

## HSF Clinical Faculty Track - Portfolio Requirements

### 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)

For faculty being considered for the rank of Associate Professor or Professor, a promotion packet containing the following information will need to be submitted by **September**.

- **Curriculum Vitae** - This document should be in the UAB Standard format, current, and complete. It is a valuable reference for the review process.
- **Most current Faculty Evaluation**
- **Division Director Recommendation Report/Letter of Promotion Support** - signed and dated letter or report from the Division Director, clearly indicating the title/role of the candidate, and:
  - Individualized guidelines/expectations for faculty member
  - Clinical Service and productivity (number of patients seen, clinical revenues, half days of practice, hours/shifts worked, weeks of inpatient attending and/or consultations performed, and types of services provided)
  - Professionalism
- **Summary of Clinical Service Activities and 6 Peer Service Evaluation Letters**

This section should include any additional evidence that is not reflected in the vitae. For promotion to Associate Professor or Professor, this section should include **six (6) Peer Clinical Evaluation Letters**, to include letters from outside the candidate's division, to address the following (where applicable):

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.
  3. Administrative and Professional Service to the Division, Department, School of Medicine, University, or other, may be evaluated in the form of letters of support.
  4. 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):
    - a. 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.
    - b. Establishing, implementing and/or directing clinical programs.
    - c. Service in regional, national, and international professional societies.
    - d. Contribution of medical expertise to non-academic organizations or groups (e.g., community, regional and/or national non-profits).
- **Evidence of Teaching Effectiveness**

If teaching is an established responsibility of the faculty, the education portfolio should include the following:

    1. A summary table, or list, documenting all courses developed, taught, number of times taught, to whom, number of learners.

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2. Summarized teaching reviews, including student ratings and other assessment methods used by the school (i.e. peer evaluation, reviews of course materials, teaching portfolio summaries). Teaching evaluations from students, residents, or other audiences, including practitioners participating in continuing medical education courses. If Medhub student ratings are used, include information from the last three (3) years.
3. A summary table documenting students mentored, including information regarding type of mentorship provided, evidence of the impact of the mentoring on the person's career.
4. Formal evaluations by persons who have been mentored (if an established responsibility).

### **• Evidence of 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:

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

### **Calendar for Submission of HSF Promotion Award Proposals**

May 1

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

May – June

Candidate meeting with Department Chair

May – September

Promotion award proposal preparation period

September 15

Deadline for submitting promotion proposal to committee

November 1

Notification of approved proposals

January 1

Promotion effective date