UAB Libraries: May 27, 2021
- Medicine and Academic Joint Departments: July 1, 2021

Separately, we will be sending to each of you and to your respective dean's office administrators a list of tenure-track faculty members whom we have identified as requiring tenure review in the 2020-2021 cycle.

As usual, instructions for compiling promotion and tenure materials can be found at the [Provost's Faculty webpage](#). **Please note that the instructions have changed from last year, because we have had to build an all-electronic system for submission of materials.** As in past years, we will have to return to a department any application that does not follow the required format.

I would also like to note two other substantive matters for the upcoming cycle:

Covid-19 Context

Obviously, faculty have faced unprecedented circumstances due to the Covid-19 global pandemic. Courses were moved online; our campus went into limited business operations; a new concept of "hybrid" teaching was introduced; conferences were cancelled; experiments were interrupted. Early on, UAB announced two important changes to our faculty review processes: an automatic one-year tenure clock extension (with the ability to opt out) and limiting how student evaluations of teaching from the Spring, Summer, and Fall 2020 semesters will be used.

It is important that reviewers of promotion and tenure applications acknowledge the tenure clock and student evaluations measures in writing in the reviews, and not use those measures in a negative way against applicants. For example, it might be inappropriate to rest a P&T decision on a lack of recent improvement in student evaluations, inasmuch as instructors were permitted not to use them for the past few semesters.

On a case-by-case basis, reviewers should adjust expectations for faculty scholarship during this period. It is difficult to generalize, but the following Covid-19 circumstances that are beyond the control of faculty may well have adversely affected their scholarly activities:

- Data collection with human subjects;
- Closure of libraries and labs;
- Cancellation of invited lectures;
- Delay of journal reviews;
- Increased time demands from teaching to ensure continuity of student educations (e.g., adjusting courses for remote and hybrid formats); and
- Caregiving obligations.

Opportunities for successful service activities have also been curtailed.

Reviewers should have an interactive dialogue with faculty being reviewed on the topics listed above, reach agreement on how performance expectations should be adjusted; and document those adjustments. What we are trying to avoid is a faculty member with a negative P&T decision claiming that there was agreement on adjusting expectations but then claiming that Covid-19 circumstances beyond their control were nonetheless used against them.

Accessibility of Promotion and Tenure Guidance

The Faculty Senate has told us that in many cases faculty do not feel that they know where to go for their promotion and tenure criteria (usually in faculty handbooks), with some departments (those that have separate criteria) and schools not making these criteria available online. I think it is crucial that at all points in their careers our faculty have ready access to this guidance. We have added a new page to the Provost's Faculty Webpage that will direct faculty either to your online site for these criteria (which could require a further log-in if you do not wish them to be available to the public), or to the email address of your associate dean for faculty matters. I strongly urge you to make these materials available online.

Thank you for your attention to this guidance. As always, I am happy to discuss any particular concerns or questions you might have.

cc: Stephen A. Yoder
Janice B. Ward

Faculty Appointment, Promotion and Tenure Award Guidelines
UAB School of Medicine
September 2016

Departmental Appointment, Promotion and Tenure (APT) Committee Guidelines

1. Committee members should be full-time faculty at the Associate Professor and Professor ranks.
2. The APT committee will consist of a minimum of three committee members.
3. Department Chairs may not serve on the departmental APT committee.
4. Chair of the departmental APT committee should be elected by the committee members in consultation with the Department Chair.
5. Members of the committee should rotate off on a regular basis if feasible.
6. The Departmental APT process will include an avenue of appeal.
7. Only the committee members at or above the rank of the faculty member being considered will be allowed to vote for promotion. Only tenured faculty may vote on the granting of tenure.
8. The Department Chair may invite faculty outside of the Department, but within the University of Alabama School of Medicine (SOM) to serve on the departmental APT committee if there are not enough faculty of the appropriate rank and tenure status to constitute a committee.

Appointment and Promotion Guidelines

Faculty member contributions to activities in the areas of research, teaching, and service are evaluated for promotion and tenure. All faculty members are expected to be engaged in scholarly activities that support the areas of research, teaching, and service in ways that are consistent with their unique roles. However, there is an expectation of excellence in these areas for those faculty members seeking tenure or promotion. This excellence is closely related to scholarship and includes peer review or recognition. Individuals appointed in the tenure-earning (TE) track are expected to demonstrate excellence or potential for excellence in at least two of these three areas; those in the non-tenure (NTE) track are expected to demonstrate excellence or potential for excellence in any one area. For promotion, individuals in the tenure-earning (TE) track are expected to demonstrate excellence in at least two of these three areas; those in the non-tenure earning (NTE) track are expected to demonstrate excellence in any one area. While promotion is based upon achieving excellence in two (TE) or one (NTE) area(s), faculty must show some evidence of scholarly activity and/or accomplishments in all areas, including the non-focus areas.

Assistant Professor

Promotion to this rank usually requires the following:

- Two or more years of work experience following receipt of Doctorate.
- Academic credentials and demonstration of level of specialized accomplishment appropriate to the mission of the Department and the SOM.
- An expectation of collegiality and participation in service in the Department and/or SOM.
- Demonstration of potential for scholarship in the areas of research, teaching, or service.

Associate Professor

Promotion to this rank usually requires the following:

- Three or more years in the rank of Assistant Professor.
- Academic credentials and demonstration of level of specialized accomplishment appropriate to the mission of the Department and the SOM.
- Demonstration of collegiality and involvement in the Department and/or SOM.
- Evidence of scholarship in the areas of research, teaching, or service, documented by peer recognition at a national level.

Examples of activities that are consistent with the above guidelines follow for each of the three academic activities:

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Research

1. Demonstration of initiative and independence in research activities in basic or translational science, clinical, outcomes, quality improvement or population-based research.
2. Publication of independent research findings and scholarly papers in peer-reviewed journals.
3. Obtaining grants and/or contracts for support of research.
4. Participation as a member of large research team(s), providing documented critical scientific contribution(s) or serving in a leadership role in directing the research.
5. Presentation of research and other scholarly findings at scientific and professional meetings.
6. Service on thesis or dissertation committees.

Teaching

1. Demonstration of mastery of content and method, documented by student and peer evaluation. All teaching activities should receive consideration.
2. Taking responsibility for the design, organization, coordination, and evaluation of an educational program.
3. Developing and/or presenting effective continuing education or other professional programs, including invited presentations.
4. Providing effective supervision, guidance, and/or counseling to trainees, including graduate students, postdoctoral fellows, and/or house officers.
5. Participation in educational program planning and general curricular activities.
6. Publication of papers and/or presentations at professional meetings on topics related to education.
7. Demonstration of innovation in teaching methods and production of texts, educational software or courseware.
8. Receipt of recognition as an exemplary scientist or clinician whose mentoring and teaching activities provide an outstanding role model for students.
9. Serving as principal investigator on grants or contracts for educational projects.

Service

1. Providing measurably excellent clinical productivity and exemplary patient care.
2. Providing demonstrable leadership or initiative in administrative or committee roles that augment the missions of the Department and/or SOM in clinical care, research, and/or education such as originality in problem solving, authorship of guidelines or quality reports and policies.
3. Providing staff responsibility for a service or specific area of patient care.
4. Providing demonstrable leadership in quality improvement/assurance or patient safety initiatives.
5. Serving as critical member or director of a research core laboratory.
6. Serving on committees with the department, school, university and/or affiliated institutions.
7. Engaging in mentoring junior faculty colleagues.
8. Serving on committees to develop clinical practice guidelines or to formulate healthcare policies.
9. Providing service to the professional or lay community through education, consultation or other roles.

Professor

Promotion to this rank usually requires the following:

- Distinguished performance as an associate professor, at least 3-5 years in rank.
- Academic credentials and demonstration of level of specialized accomplishment appropriate to the mission of the Department and the SOM.
- Demonstration of collegiality, involvement, and leadership as a citizen of the Department and/or SOM.
- Evidence of sustained scholarship and productivity in the areas of research, teaching, or service.
- Demonstration of national or international recognized excellence in the conduct of academic duties.

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Examples of activities that are consistent with the above guidelines follow for each of the three academic activities:

Research

1. Continued demonstration of initiative, independence, and sustained activity in basic science, clinical, outcomes, quality improvement or population research.
2. Sustained productivity as author of papers reporting independent research findings in peer-reviewed journals.
3. Record of sustained ability to obtain grants and contracts for support of research.
4. Receipt of recognition of excellence in research by professional or scientific institutions or organizations.
5. Continued critical contribution(s) to large research team(s).
6. Receipt of invitations to preside over sessions at national or international or scientific meetings.
7. Participation in external review committees, study sections, or service as editor of scientific or professional journals.

Teaching

1. Sustained and outstanding performance in the examples cited for the associate professor level.
2. Leadership through design, organization, coordination, and evaluation of educational programs.
3. Administrative responsibility at the school or departmental level for curriculum
4. Leadership in continuing education or other professional programs; invitations as visiting professor at other institutions.
5. Supervision of staff teaching within a course, division, department, or within the school.
6. Sustained productivity in publication of papers and/or presentations at professional meetings on topics related to education.
7. Sustained innovation and leadership in production of texts, educational software, or courseware.
8. Record of sustained ability to maintain external funding to support innovative educational projects.
9. Sustained recognition as an exemplary scientist, teacher or clinician whose activities provide an outstanding role model for students.

Service

1. Continued demonstration of excellence of measurably excellent clinical productivity and exemplary patient care.
2. Sustained exemplary leadership in administrative committee roles that augment the missions of the Department and/or SOM in clinical care, research and/or education such as originality in problem solving, authorship of guidelines or quality reports and policies.
3. Providing sustained responsibility for a service or specific area of patient care or clinical teaching.
4. Sustained excellence in the leadership of quality improvement/assurance or patient safety initiatives.
5. Recognition as an authority by other schools and departments within UAB and by local, state, regional and national organizations or institutions.
6. Appointment to responsible position(s) within the institution or its affiliates (e.g., chairs a committee, department, or division; membership on major Department or SOM committees).
7. Extensive and excellent mentorship of faculty colleagues.
8. Continued service on committees to develop clinical practice guidelines or to formulate regional or national healthcare policies.
9. Election to responsible positions on civic boards or organizations concerned with health care issues at the local, state, regional, national or international levels.

Tenure Guidelines

Any faculty member appointed to a tenure-earning faculty position shall have a maximum of ten years to earn tenure. This period will begin on the first day of October after the appointment on the tenure-earning track. If tenure

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has not been awarded in the ninth year, the appointment for the final year shall be a terminal appointment. To qualify for consideration of tenure during the terminal year, the individual must have been considered for tenure prior to the terminal year. Therefore, a promotion packet must be submitted for all faculty members in their ninth year on this track if tenure has not been awarded and if they chose to remain on the tenure track. Tenure decisions are made separately from appointment or promotion decisions. These decisions may be made at the same time or at separate points in time. Criteria for granting tenure include the following:

- Achievement of rank of at least Associate Professor
- Academic credentials consistent with the missions of the department and the SOM.
- National reputation reflected by peer recognition, presentations at national professional meetings, and productivity in published works.
- Evidence of positive institutional citizenship, manifest as effective participation in service activities, mentoring of more junior colleagues, support of university missions and values, collegiality and leadership initiative.
- Evidence of sustained, significant scholarship in at least two of three areas, including research, teaching, and service.

Faculty Council

The Faculty Council will serve as the Appointment, Promotion and Tenure Committee for the School of Medicine. This group will review and approve the initial appointment of all in-coming faculty members of the School of Medicine. Additionally, the Faculty Council will review all applications for promotion and tenure made by School of Medicine Faculty members. The composition and function of the Faculty Council is described below as outlined in the SOM by-laws.

The Faculty Council shall consist of Nineteen (19) full-time faculty members. Fourteen (14) members are elected by the faculty and the Dean shall appoint five (5) members. Department chairs may not serve as members and the Senior Associate Dean of Faculty Affairs and Professional Development shall serve as an ex-officio, non-voting member. The Dean shall invite nominees for the elected positions and will construct a ballot of eligible faculty for distribution to and election by all regular faculty members.

The Faculty Council will recommend a Vice-Chair who will be appointed by the Dean. This individual must have previously served as a regular member of the Faculty Council for at least one three-year term. This prior service may have occurred in an early appointment to the Faculty Council. With the endorsement of the Faculty Council membership and the approval of the Dean, the Vice-Chair will become the Chair. The term of service for the Vice-Chair and Chair is three years. The individual selected as the Vice-Chair should alternately be from a Joint Sciences and Clinical Department. Terms of appointment for faculty are three (3) years with one possible three (3) year renewal. The term of the Vice-Chair shall be extended so that they may serve one term as Chair. It is the responsibility of the Faculty Council to review each application applying the standards described previously.

Scholarship and Scholarly Activity

The SOM has a multifaceted mission that includes providing healthcare, conducting research, applying new knowledge to improve healthcare and delivery, and educating healthcare providers. This mission requires the commitment of a diverse faculty who are engaged in a full range of scholarly activities. As articulated in contemporary conceptualizations of scholarship this range of activities includes the scholarship of discovery, application, teaching, and integration. The scholarship of discovery, teaching, and application relate directly to the SOM's major missions in research, teaching, and service. The scholarship of integration is related to all three areas and should be considered relative to contributions in the three primary areas.

While overlap may exist, a distinction exists between scholarly activity and scholarship. For example, delivering a good lecture in a medical school course is expected of a faculty member and is an example of scholarly activity. To qualify as scholarship in teaching, it is expected that the faculty member publically disseminate the development of new courses, curriculum, and/or approach to teaching through publication or website posting. In service, a distinction can be made between a faculty member who provides competent clinical service as scholarly activity and one who is viewed as an authority in a specific area of clinical medicine as scholarship. Scholarly activity in research includes delivery of scientific presentation at regional, national, and international meetings or universities. Scholarship in research is achieved through peer reviewed publication of newly developed techniques, methods, or novel scientific discoveries. Application of the same method in support of the research mission of the SOM might

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be an example of scholarship in service if this method was judged by the faculty member's peers to be integrally important to the research mission.

Scholarship of Discovery

"...the scholarship of discovery...comes closest to what is meant when academics speak of "research". No tenets in the academy are held in higher regard than the commitment to knowledge for its own sake, to freedom in inquiry and to following, in a disciplined fashion, an investigation wherever it may lead... Scholarly investigation...is at the very heart of academic life, and the pursuit of knowledge must be assiduously cultivated and defended."

Scholarship of Teaching

"When defined as *scholarship* ...teaching both educates and entices future scholars. As a *scholarly* enterprise, teaching begins with what the teacher knows... Teaching is also a dynamic endeavor involving all the analogies, metaphors, and images that build bridges between the teacher's understanding and the student's learning... Further, good teaching means that faculty, as scholars, are also learners... In the end, inspired teaching keeps the flame of scholarship alive... Without the teaching function, the continuity of knowledge will be broken and the store of human knowledge dangerously diminished."

Scholarship of Application

"The third element, the application of knowledge, moves toward engagement as the scholar asks, 'How can knowledge be responsibly applied to consequential problems? How can it be helpful to individuals as well as to institutions?'... To be considered scholarship, service activities must be tied directly to one's special field of knowledge and relate to, and flow directly out of, this professional activity. Such service is serious, demanding work, requiring the rigor-and the accountability-traditionally associated with research activities."

Scholarship of Integration

"By integration, we mean making connections across the disciplines, placing the specialties in larger context, illuminating data in a revealing way, often educating non-specialists, too... Today, interdisciplinary *and* integrative studies, long on the edges of academic life, are moving toward the center, responding both to new intellectual questions and to pressing human problems. As the boundaries of human knowledge are being dramatically reshaped, the academy surely must give increased attention to the *scholarship of integration*."

References:

1. Boyer, E. L. (1990). *Scholarship reconsidered: Priorities of the professoriate*. Princeton University Press, 3175 Princeton Pike, Lawrenceville, NJ 08648.
2. Glassick, C. E., Huber, M. T., Maeroff, G. I., & Boyer, E. L. (1997). *Scholarship assessed: Evaluation of the professoriate*. San Francisco: Jossey-Bass.

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Summary for Evaluating Teaching, Scholarly, Academic, and Clinical Activities

Teaching Activities (include but are not limited to):

1. Teaching of students, post-graduate students, or residents in the classroom, laboratory, clinical setting, or other specific area of expertise (this includes continuing education)
2. Direction of graduate research
3. Curriculum development which includes development of objectives, materials, and methods of evaluation
4. Student, resident, or fellow advising and counseling
5. Student, resident, or fellow recruiting
6. Facilitation of teaching efforts of the faculty, i.e. helping to assess the value of teaching objectives, or methods of evaluation, providing content material for courses of study
7. Serving as a member of education, curriculum, or admissions committees
8. Efforts to improve personal teaching skills

Evidence supporting or evaluating teaching efforts must come from student/resident/fellow evaluations, teaching awards, recognition by faculty, or professional organizations. Objective evidence regarding the quality of teaching must be included in a candidate's proposal for appointment, promotion and/or tenure award and should include the following:

1. Faculty evaluations of the objectives, methods and materials of courses that have been designed and taught by the individual
2. Summarize student/resident/fellow reviews of the individual's performance. A summary table documenting all courses taught with summary scores is one way to present information.
3. Evaluations of teaching effectiveness by faculty who have taught with the individual or have observed the individual's teaching skill
4. Evaluations concerning the performance of students, residents, and fellows taught by the individual whenever possible and appropriate
5. Organization of new teaching program(s), or integration of teaching effort within or between departments
6. Development of better teaching techniques
7. Development of short courses or "workshops" for students, residents, fellows, postgraduate professionals, and lay public
8. Development of better teaching materials, such as the preparation of a syllabus, book of procedures, course of study, laboratory manual, development of testing procedures, or other modes of evaluation. This also includes educational efforts directed at students, residents, fellows, postgraduate professionals, and the lay public.

NOTE: Either a teaching evaluation instrument devised by the Department and approved by the Dean(s) or the attached teaching evaluation form must accompany all other teaching and evaluation documentation.

Scholarly Activities

Although scholarly work takes many forms, including research and **other creative activities**, a faculty member's effectiveness can be demonstrated by such achievements as publications and personal presentations of formal papers. The quality of the individual's scholarly approach, capacity for independent thought, originality, and products of research is best determined by critical review by one's peers. To have an impact, the information must be disseminated. This is best accomplished by publication in appropriate journals, monographs, or books, and by presenting scientific papers, and exhibits at scholarly meetings. Such activities provide the most compelling evidence of scholarship.

Some members of the faculty may contribute significantly in professional service, which can be considered as scholarly pursuit, such as the development and evaluation of new forms of treatment, new surgical procedures, or innovative diagnostic techniques, the results of which are disseminated to the professional community by publication or scientific presentation.

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Under these circumstances, the decision to appoint, promote or award tenure must be based on evaluation of the quality or quantity of the faculty member's professional productivity such as:

Has the work been published or presented?

Is it innovative?

Has the task been pursued aggressively?

Has the work been done efficiently?

Has the work benefited the Department, or University?

Does the faculty member show promise of continuing contributions?

Has the faculty member received recognition for the work from peer groups by receiving awards, being elected to important offices, being appointed to consultative committees?

Has the faculty member received peer recognition by being asked to contribute significant sections to textbooks of merit?

Academic Creativity and Research

Academic creativity may manifest itself in teaching, professional activities, and research and may include the following:

1. Publication of articles in professional journals - Greater importance will be attributed to publications in journals that require a critical review, but all publications will be evaluated.
2. Publication of books, monographs, manuals or in electronic media
3. Development of an objective method of evaluation service in a manner that can be quantified and statistically analyzed
4. Editorial consultation or reviews of scientific books and articles
5. Invited presentations of original scientific data at major national or international meetings, or at major institutions or research organizations
6. Demonstration of a sustained, externally funded and independent research program

Academic Service Activities

Service functions must also be recognized as positive evidence for appointment; promotion and/or award of tenure provided that this service emanates from the special competence of the individual in an assigned field and are an extension of the individual's role as a scholar-teacher.

Service functions can be those performed for UAB, the Birmingham community, the State of Alabama, regional, national, or international groups. Service may include such activities as:

1. Participation in committee work
2. Fulfillment of administrative assignments
3. Contributions to the improvement of student and faculty life
4. Faculty consultation within or outside UAB
5. UAB Other professional service

Clinical Service Activities

Excellence in patient care is recognized as a **special competence in an assigned field and is an integral part of a clinical faculty member's service role**. Clinical excellence is an application of all aspects of the art and science of medicine to the health and well-being of the patient. The outstanding physician blends the best of knowledge, judgment, interest, and concern with the major focus on the patient. Examples may include:

1. Organization of a new or reorganization of an existing clinical service
2. Development of a new inpatient referral service or treatment facility
3. Organization of a critical care unit
4. Reorganization of an outpatient department

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Sample Portfolio of Teaching, Research, and Service Activities

The Portfolio should comprise separate sections for the candidate's Teaching, Research, and Service activities (samples attached). It should be used to annotate the candidate's CV by providing additional information about activities beyond what is listed in the CV. For example, the impact of a specific discovery, paper, or educational program can be discussed. Each section should be limited to 2 pages, single spaced and 11-point font, and also include as supplements formal evaluations and letters documenting effectiveness in teaching, research and service, as applicable. Teaching portfolios must include a teaching evaluation instrument devised by the department and approved by the Dean(s) or the attached "Teaching Evaluation" form.

Teaching

Superior and effective teaching is a distinct value for consideration of appointment promotion and/or tenure. All faculty are expected to participate in the educational mission of the SOM in some manner. Student evaluations should be solicited and, where possible, letters of support should also include colleague evaluations of teaching credentials, experience, and scholarly activities.

Specific expectations to be met to achieve Excellence in Teaching include, but are not limited to:

1. Leadership or course master in a divisional, departmental, or SOM teaching program. This includes the development of a new course or program, or documented improvement of an existing course or program. Formal evaluations are required.
2. Mentoring, including leadership of a dissertation committee, or role as a primary mentor. This should be accompanied by names, dates, and outcome. Testimonial letters from trainees are useful.
3. Leadership in curriculum development at the local or national level, including development of objectives, materials, and methods of evaluation
4. Objective evidence of teaching excellence, such student/resident/fellow evaluations, teaching awards, recognition by faculty, or professional organizations.

The consistent theme for activities that reach Excellence in Teaching is leadership and intellectual input. There are many Teaching activities that are valuable and are expected from a faculty member in an academic medical center, but by themselves do not reach the level of excellence. Examples of activities that are valued, but by themselves do not reach the level of Excellence include:

1. Participation as a course lecturer
2. Hosting a graduate student on a rotation
3. Serving as a poster judge in various UAB educational activities
4. Teaching of students, post-graduate students, or residents in the classroom, laboratory, clinical setting, or other specific area of expertise (this includes continuing education)
5. Efforts to improve personal teaching skills, with outcome data
6. Informal student, resident, or fellow advising and counseling
7. Participation in student, resident, or fellow recruiting.
8. Serving as a member of education, curriculum, or admissions committees

Research & Scholarship

All faculty are expected to engage in scholarly activities to some degree. To that end, scholarly work takes many forms including research and other creative activities. A faculty member's effectiveness can be demonstrated by a continuous track record of extramural funding, original peer reviewed publications and invited presentations at other institutions and at national/international meetings. The quality of an individual's scholarly approach, capacity for independent thought, originality, and products of research is best determined by critical review from one's peers.

Several parameters are considered in determining Excellence in Research. These include, but are not limited to:

1. Demonstration of a sustained, externally funded and independent research program, with continuity over time and becoming more important for the higher-level award (e.g., awarding of Tenure, promotion to Professor). While traditionally the NIH funding was deemed critical, funding obtained from any agency or foundation is recognized.

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- Evidence of research productivity is measured by original publications in peer reviewed journals, books/book chapters, electronic media, and by presenting scientific papers, and exhibits at scholarly meetings. There is no absolute benchmark number of manuscripts that are required for promotion and/or tenure, but it would be expected that a productive faculty member would have ~20 when seeking promotion to Associate Professor, ~35-40 for Professor, with consideration taken for the impact level of the journal, and the position of authorship. Authorship on all manuscripts is valued. However, when authorship is not in the first or last position, it is important to discuss the scientific contribution in the research portfolio. It is appreciated that all authors have important contributions to a scientific manuscript, especially those reporting the findings from large clinical trials and other “team science” efforts.

As applicable, the significance of the faculty member’s research should be described, including:

- Recognition from peer groups, awards, elected to important offices, appointments to consultative committees, being asked to contribute significant sections to textbooks
- The level of innovation
- The prospect for future research
- Benefits to the Department and/or UAB
- Development of an objective method of evaluation service in a manner that can be quantified and statistically analyzed
- Editorial consultation or reviews of scientific books and articles
- Invited presentations of original scientific data at major national or international meetings, or at major institutions or research organizations

Activities that support a strong reputation for the faculty member’s scholarship include, but are not limited to:

- Membership on a national planning committee, NIH study section, and foundation grant reviewer
- Editor of a journal or membership of an editorial board

Examples of activities that are valued, but by themselves do not reach the level of Excellence include:

- Membership on editorial boards
- Ad hoc manuscript reviewer
- Internal (UAB) grant reviewer
- Small scale publications, such as case reports, or educational materials.

Service

Service functions are recognized as positive evidence for appointment, promotion and/or award of tenure provided that this service emanates from the special competence of the individual in an assigned field and is an extension of the individual's role as a scholar-teacher. In addition to service at UAB, participation at the level of the Birmingham community and the State of Alabama, as well as in regional, national, or international groups are also valued.

Excellence in Service is achieved by having a leadership role with a strong intellectual component. Such activities include, but are not limited to:

- Leadership in a professional service organization
- Leadership in a major UAB educational, clinical, or research committee (local/national)
- Director/Co-Director of a training program (e.g. graduate or residency program)
- Director/Co-Director of a research core facility
- Participation in committee work
- Fulfillment of significant administrative duties, which should also include positive outcome measures
- Leadership in community outreach

A typical faculty member will have many service activities that do not rise to the level of excellence but are valued. Participation in such activities falls under the general service category of ‘citizenship’, which indicates a faculty member’s willingness to be a contributor to the overall well-being of the department and/or university.

Examples of activities that are valued, but by themselves do not reach the level of Excellence include, but are not limited to:

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1. Contributions to the improvement of student and faculty life
2. Faculty consultation within or outside UAB
3. Organizing department retreats or social events
4. Interviewing faculty candidates and meeting with visiting scientists/clinicians
5. Judging poster sessions at UAB research events

Note: many service activities are related to activities in education and/or research, and can be listed in both

ClinicalService

Excellence in patient care is an integral part of a clinical faculty member's service role and is therefore recognized as a special competence. Excellence in clinical service is judged by several parameters, including but not limited to:

1. Patient volume, as compared to local, regional, and national peers
2. Development of a clinical care path or area of specialty. This may be the creation of new area of clinical service, or the expansion and enhancement of an existing clinical service
3. Creating or expanding a unique or highly specialized clinical service
4. Development of new treatments, surgical procedures, or innovative diagnostic techniques, the results of which are disseminated to the professional community by publication or scientific presentation

Note: Many clinical services activities can interconnect with educational and research activities as well

Example of Clinical Service Portfolio

Even within medical genetics there are areas of specialization. My area of expertise is in dysmorphology (which is the study of abnormal form), and syndrome identification. I am a classically trained dysmorphologist, and internationally recognized as an expert in this field. I have written several book chapters and invited reviews on the dysmorphologic assessment and have given numerous seminars (well over 200) on the subject. This includes several at the Board Review Courses for both the American College of Medical Genetics and Neonatology, as well as many national meetings, including several Otolaryngology society meetings. I have included reprints from two reviews in the Appendix. I have also edited the genetics section of the Cleft and Craniofacial Journal and serve on the Board of Directors for the Velocardiofacial Syndrome Educational Foundation.

The second area is the incorporation of genetic testing into new areas of medicine, particularly in otolaryngology and adult cardiology. In this effort I have developed clinical collaborations here at UAB with Otolaryngology and Cardiology. Included in this is the Marfan syndrome clinic, which has grown dramatically since its inception. Taken together, I am the busiest clinician in our department in terms of number of patients seen, despite the fact my clinical FTE is 55%.

Clinical Service Activities

1. Attend on the consultation service (19-26 weeks on-call per year).
There has been a dramatic increase in the number of genetics consults since my arrival in 2003.
2. General Genetics clinics (3 per week).
I have dramatically altered the scheme by which I see patients in general genetics, which resulted in a 147% increase in clinical volume in one year.
3. Attending geneticist, UAB Cleft and Craniofacial Clinics (weekly).
This is one of the biggest cleft clinics in the US, and we have established genetics as a vital part of the effort.
4. Marfan syndrome clinic (2 days per month)
This clinic has grown in 3 years from a 3 patients per month effort to 20+ patients per month, with a 6-month waiting period.
5. Genetics of hearing loss.
While not a separate discrete clinic, I have developed a clinical program for the genetic evaluation and testing for hearing impaired children and adults. Not only has this expanded and enhanced the clinical care for these patients, it has produced substantial research and educational opportunities as well.
6. Supervision of genetic counselors (several per month)
I supervise the genetic counselors in several clinics, including a genetic counseling (prenatal and preconception) and cancer genetics clinics

Example of Teaching Portfolio

I am active in medical education at all levels, from the preclinical first and second years of medical school through post-graduate (e.g. residency and fellowship) education, and in continuing education for faculty-level physicians. Furthermore, I teach many non-physician students. These include graduate students at various levels of their training (pre- and postdoctoral students), as well as non-MD health care providers, including audiologists, speech and language pathologists, nurses, and genetic counselors. Similarly, my educational activities vary with the type of student and my role. For some, such as the first year medical student course Fundamentals I and the Medical Genetics residency programs, I not only function as a hands-on teacher but I also have designed the curriculum and served as the course or residency director. In other venues, such as grand rounds, clinical conferences, or bedside teaching, I function as a lecturer or discussion leader.

Medical student education.

1. Led the effort to design and implement the “new” curriculum at UABSOM
2. Course master for Genetics in Medicine (MS1 course) 2005-6
3. Co-director for Fundamentals I module 2007-present
4. Director, Adult Genetics (Special Topics class)
5. Lecturer on genetics topics throughout years 1-2
6. Lecturer in MS3 year: Pediatrics and Internal Medicine

Medical Genetics Residents.

Program Director, Medical Genetics Residency Programs

Example of Research Portfolio

My research interests and activities have developed from my experiences in clinical care. During my fellowship in Human Genetics I was involved in molecular genetic research, studies that were aimed at mapping the genes associated with several known genetic disorders. During those two years I had considerable success in my lab work, with several first-author papers in journals such as *Nature Genetics* and *Human Molecular Genetics*. However, while I enjoyed my research experience, I realized that I wanted foremost to be a clinician. Furthermore, I also learned during this time that I could not be both a successful laboratory-based researcher and an astute clinician. I therefore chose to focus my research on clinical questions. And while my research activities are diverse in their specific topics, they can be grouped into several broad categories.

1. Craniofacial genetics and genetic syndromes. One major research interest has been to further classify and delineate genetic disorders. My primary focus has been on craniofacial disorders, including not only genetic syndromes but also specific malformations, such as cleft lip and palate and craniosynostosis. However, I have been involved in a number of clinical studies on other types of genetic disorders in which I have described or further characterized a clinical phenotype.

Currently, I am involved in several craniofacial-related research projects. The goal of the project is to investigate the genetic and environmental causes of oro-facial clefting. I am involved in identifying and recruiting appropriate participants for his gene discovery studies, as well as carrying out two independent studies. The first seeks to identify the role of known several genes known to be associated with isolated clefting in the occurrence of clefting in genetic syndromes such as velocardiofacial syndrome and Stickler syndrome. The second project is looking at whether the same genes influence the outcome of cleft palate surgery. In another study I am working with our craniofacial team to track the referral accuracy for children with asymmetric head shape.

2. The use of genetic testing. My interest in this area was also born directly out of clinical experience. As a junior faculty member, I recognized that genetic testing was soon to become clinically useful in the evaluation of deaf and hard of hearing individuals. This interest has grown in several separate directions, as I have carried out studies involving genetic testing for deafness, as well as more recent work on genetic testing for adult cardiovascular disease and mental retardation. A common theme has been that the expanding role of genetic testing in clinical practice will provide a challenge to non-genetics healthcare providers, as they are not familiar with the special issues of medical genetics, including the genetics evaluation, genetic counseling, and genetic testing. This has prompted much of my work in the last few years, including several grants on which I was the principal investigator.

Several studies will be published in 2007. One was on the interest of African Americans in genetic testing for deafness, which was funded by an RO3. Another was a study on deafness in cystic fibrosis, which was funded by a cystic fibrosis foundation award.

I am in the midst of studies that are examining several of these interrelated issues. We have recently completed several survey-based studies that investigated how various healthcare providers utilize genetic testing. One, entitled "Pediatric Otolaryngologists' Use of Genetic Testing," will be published in 2007. Another, on how primary care pediatricians in Alabama utilize genetic testing in the evaluation for mental retardation, was recently completed, and a third, on how cardiologists utilize genetic testing in their evaluation of Long QT syndrome, will be completed in 2007. Lastly, I am also engaged in research aimed at improving how we teach medical genetics to medical students. During the 2006 Genetics in Medicine course we piloted a program in which we gave medical students the opportunity to role-play. Students were given a clinical scenario in which they underwent genetic testing and told to make an appointment with one of the UAB genetic counselors at which time they would be told the test result and receive genetics counseling. Pre- and post-test surveys of this group as well as the students who did not volunteer for the program were done to gauge how effective this program was in teaching them about the genetic counseling process.

Date

Personal Information

Name: Citizenship:
Foreign Language(s): Home
Address: Phone:

Rank/Title

Department:
Business Address: Phone:
Fax: Email:

Hospital and Other (Non-Academic) Appointments:

Professional Consultantships:

Education:

Institution: Degree Year

Military Service: Licensure:

Board Certification:

Postdoctoral Training:

Year Degree Institution

Academic Appointments: (In reverse chronological order)

Year Rank/Title Institution

Awards/Honors:

Professional Societies: Memberships:

Councils and Committees:

University Activities:

Editorial Board Memberships:

Major Research Interests:

(2-3 Sentences)

Teaching Experience:

Major Lectures and Visiting Professorships:

Grant Support: (Past and current--include year(s) of funding, amount of funding, PI on award, role on award if not PI)

Other:

Bibliography:

Manuscripts:

Manuscripts already published
Manuscripts in press
Manuscripts submitted but not yet accepted
Manuscripts in preparation
Other publications (letters to the author, book reviews, etc.)

Books:

Books and Book Chapters

Published Abstracts**Poster Exhibits****Oral Presentations**

Scientific papers presented at national and international meetings
Scientific papers presented at local and regional meetings
Invited workshops, etc. at national postgraduate courses and meetings and at other universities. Invited lectures at local and regional courses and meetings

Miscellaneous:

Films, educational tapes, syllabi, software packages and courses developed, etc.