# SCHOOL OF MEDICINE
## POLICIES, PROCEDURES AND GENERAL GUIDELINES
### FOR PROMOTION AND TENURE

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POLICIES, PROCEDURES AND GENERAL GUIDELINES FOR PROMOTION AND TENURE FOR PRIMARY FACULTY OF THE SCHOOL OF MEDICINE

I. PREAMBLE

The mission of the School of Medicine is the enhancement of human health through programs of excellence in education, research, health care and other service. The chief instrument for executing this responsibility is the Faculty of the School of Medicine. Their success depends in a significant way on a system that provides adequate recognition and rewards for work done in promoting the missions of the school.

It is the intent of the Faculty Council that these policies provide faculty and department chairs guidance for faculty development by defining the expectations for promotion at a given rank and the criteria for granting tenure. This policy was constructed to be deliberately broad in scope inasmuch as it is to be used throughout the entire School of Medicine, including each of its various departments and department-like administrative divisions. These policies are intended to be used by the Committee on Promotion and Tenure in making decisions regarding promotion to rank and the granting of indefinite tenure.

Because the faculty of the School of Medicine at OHSU participates in three major activities—teaching, scholarship, and service, which includes patient care and other service to the institution, the profession and the public—these activities have been selected as the basis for recommendations of appointment at or promotion to a given rank. In evaluating an individual's performance in these areas of activity, the appropriate constituencies of the School of Medicine must attempt to apply these criteria in such a way as to take into consideration the different expectations which apply at each of the various levels of faculty rank. There are higher and more stringent expectations of associate professors and professors than is the case for assistant professors. The faculty must, through its representatives on the Committee on Promotion and Tenure, maintain high standards so that only outstanding individuals are promoted to the senior ranks of associate professor and professor.

The degree of excellence of a given individual's academic contributions often cannot be exactly defined. However, an evaluation of the degree of excellence of contribution is, in the last analysis, a professional judgment which can best be made initially, subject to later faculty review, by the members of the discipline itself. Teachers, basic or clinical medical scientists, specialist-clinicians, and academic administrators can and do accurately judge the quality of an individual's academic achievement. Increasingly higher levels of excellence within the three areas of activity listed above are the basis for judgments at these levels of review as one moves from one academic rank to the next higher rank. Increasing achievement is conferred by the growth of the candidate's reputation both locally and nationally. Recognized esteem speaks to the person(s) leadership in his or her field of professional activity, the importance of his or her work, and the continuing achievements of his or her former trainees.

II. ROLES AND RESPONSIBILITIES FOR APPOINTMENTS, PROMOTIONS, AND TENURE STATUS

A. Under the Administrative Rules of Oregon Health & Science University, the President or Provost of the Oregon Health & Science University is responsible for the appointment, promotion, and tenure status of all staff members having academic rank.
B. Recommendation to the President or Provost of specific appointments, promotion, and tenure status of faculty to the School of Medicine is the responsibility of the Dean of the School of Medicine.

C. The Chair of a department has the primary responsibility for initiating and supporting the nomination for appointment, promotion, and tenure status of faculty in his or her department to the Dean of the School of Medicine. The Chair is responsible for assembling and submitting the records necessary for appointment, promotion, and tenure review.

D. The Promotion and Tenure Committee of the School of Medicine has the responsibility of reviewing and advising the Dean of the School of Medicine on the appointment and promotion to the rank Associate Professor and Professor, and on indefinite tenure nominations made by Departmental Chairs. This committee is charged by the Faculty Council of the School of Medicine. Its members are appointed by the Dean from nominations made by the Committee on Committees of the School of Medicine. A medical student, graduate student, and/or postdoctoral learner (i.e. house staff or fellow) may be appointed to this Promotion and Tenure Committee as non-voting members.

E. Departments, depending on size, may have departmental promotion and tenure committees to advise the Chair on nominations for appointment, promotion, and indefinite tenure. The departmental promotion and tenure committee should be organized and function in accordance with policies and procedures developed by the faculty and Chair of the department using the SOM Guidelines for Promotion and Tenure as a standard.

Each departmental committee will advise the chair on the candidate's qualification for promotion and/or tenure.

The initiation of evaluation for tenure shall come from the faculty or the Chair. The departmental tenure review committee shall be constituted of only tenured members from the department or other basic science departments, or equivalent rank if from another institution, for example the Veteran's Administration Hospital, or the Vollum Institute for Advanced Biomedical Research.

Departmental committees shall evaluate the academic performance and productivity of all Assistant Professors annually and of all Associate and Full Professors at least every three years. These committees shall suggest to the Chair, when applicable, readiness for advancement in faculty rank or award of tenure (see Section VII. for transfer from fixed-term to tenure-track appointments), or for tenured Professors to determine continued academic productivity.

In preparation for the annual review, the faculty member with the input of his or her mentors shall submit an updated curriculum vitae, accomplishments, time spent on various activities, and goals for the coming year. The committee shall review these documents, compare them to the written academic job description, and prepare a short narrative summary including an assessment of the faculty member’s academic progress and any recommendations for improved performance. The result of such review shall be transmitted to the Chair of the Department. The written summary will be shared with the
faculty member by the Department Chair or Chair’s designee. The documents prepared
by the faculty member and the summary prepared by the committee will become a part of
the faculty member’s personnel file, along with any comments made by the Chair or
faculty member.

F. The faculty person being considered for promotion or indefinite tenure has the
responsibility for presenting his or her record of accomplishments in the best possible
light, and the right to verify the accuracy and completeness of material used for the review
of his or her promotion and change of tenure status.

G. Recommendations for promotion and/or indefinite tenure must follow Affirmative Action
Guidelines.

III. PROCEDURES AND PROCESS

A. The departmental Chair shall assemble a dossier consisting of, but not necessarily limited
to, the items listed below for each nomination for promotion or change in tenure status.
This information will be used in evaluating the candidate's qualification by the Chair, the
departmental faculty advising the Chair, the Promotion and Tenure Committee of the
School of Medicine, and the Dean of the School of Medicine.

1. Curriculum vitae (provided by candidate). An up-to-date curriculum vitae, provided
by the faculty member, which includes all of the categories of information relevant to
the Promotion and Tenure decisions. Candidates should document accomplishments
in teaching using the Educator’s Portfolio and can include these pages as part of their
CV or just refer the reader to the separate Portfolio document.

2. Personal statement (provided by candidate). A written statement of personal
contributions and development in the current academic rank prepared by the faculty
member defining the rationale for either promotion and/or change in tenure rank.

3. A job description and statement of distribution of time and effort.

4. Copies of the candidate's annual reviews from the prior 4 years.

5. Documentation of teaching activity and effectiveness including:
   a. School of Medicine Educator’s Portfolio.
   b. Evaluations of teaching performance by trainees, peers, and supervisors.

6. Letters of Evaluation
   a. Chair’s letter. The Chair should supply a letter of evaluation for each candidate
      which at least should summarize the candidate's qualifications for the
      appointment, promotion or change in tenure status for which the individual is
      being nominated. The letter should include the Chair’s ratings of the candidate’s
      level of achievement in Scholarship, Teaching, and Service, using the categories
      satisfactory, substantial and outstanding, as outlined under Section IV.C.
b. Departmental Promotion and Tenure Committee’s letter. Evaluation and advice from the departmental promotion and tenure committee to the Chair on each nomination for appointment, promotion, or change in tenure status should be provided regardless of the nature of the advice. The letter should include the committee’s ratings of the candidate’s level of achievement in Scholarship, Teaching, and Service, using the categories satisfactory, substantial, and outstanding, as outlined under Section IV.C.

c. Other letters of evaluation. The Chair or Departmental Promotion and Tenure Committee shall solicit sufficient letters of recommendation to receive at least five (for promotion to Associate Professor) or seven (for promotion to Professor or Award of indefinite tenure), as outlined below. In addition to evaluation for excellence in scholarship, service, and teaching, the request shall ask reviewers to evaluate the candidate with regard to whether the candidate would meet criteria for promotion or indefinite tenure at the reviewer's institution.

(1) Associate Professor requires five letters of evaluation, at least three of which should be from individuals not associated with the Oregon Health & Science University. It is highly desirable to include letters from individuals at other institutions who are unbiased, i.e. have not been a past colleague, collaborator, or mentor.

(2) Professor and/or Indefinite Tenure requires seven letters of recommendation, at least five of which shall come from reviewers not associated with the Oregon Health & Science University. At least two of the outside letters must come from unbiased referees who have not been a past colleague, collaborator or mentor. Ideally all five external reviewers should be unbiased for the strongest effect.

d. Joint Faculty Appointment. In addition to letters identified above for the rank under consideration, letters from the Chairs of all the departments in which the candidate has academic appointments may be supplied which state whether or not the nomination for promotion or change in tenure applies to their department.

B. The Promotion and Tenure Committee of the School of Medicine will obtain the dossier for each candidate nominated for appointment, promotion, or indefinite tenure from the Dean's Office. This dossier, along with any other information and communications which the committee has had with the Dean and/or the candidate's departmental Chair, will be used to evaluate whether or not the candidate's qualifications meet the criteria for the change in status which is being proposed. The advice of the Promotion and Tenure Committee for action in each candidate will be transmitted in writing to the Dean of the School of Medicine.

C. When the nomination for appointment, promotion, or indefinite tenure is judged not to meet the necessary criteria for change in status, the departmental Chair will be given the opportunity to meet (or have a designee meet) with the committee to rebut the committee’s initial findings. Attempt is made to hold the rebuttal as soon as possible following a negative initial committee review. The Chair’s rebuttal before the committee is focused on bringing forward new information that may not have been apparent to the
committee or did not have the appropriate emphasis in the candidate’s package. Following the Chair (or designee) rebuttal, the committee will re-vote on the candidate. If the candidate nomination remains unsuccessful, the departmental Chair can then appeal directly to the Dean for promotion or award of tenure.

Appeal to the dean is based on institutional considerations that fall outside the purview of factors considered by the committee. The committee chair will advise the Dean on the factors that led to an unsuccessful bid and rebuttal on behalf of the candidate. Advice and counsel should be provided to the Chair by the Dean and to the candidate by his or her Chair when the nomination for appointment, promotion, or indefinite tenure is judged not to meet the necessary criteria for change in status.

In cases where suggestions for promotion or award of tenure of a regularly reviewed candidate are declined by the departmental committee, the Chair of that department, or the School of Medicine's Promotion and Tenure Committee, the candidate can appeal to:

1. The Chair of the department, in cases where the nomination for promotion or award of tenure was declined by the departmental promotion and tenure committee.

2. The Dean, in cases where the Chair of the department declined to support the nomination for promotion or award of tenure.

D. The Dean has the prerogative of recommending and the President or Provost has the authority of awarding or not awarding promotion and indefinite tenure in conformity with or contrary to the advice of the School of Medicine Promotion and Tenure Committee. In general, the Dean will notify the Committee of decisions contrary to its advice and will state the reasons for the decision.

E. *Suggested Promotion and Tenure Calendar.* The following calendar is suggested as final dates for steps required in the nomination of candidate, assembly of documents and action on promotion and tenure. The process may and should be accelerated whenever possible.

**SEPT – OCT...** Identification of candidates for promotion and indefinite tenure and initiation of departmental review of each candidate.

**DEC 15 ........** Complete departmental evaluations of each candidate. Material should be inventoried and missing documents identified and added. Follow-up letters should be added as necessary.

**JAN 10.........** Final date for on-line submission of material to School of Medicine Dean's Office.

**JUNE 15 .........** Final deadline for advice from the School of Medicine Promotion and Tenure Committee to Dean on all promotion and indefinite tenure nominations.

**JUNE 30 .........** Final deadline for Dean to recommend all promotion and indefinite tenure changes to President or Provost for next fiscal year.
F. The details of promotion and of tenuring are privileged information in every instance, restricted to those directly involved, but are also subject to the Freedom of Information Act. The process is subject to appeal by the candidate. Appeals should be directed to the Dean of the School of Medicine.

G. *Appointment Review.* An Appointment Review may be done for those candidates who are being newly appointed to the faculty of the School of Medicine at the rank held previously at another academic institution, except for those candidates on a clinical track at their former institution.

The following documentation is necessary for this Appointment Review:

- Current curriculum vitae (provided by candidate)
- A brief personal statement, no more than three pages, providing an overview of the candidate’s achievements in scholarship, teaching and service that led to his or her current rank (provided by candidate)
- Letter of support from the department Chair
- Letter of support from the departmental promotion and tenure committee
- Three letters of support from outside sources preferably not the former institution or OHSU

IV. GUIDELINES FOR APPOINTMENT AND PROMOTION TO ACADEMIC RANKS

A. General Considerations

In order for a faculty member to be promoted, his/her creativity and productivity must be established. Quality, quantity, and continuity of work consistent with the allocation of percent effort will be taken into consideration for the three main categories of academic achievement: scholarship, teaching, and service.

The categories considered can vary in the different series (described in section XI.). Regardless of distribution of effort, contributions to all three of these categories are required for promotion to the senior ranks of Associate Professor and Professor in the non-pre-fixed series. Contributions in the areas of teaching and service are required for promotion in the Clinician-Educator series, and contributions in the area of scholarship are required for promotion in the Research series. The candidate’s accomplishments in each relevant area will be determined to be *satisfactory, substantial, or outstanding*, as outlined below.

B. Definitions of Scholarship, Teaching, and Service

1. Scholarship

The definition of scholarly activity requires that the candidate’s work involves systematic study in order to advance a field, with public dissemination of the work for critical review. Basic, translational, clinical, and systems-level research activities are valued, as are scholarly activities related to clinical activity and teaching.
Candidates must have contributed to original publications in peer-reviewed journals of high quality and/or produced other original work of a theoretical or applied nature. Inventions, technological advances, or clinical innovations are examples of less traditional evidence of productivity that can be used for promotion. Thus there is value in original translational research leading to commercialization of products that in turn can positively affect health. Scholarly activities related to clinical practice and to teaching will include systematic study of these areas, with public sharing and review of this work through presentations or publications.

Team-based investigation is also recognized by the OHSU School of Medicine, and collaborative research is valued in assessments of scholarship, including interdisciplinary and collaborative research as evidenced by co-authorship of scientific publications, patents and licenses for inventions, and serving as co-investigator on grants. However, for those individuals engaged primarily or exclusively in collaborative research, it is imperative that the individual’s contribution to collaborative efforts be clearly outlined in the dossier, with documentation of innovation and leadership in their own area.

2. Teaching

Teaching activity includes the categories that emerge as the common formats in presenting educational contributions. Categories in the School of Medicine Educator’s Portfolio are: 1) Direct Teaching, 2) Curriculum Development, 3) Mentoring and Advising, 4) Educational Leadership and Administration, and 5) Learner Assessment.

Across all five categories, candidates are expected to document the quantity and quality of their accomplishments, using comparative measures when available. Engagement with the education community, as demonstrated by a scholarly approach to education activity, is among the list of common indicators for promotion to the higher ranks in the area of teaching.

3. Service

Service includes professional and administrative activity within the institution, to the candidate’s profession, and to the public. Service on medical school or university committees, on committees of scientific societies, to granting agencies and scholarly journals, public relations activities on behalf of the University, and other administrative assignments can be used to demonstrate commitments to service. Professional service to the community at local, state, regional, national or international levels shall also be recognized. The definition of service for determining promotion and tenure also includes excellence in clinical activities and development and responsibility for shared scientific resources.

C. Guidelines for Satisfactory, Substantial, and Outstanding Achievement in Scholarship, Teaching, and Service

The Promotion and Tenure Committee carefully considers the entire portfolio of each candidate to determine his or her level of achievement in all mission areas. The following examples are intended only as a general guide to the types of activities that will be considered for promotion purposes and is not an all-inclusive list.
1. Scholarship

*Satisfactory Achievement*
Candidates must have published original publications in peer reviewed journals of high quality and/or have produced other original work of a theoretical or applied nature. Evidence of quality, significance, and impact of contributions to a field will be the important consideration.

The following are common indicators of *satisfactory* achievement in scholarship:

a) Original publications in peer-reviewed journals of high quality, including contributions to publications as a member of a team based effort.

b) Other original work of a theoretical or applied nature.

c) Inventions, documented advances in methodology.

d) Funding at the institutional or local level, a mentored career development award, or contribution to obtain funding as an essential collaborator.

e) Serve as a journal reviewer.

f) Give presentations to peers of novel synthesis of knowledge or new techniques and/or procedures related to research or educational activities at a local or state level.

*Substantial Achievement*

Evidence of *substantial* contributions to a field will be the important consideration, with evidence of regional and/or growing national recognition. Documentation should include unbiased evaluations of the candidate's scholarly activities by letters of reference by experts in the field from outside the university.

The following are common indicators of *substantial* achievement in scholarship:

a) Continuing publications in peer-reviewed journals of high quality providing evidence for substantial contributions to a field, including an important collaborative role in these efforts.

b) Develop new methods or tools that add to research capacity in one or more fields.

c) Develop innovative learner assessment tools.

d) Achieves independent funding, or plays a documented role in obtaining funding for collaborative efforts.

e) Invitations to present work at regional or national level.

f) Leadership role for a departmental or institutional research program.

g) Journal reviewer or editorial board member.

h) Grant reviewer at national/international level (e.g. NIH study section).

*Outstanding Achievement*

Candidates must achieve a level of scholarship that is recognized at national and international levels. Documentation of this fact shall be made by letters of reference from experts in the field, and by ability of the candidates to sustain independent or collaborative research funding, demonstrated leadership and innovation in contributions to collaborative research efforts, and appointment to prestigious committees of scientific societies.
The following are common indicators of outstanding achievement in scholarship:

a) Scholarship recognized at the national and international level.
b) Sustained independent funding, or plays a documented role in obtaining and maintaining funding for collaborative efforts.
c) Member of professional society committees.
d) Obtain support for innovative or complex shared scientific resources.
e) Leadership and innovation in contributions to collaborative research efforts including developing industry partnerships, collaborative patents, disclosures and licenses.
f) Leadership and innovation in the development of educational materials, curriculum or learner assessment tools which are disseminated and used at other institutions.
g) Service on funding agencies, including NIH, NSF, VA.
h) Leadership roles in national or international scientific committees or organizations.
i) Invitations to present work at national or international level or to provide shared scientific resource consultation to other institutions.
j) National recognition/awards for expertise from professional or public groups.

2. Teaching

Satisfactory Achievement

Candidates must be recognized as effective teachers of medical students, graduate students, residents, nursing students, or other populations whose education is the responsibility of the School of Medicine. Teaching effectiveness shall be documented by evaluation of peers, students and other groups who have knowledge of the candidates' teaching capabilities.

The following are common indicators of satisfactory achievement in teaching:

a) Participate in teaching at a level typical for peers (i.e. lectures, labs, small groups, preceptor in clinic or ward, supervising student/resident research).
b) Receive satisfactory or better evaluations.
c) Demonstrate that mentees complete program, participate in presentations & publications, and accomplish goals as appropriate for level.
d) Serve on departmental educational committees (e.g. residency selection committee, ad hoc department curriculum committee).
e) Participate in learner assessment at a level typical for peers, but no involvement in the development or analysis of novel assessment tools. (e.g. service on a graduate student qualifying exam committee).
**Substantial Achievement**

Candidate should demonstrate more *mature* teaching skills and assume educational leadership roles and greater responsibility for course or program administration. Teaching awards, program management, and exceptional degree of effort will be taken into consideration.

The following are common indicators of *substantial* achievement in teaching:

- a) Teaching at a level greater than peers; record of sustained teaching over years.
- b) Course or departmental teaching awards.
- c) Consistently excellent evaluations from learners, course directors, peers.
- d) Invitations to teach in other departments.
- e) Significant role in curriculum/course design and content; incorporates innovative techniques into curriculum.
- f) Evidence of improved outcomes due to curricular change.
- g) Achieve national (e.g. ACGME) accreditation of new training program.
- h) Demonstrate that mentees have more significant accomplishments than merely completing their program or participating in presentations & publications; e.g. research awards, obtain grants, obtain new positions/ranks.
- i) Participate in development activities to enhance mentoring effectiveness or leads initiatives to improve mentoring in department.
- j) Provide sustained service on institutional education-related committees.
- k) Course/clerkship/program director or hold educational leadership role in department.
- l) Develop and implement innovative learner assessment tools.

**Outstanding Achievement**

Candidates at this level should assume major leadership responsibility for departmental and interdisciplinary courses taught to medical students, graduate students, residents, nursing students or other populations whose education is the responsibility of the School of Medicine. Outstanding achievements in teaching will not be limited to classroom performance but can include dissemination of innovative curriculum and learner assessment tools, educational leadership roles locally, regionally and nationally, and evidence of mentoring effectiveness as measured by mentee’s accomplishments. The candidate should have national recognition in teaching.

The following are common indicators of *outstanding* achievement in teaching:

- a) Institutional, regional or national teaching awards.
- b) Consistently excellent evaluations from learners, course directors, peers.
- c) Produce instructional materials or learner assessment tools published in peer-reviewed journal or included in national repository of teaching materials.
- d) Present instructional materials or curriculum in a peer-reviewed or invited forum at a regional/national meeting.
- e) Instructional materials or curriculum are disseminated and used at other institutions.
- f) Invitations to provide curriculum consultation to other institutions.
g) Quantity of mentoring exceeding most peers with evidence of mentoring effectiveness as measured by mentees’ accomplishments.

h) Mentoring consultant to other departments or leads initiatives to improve mentoring in the institution.

i) Multiple sustained educational leadership roles in the institution.

j) Leadership roles in national educational organizations.

3. Service

*Satisfactory Achievement*
Candidates must document their individual service contributions, which may include clinical work and/or professional and administrative service. Documentation should include evaluations of quantity and quality of the candidate's service activities in letters of reference.

The following are common indicators of *satisfactory* achievement in service:

a) Membership on departmental committees at a level typical for peers.

b) Membership on some institutional committees.

c) Participate in educational, scientific or healthcare related community organizations.

d) Journal reviewer.

e) Participate in multi-center collaborative clinical research studies (patient recruitment, administration of protocols locally).

f) Clinical service at a level commensurate with clinical FTE.

g) Satisfactory or better evaluations for clinical performance.

h) *Participate in the development of innovative or complex clinical initiatives or shared scientific resources.*

i) Present to peers on novel synthesis of knowledge or new techniques and/or procedures related to clinical activities at a *local or state level.*

*Substantial Achievement*
Candidates must provide written documentation regarding service, including clinical work, to the institution and the academic community that exceeds that required for the category, *Satisfactory*. Evidence of contributions at the local or regional level is expected.

The following are common indicators of *substantial* achievement in service:

a) Leadership of departmental committees.

b) Membership on institutional committees at a level greater than peers; record of sustained service over years.

c) Leadership role for an educational, scientific or healthcare related community organization.

d) Leadership role for a departmental or institutional clinical, educational or research program.

e) Leadership role for an institutional shared scientific resource or leads the development of a new shared scientific resource.
f) Leadership roles in *regional* committees/organizations.
g) Participate in national credentialing activities (e.g. contributes questions for board exams).
h) Receive *institutional or regional recognition/awards* for clinical expertise from professional and public groups.
i) Present to peers on novel synthesis of knowledge or new techniques and/or procedures related to clinical activities at a *regional level*.
j) *Lead* the development of innovative or complex clinical initiatives.
k) Obtain *institutional funding* for innovative or complex clinical initiatives or shared scientific resources.
l) Demonstrated impact of practice initiatives on improved quality.
m) Collaborate with colleagues in the initiation of effective, innovative interdisciplinary practice-related activities.

**Outstanding Achievement**

Candidate at this level demonstrate service at the national or international level, or in multiple, sustained leadership roles within the institution. Other duties that require responsible dedicated leadership may justify a ranking of outstanding. In the clinical realm, emphasis is placed on measures of peer recognition of clinical expertise, dissemination of innovative clinical programs to other institutions or obtaining external funding for clinical practice innovations in order to achieve a rating of outstanding.

The following are common indicators of *outstanding* achievement in service:

a) Institutional high-intensity committee service at a level significantly greater than peers and/or serve as committee chair.
b) National reputation for leadership activities in educational, scientific or healthcare related community organizations.
c) Multiple sustained administrative leadership roles in the institution.
d) Leadership roles in *national* committees/organizations.
e) Membership on interdisciplinary health care-related work groups or committees at the *national level*.
f) Receive *national recognition/awards* for clinical expertise from professional and public groups.
g) Present to peers on novel synthesis of knowledge or new techniques and/or procedures related to clinical activities or shared scientific resources at a *national or international level*.
h) Invitations to provide clinical program consultation to other institutions.
i) Produce innovative clinical programs that are disseminated and serve as models for other institutions.
j) Obtain external funding for practice innovations, new clinical initiatives or innovative or complex shared scientific resources.
V. CRITERIA FOR APPOINTMENT TO OR PROMOTION TO ACADEMIC RANK

A. Instructor

Appointment to the level of Instructor is used for persons having minimal experience in instruction at the college or university level, experience in research and service to the institution and to the public. A person appointed to this academic rank shall have adequate professional preparation and the potential to function appropriately in the assigned responsibilities. Persons appointed at this rank will usually have an academic degree at the baccalaureate or higher level and/or specialized professional training.

B. Senior Instructor

This rank may be used for the appointment or promotion of staff members who have special skills or experience needed in the instructional programs of the institution but who would not normally meet the criteria to be promoted to any of the higher ranks. Persons appointed or promoted to this rank will usually have a baccalaureate or higher academic degrees and/or specialized professional training. However, in contrast to the rank of Instructor, persons appointed to the academic rank of Senior Instructor will have demonstrated competence in performing the assigned duties that are usually related to instruction.

C. Assistant Professor

This rank is appropriate for persons who have completed both a doctorate in medicine or basic science (M.D., Ph.D., D.V.M., etc) and postdoctoral training. Persons who do not hold these academic degrees or have this training may be appointed or promoted to this rank after demonstrated competence in research, teaching, patient care, or administration or combinations of these activities. A potential for academic accomplishment should be evident. Eligibility for specialty board certification, where appropriate, is expected.

D. Associate Professor

This rank is a senior faculty rank requiring evidence of substantial accomplishment beyond the training and qualifications required for appointment to the Assistant Professor rank. Those who aspire to this rank must have a satisfactory record of accomplishment in all of the following categories: teaching, scholarship, service, and a substantial record in at least one of these categories.

E. Professor

The rank of Professor is the highest academic rank. It is reserved for appointment or promotion of persons who show clear evidence of a high level of professional accomplishment. Those who aspire to this rank must have a substantial record of accomplishment in at least two of the following categories: teaching, scholarship or service and an outstanding record in the third. Faculty members at or appointed to this rank should have achieved national or international recognition.
VI. CRITERIA FOR INDEFINITE TENURE

Administrative rules mandate that consideration of Indefinite Tenure be made no later than the ninth consecutive year on a full-time Tenure-Track appointment. Individuals who have had part-time tenure-track appointments of less than 1.0 FTE but at least 0.5 FTE also must be considered for indefinite tenure before their accumulated FTE exceeds nine years. Candidates will be notified that they are being considered for promotion and/or indefinite tenure and asked to submit the appropriate curriculum vitae and to suggest appropriate reference sources. Letters of evaluation should be requested as soon as candidates are identified.

Some faculty require a longer "start-up" time due to insufficient initial funding, a hiatus in funding or a need for time off. Examples of the latter could include a leave of absence for child care, illness, or pregnancy. The intent of this policy is to provide fair treatment to high quality people who have valid reasons for delays in career development. The intent is not to force departments to retain, and eventually promote, faculty who are not judged as satisfactory for appointment to Indefinite Tenure.

Indefinite Tenure can only be granted to an individual for whom permanent funding is available to cover the total amount of the tenured salary stated on the notice of appointment.

Beginning July 1, 1997, all new tenured faculty not covered by previous agreements will have a fixed dollar tenure guarantee determined by the Dean after Faculty Council review. Adjustments may be made by the Dean every three years.

A. Indefinite Tenure - Basic Science Faculty

The recommendation for award of Indefinite Tenure for basic science faculty requires a documented record of continuous productivity, achieving a level of outstanding accomplishments in scholarly activity, substantial in teaching, and at least satisfactory in service, or for an occasional individual, outstanding accomplishments in teaching, substantial in scholarly activity, and at least satisfactory in service. Requiring candidates to achieve an outstanding level of performance in scholarly activities is essential to establish and maintain an outstanding basic science faculty.

B. Indefinite Tenure - Clinical Science Faculty

The recommendation for award of Indefinite Tenure for clinical faculty requires a documented record of continuous productivity, achieving a level of outstanding accomplishment in one of the 3 categories (scholarly activity, teaching and/or service), substantial in another and at least satisfactory in the third.

VII. FAILURE TO ACHIEVE THE AWARD OF INDEFINITE TENURE

If indefinite tenure is not awarded, faculty members may be continued on a fixed-term basis. This does not preclude further consideration of indefinite tenure in the future.
VIII. TRANSFER FROM FIXED-TERM APPOINTMENT TO TENURE-TRACK APPOINTMENT

A. It is implicit in the designation "fixed-term appointment" that funding of a position cannot be guaranteed beyond a certain time period. Therefore, fixed-term appointment notices should clearly state that conversion from fixed-term to tenure-track appointment is not an automatic right.

B. Recommendations for change from fixed-term to tenure-track appointment shall be the responsibility of the department Chair, and the process shall only be initiated by him/her when funds for all tenure and tenure-track appointments are available.

C. The Chair shall request the departmental appointment, promotion, and tenure committee to review the nominee's dossier and present their recommendations to the Chair.

D. The Chair shall then (a) recommend change in appointment status to the Dean, or (b) terminate the procedure after discussing the situation with the faculty member in question.

E. The faculty member may appeal the Chair's decision to the Dean.

F. At any time faculty members who are not recommended for change from fixed-term to tenure-track appointment may discuss their situation with the departmental Chair. After discussion with the chair, the faculty member may choose to discuss the situation with the Dean or designee.

G. To assure that affirmative action guidelines have been followed, each recommendation made by the Chair to the Dean for change from fixed-term to tenure-track appointment is to be documented and accompanied by information justifying the selection of one individual from among other fixed-term appointees of the same rank in the department.

IX. JOINT APPOINTMENTS

Joint appointments at the same academic rank as a primary appointment can be approved by the Dean without Promotion and Tenure Committee review. Generally, the promotion of joint appointments cannot precede appointment to a given academic rank by a primary department. If the situation arises that the department granting the joint appointment is willing to recommend advancement ahead of the primary department, the Dean will take this request under consideration and determine if advancement should be recommended by just the joint department, in which case the recommendation will be forwarded to the School of Medicine’s Promotion and Tenure Committee. It is anticipated that this will be an extremely rare event. Joint appointments should not be viewed as permanent. They should be subject to periodic review at least every five years by the joint appointment department to determine if the basis for the appointment still exists.

X. APPOINTMENT TO ENDOWED PROFESSORSHIPS AND CHAIRS

A. Endowed professorships and chairs are honorary titles backed by specific endowments maintained by the Oregon Health & Science University Foundation, the Doernbecher Foundation or any similarly situated Foundation which maintains and manages
endowments.

The fund amounts necessary to support endowed professorships or chairs are defined by the President of OHSU.

B. Only faculty at the associate professor or professor ranks are eligible for appointment to an endowed professorship or chair.

C. Appointment to endowed professorships or chairs shall be made by the Dean of the School of Medicine upon the recommendation of the relevant department chairs.

1. Appointments to endowed professorships or endowed chairs that support department Chair positions shall be limited to the length of time that the department Chair serves in that capacity.

2. Appointments of faculty to endowed professorships or chairs shall be limited to terms of seven years in duration. An individual may be reappointed for additional terms following a review of the individual’s performance agreed upon by the department Chair and the Dean and accomplished during the seventh year of appointment.

3. If an individual is not reappointed to an endowed professorship or chair he/she will retain all the rights and privileges associated with his/her academic rank and tenure status.

XI. OTHER FACULTY TITLES

A. Primary Faculty

1. "Research"

This designation as a prefix to academic rank is used for faculty who are engaged primarily or exclusively in research activities. This position is not eligible for tenure. Promotion in the research series at the various academic ranks is dependent upon substantial or outstanding achievement in scholarship. To wit, research associate professor requires substantial achievement in scholarship. Research professor requires outstanding achievement in scholarship.

2. “Clinical”

This designation as a prefix to academic rank is used for faculty who are engaged primarily in clinical and educational activities, and have elected to pursue the clinician-educator series. This position is not eligible for tenure. To be eligible for promotion via the clinician-educator series, faculty must possess an advanced degree (e.g, MD, PhD, DO) and present evidence of a major role in the OHSU clinical enterprise. Faculty can only change between the traditional and the clinician-educator series once, and that change can only occur at the time of promotion in rank. Promotion in the clinician-educator series at various ranks is dependent upon satisfactory, substantial, or outstanding achievement in service and teaching (See Section IV of this document). To wit, clinical associate professor requires one substantial and one
satisfactory achievement in the areas of service and teaching, while clinical professor requires one outstanding and one substantial achievement, in the areas of service and teaching.

3. “Community-Based Primary Faculty:”

A limited number of community-based faculty are directly and sufficiently involved in medical student, physician assistant (PA) and/or resident education and related scholarly activities to be appointed to the Primary Faculty of the School of Medicine. Furthermore, medical school accreditation standards require written and signed agreements with clinical affiliates in the community that specify the role of the medical school in appointment and assignment of the faculty from clinical affiliates with responsibility for medical student teaching. Accordingly, community-based faculty with substantial teaching responsibilities in the School of Medicine may be appointed to the Primary Faculty in accordance with the following guidelines.

a. Community-based faculty appointed to the primary faculty track are subject to all of the Promotion and Tenure policies of the Primary Faculty in the School of Medicine with the following provisions.

b. Appointment of community-based faculty to the primary faculty track must be non-tenure, fixed-term appointments.

c. Appointment of community-based faculty to the primary faculty track must be initiated by a letter of nomination from the academic Chair of an accredited, community-based residency program to the corresponding OHSU SOM Department Chair. Alternatively, if the nominee is an appointee of an OHSU SOM department (e.g., Director of General Surgery Residency at a community hospital without a fully designated community based department) or is a physician practicing in the community, who actively teaches SOM students and/or residents, the initiating letter must come from the OHSU SOM Department Chair. Nomination letters must include a review of academic credentials and current and ongoing interaction with OHSU SOM medical students, PA students, residents, and/or fellows. Nominations are evaluated by the appropriate Department Chair and recommendations for appointment forwarded to the Dean for approval. Appointments at the rank of Assistant Professor are made by the Dean upon the recommendation of the appropriate Department Chair, while appointments at the rank of Associate Professor or Professor are made by the Dean based upon the recommendation of the SOM Promotion and Tenure Committee.

d. Appointment of community-based faculty to the primary faculty track must be mediated by a specific written agreement prepared by the appropriate Department Chair and approved by the Dean. These agreements must, at a minimum, specify teaching responsibilities and expectations as well as additional scholarly and service activities as deemed appropriate for the faculty candidate.

e. Appointment of community-based faculty must be reviewed annually with documentation by the appropriate Department Chair to assure that the appointment continues to be relevant and that expectations are being met.

f. If the circumstances specified in the appointment agreement change, then community-based faculty may be appointed to the Affiliate or Adjunct track, which are non-primary SOM faculty appointments, at the direction of the appropriate Department Chair and with the approval of the Dean.
g. Appointment of community-based faculty to the Primary, Clinical or Adjunct faculty in the SOM may be terminated by the Department Chair with the approval of the Dean.

h. Substantial teaching activity is characterized as follows:
   • Dedicating on an annual basis an average of 10-15 hours/week to the various aspects of the medical student, PA student, and/or resident teaching programs.
   • Providing teaching and supervision of medical students, PA students and/or residents according to expectations established by the medical, PA or residency program curricula.
   • Assisting in the evaluation of performance of medical students, PA students, and/or residents.

B. Non-Primary Faculty

1. "Adjunct"

   The prefix of "adjunct" to academic rank is used when the faculty person is in a situation whereby consideration for promotion cannot be made by the usual standards of the primary faculty. Typically, this may occur when--

   a. the faculty person is paid and is less than 0.5 FTE, or
   b. the faculty person is a full-time employee of an affiliate institution and the usual standards for promotion are not appropriate.
   c. the faculty person is employed by a non-School of Medicine OHSU program and does not meet the criteria for a primary faculty appointment.

2. "Affiliate"

   The prefix of “affiliate” to academic rank is used to denote a volunteer faculty member. Individuals who volunteer their services to teach will have appointments in this category. Each department will set its own requirements for faculty appointment and promotion in this category.

3. "Lecturer"

   This designation may be used for volunteer faculty. It is used without professorial ranking.

4. "Provisional"

   The suffix of "provisional" to academic rank is used when the faculty person is awaiting review and approval of appointment to a professorial rank by the School of Medicine Promotion and Tenure Committee (ex.: Associate Professor, Provisional or Professor, Provisional)

5. "Visiting"

   The prefix of “visiting” to academic rank is used for individuals who are temporarily appointed to the faculty and on leave from another university or college. This appointment is made without continuing financial commitment from the School of Medicine.