

SOUTHERN ILLINOIS UNIVERSITY SCHOOL OF MEDICINE

GUIDELINES ON FACULTY APPOINTMENTS, PROMOTION, AND TENURE

I. Introduction

The Southern Illinois University School of Medicine believes that the academic reward system for faculty within any particular institution should be consistent with the goals and mission of that institution. Therefore, it is useful to reflect briefly on the goals of the School of Medicine and the particular characteristics of the faculty working to meet these goals.

In June of 1968, the Illinois Board of Higher Education published Education in the Health Fields for the State of Illinois. The report recommended the expansion of medical education in Illinois, with particular emphasis on medical education outside the Chicago area. The Southern Illinois University School of Medicine was established in 1969 and has since then been developing in accordance with guidelines contained in that report.

In numerous meetings with professional and community representatives in the Central and Southern Illinois area, the School of Medicine adopted as its purpose to "Assist the people in Central and Southern Illinois to meet their health needs." In 1981, the purpose was revised to "Assist the people of Central and Southern Illinois in meeting their present and future health needs through education, service and research." In discussing the need for health manpower, the Board of Higher Education Executive Director's report #106 stated that ". . . the basic goal of the state. . . is obviously the improvement of health care available to all citizens of the state." A program analysis document of the School of Medicine states that "this has not been taken to mean that the School should provide health services directly to large segments of the population; it does reflect the School's responsibility to direct its publicly funded resources in ways which advocate health in its broadest sense and to support the work of health professionals, institutions, citizens' groups and State agencies engaged in developing approaches to a sharing access by all citizens to acceptable, affordable and appropriate personal medical care." Thus, the School's educational programs are structured to have the broadest possible impact on the quantity and quality of health care available in Central and Southern Illinois.

Along with the establishment of the new School of Medicine, the Board of Higher Education's report recommends that the new School of Medicine develop innovative curricula, with special attention given to the development of Family Practice programs and to consideration of preceptorships and other modalities appropriate for the training of primary care physicians. To develop these innovative curricula, faculty members with special expertise in medical education as well as faculty members who directly teach the medical students are needed. In addition, a School of Medicine program analysis document states that the emphasis of the School of Medicine is upon meeting the documented manpower needs of the region with obvious emphasis on primary care.

This vision of the School of Medicine is reaffirmed in the Strategic Plan for the Southern Illinois University School of Medicine approved by the Executive Committee on December 4, 1995. Its statement of purpose and mission is as follows:

The purpose of the Southern Illinois University School of Medicine is to assist the people of central

and southern Illinois in meeting their present and future health needs through education, service, and research.

In pursuit of its mission, The Southern Illinois University School of Medicine intends to become the centerpiece of a downstate academic medical center of exceptional quality. In doing so, the School of Medicine will maintain a leadership role in the medical education that will meet the emerging needs of health care delivery in the 21st century. An academic medical center is a complex, diverse, and dynamic organization, and, as part of such a center, the School will be flexible, it will function based upon rational planning, and it will respond rapidly and effectively to the changing health care needs of the people of central and southern Illinois.

In light of the above statements, the School of Medicine has moved to create a faculty capable of promoting the School's mission.

The School of Medicine recognizes that its appointment and promotional system should be flexible, because the needs of medical education require a program containing individuals with academic (Ph.D.) and professional (M.D.) degrees who bring different backgrounds, philosophies, skills, and needs into the academic setting. For this reason, these guidelines emphasize the importance of evaluating performance based on **accurate position descriptions** which are to be reviewed at least annually and revised as needed to accurately reflect the faculty member's work assignments. In addition, these guidelines rely on a functioning system for documenting all areas of activity contained in the position description.

II. Appointment Process

The initial appointment of a faculty member will be recommended by the appropriate Department Chair in the School of Medicine. The recommendation of the Chair is then transmitted to the Dean of the School of Medicine.

The Dean shall forward all requests for appointment to the rank of Associate Professor and Professor to the Promotions Committee for review and recommendation.

The recommendation of the Dean is forwarded via the Provost to the Chancellor of the University. Final approval is granted by the Board of Trustees of Southern Illinois University. Notification of appointment is made by the Board of Trustees, Southern Illinois University-Carbondale.

A. Faculty Status

Faculty status is accorded to those members of the University who are charged with the duty of disseminating and advancing knowledge. As a consequence, appointment to and promotion through the academic ranks of the University require demonstrated competence and potential for continued growth in at least two of the following areas: teaching, service, or research.

B. Kinds of Faculty Appointments

It is the responsibility of the Department Chairs to maintain an appropriate balance of faculty commitments to carry out the programs of the Department within the School of Medicine. These commitments should be reflected in the faculty appointments in the Department and in the position descriptions of each faculty member. It is also the responsibility of the Department Chairs to function within the constraints of their departmental financial base with respect to faculty appointments.

1. Term

A term appointment is employment for a specified period of time. Non-tenure eligible faculty appointees on term appointment shall be given a statement in writing of the conditions and period of their employment. Term appointments may be renewed; however, reappointment to such a position creates no right to subsequent employment or presumption of a right to subsequent employment.

2. Continuing

A continuing appointee is automatically reappointed each academic year unless given appropriate notice. The faculty member thus notified is entitled upon request to a written statement of the reasons for non-reappointment. All continuing appointees are subject to annual adjustments regarding salary and other conditions of employment.

There are two kinds of continuing appointments in the School of Medicine: tenure-eligible and non-tenure eligible. Faculty in tenurable academic ranks are serving in a probationary status leading to the possible awarding of tenure. The allocation of tenure positions shall be made according to standards promulgated by the School of Medicine and the University.

3. Tenure Eligible

Tenure-eligible faculty ranks are for those full-time faculty who are engaged in broad scholarly activities. It is expected that faculty appointed to tenurable faculty ranks will carry out their scholarly activities through teaching, research and service. Through quality performance in these areas, these faculty will advance the mission of the School of Medicine and their own careers in academic medicine. Tenure-eligible status is limited to continuing full-time, tenure-eligible positions in the rank of Assistant Professor, Associate Professor or Professor.

4. Non-Tenure Eligible Continuing

Because of the complex mission of the School of Medicine, it is necessary and desirable to have non-tenure eligible full-time faculty ranks to which individuals who contribute to the programs of the academic health center may be appointed. Individuals appointed to these ranks should be capable of making significant contributions to the programs of the academic health center. Non-tenure eligible faculty appointments may be either term appointments or continuing appointments.

By authority of the President, appointees to Non-tenure eligible Faculty Ranks may delete the word "Clinical" or "Research" from their Non-tenure eligible Faculty Rank title in day-to-day

usage; however, each appointee's official Non-tenure eligible Faculty Rank and Title shall be set forth in the appointee's contract with the University and in other official University documents.

The non-tenure eligible faculty ranks which are available for those whose efforts are primarily directed towards teaching and service are Instructor of Clinical Medicine, Assistant Professor of Clinical Medicine, Associate Professor of Clinical Medicine, and Professor of Clinical Medicine or in any like rank where the word Medicine is substituted by the word(s) Anesthesiology, Family and Community Medicine, Neurology, Obstetrics and Gynecology, Pathology, Pediatrics, Psychiatry, Radiology or Surgery. The non-tenure eligible faculty ranks which are available for those whose efforts are primarily directed towards research are Research Instructor, Research Assistant Professor, Research Associate Professor and Research Professor.

5. Part-Time and Volunteer Faculty

The School of Medicine recognizes the contribution to its programs of part-time (<50% base salary) and volunteer faculty whose major time commitments may be to private practice or to other institutions. Clinical part-time and volunteer faculty may be appointed to the rank of Clinical Associate, Clinical Instructor, Clinical Assistant Professor, Clinical Associate Professor or Clinical Professor. Non-clinical part-time and volunteer faculty may be appointed at the rank of Adjunct Instructor, Adjunct Assistant Professor, Adjunct Associate Professor and Adjunct Professor.

(See VI. *Guidelines for Appointment and Promotion of Voluntary and Part-Time Faculty*)

6. Visiting Faculty

It is desirable for the academic health center to have a system of visiting appointments which are reserved for individuals who are scholars visiting the School of Medicine as teachers and investigators for variable periods. Such appointments may be made for up to a period of one year.

The ranks available for such appointments are Visiting Instructor, Visiting Assistant Professor, Visiting Associate Professor and Visiting Professor.

C. Movement Between Tenure-Eligible and Non-Tenure Eligible Appointments

Departments shall establish criteria and procedures for the movement of faculty from the tenure eligible to the non-tenure eligible ranks and vice versa. These criteria shall be approved by the Dean. The following are minimal School of Medicine requirements.

Movement from a non-tenure eligible to a tenure eligible appointment

Movement from a non-tenure eligible to a tenure eligible position may occur only after a tenure position is declared open and a search conducted. A faculty member in a non-tenure eligible rank may request in writing that his/her application for the tenure eligible position be considered. Such movement will not occur unless the non-tenure eligible faculty member is chosen for the tenure eligible position after a competitive search process.

The individual seeking to move to a tenure eligible rank shall meet all criteria for the rank. Individuals at the level of assistant or associate professor may request a transfer to a position one rank higher than his/her non-tenure eligible rank appointment, but the transfer shall not

automatically confer tenure. In all cases, a faculty member who moves to a tenure-eligible position shall be treated as a new hire for the purposes of promotion and tenure and shall meet the required probationary standards. All requests for transfer with promotion to the tenure track shall be reviewed by the Promotion and Tenure Committee.

Movement from a tenure eligible to a non-tenure eligible appointment

A faculty member in a tenure-eligible rank may request in writing that the Department Chair consider his/her movement to a non-tenure eligible faculty rank. The individual seeking such transfer to a non-tenure eligible rank shall remain in his/her present rank in the non-tenure eligible position until such time that the criteria for promotion have been fulfilled in the areas defined in his/her position description. All moves from a tenure-eligible appointment to a non-tenure eligible appointment shall be final. A faculty member may not request to move at a later time back to a tenure eligible rank. All requests for movement shall be reviewed by the School's Promotion and Tenure Committee.

D. Minimum Qualifications for Faculty Appointment

1. The minimum qualifications for appointment at the rank of Instructor and Assistant Instructor are:

Earned master's degree for Instructor; bachelor's degree for Assistant Instructor.

2. The minimum qualifications for appointment at the rank of Assistant Professor are:

Earned doctorate or terminal degree and experience appropriate to faculty appointment.

Faculty members with the M.D. degree shall have completed residency training leading to board certification, if appropriate.

Faculty members with the Ph.D. degree should have completed a postdoctoral training program if appropriate to their area of specialization.

Others shall be eligible for professional certification in their fields, if such is available or applicable.

3. The minimum qualifications for appointment at the rank of Associate Professor are in addition to the minimum qualifications for Assistant Professor enumerated above.

Faculty members with the M.D. degree shall have completed board certification in the faculty member's specialty or subspecialty (under unusual circumstances documentation of equivalent peer group evaluation may be considered).

Faculty members with the Ph.D. degree shall be certified in their fields if such certification is available or applicable.

Established reputation in teaching, service, and research, as appropriate to position description.

4. The minimum qualifications for appointment at the rank of Professor are in addition to the qualifications for Assistant Professor and the qualifications for Associate Professor enumerated above.

A faculty member initially appointed as a Professor shall have a proven stature in one or more

areas of research, teaching, and service as defined in the faculty member's position description. (see III. Activities for Evaluation in Promotion and Tenure)

A faculty member initially appointed as a Professor shall demonstrate a consistently high level of achievement and superior performance recognized nationally and/or internationally.

III. Activities for Evaluation in Promotion and Tenure

Faculty at an academic medical center should have the pursuit of scholarly activities as their highest priority. Scholarship should be evident in the functions performed by the faculty member while he/she teaches, engages in research, or provides service.

Scholarship is defined in the following ways:

The scholarship of discovery: this comes closest to what most of us mean when we use the term "research." It involves contributing to the corpus of knowledge and is inextricably linked with the advancement of the particular field of study. Research is "central to the work of higher learning" and should be encouraged and strengthened at the School of Medicine.

The scholarship of integration: this reflects "the need for scholars who giving meaning to isolated facts, putting them in perspective." This activity involves making cross-disciplinary connections and situating knowledge within a wider discipline or context. An individual who pursues this form of scholarship would aspire to "serious, disciplined work that seeks to interpret, draw together, and bring new insight to bare on original research." It is closely related to the scholarship of discovery in that it involves doing research "at the boundaries where fields converge."

The scholarship of application: this in some ways reflects what we have labeled as "service" in our traditional understanding of position descriptions at the School of Medicine. However, the scholarship of application involves more than providing a professional service or obtaining a fee for; it involves obtaining new knowledge in the act of performing a service as well as the translation of new knowledge into the service activity itself. According to Boyer, "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."

The scholarship of teaching: this concept elevates the act of teaching above the mere transfer of knowledge from teacher to student. "As a scholarly enterprise, teaching begins with what the teacher knows." The transmittal of this information must involve a series of pedagogical procedures which are "carefully planned, continuously examined, and related directly to the subject taught." In addition to transmitting knowledge, teaching involves transforming and extending it in the educational process.

A. Research

Scholarship, with its attributes of curiosity, erudition and originality, is essential to the development and maturation of an academic institution and to the maintenance of a learning environment. The term research should be interpreted as scholarly activity in one or more of the following disciplinary areas: basic sciences, behavioral and social sciences, clinical sciences, education, and humanities.

The criteria for promotion to any rank applies to both tenure-eligible and alternate faculty ranks. It should be noted that faculty members who hold alternate faculty rank appointments usually will have position descriptions that require performance in only two areas.

The general criteria for evaluation of research during the process of tenure or promotion to the rank of Associate Professor are: demonstration of the ability 1) to develop and maintain scholarly activity/research effort and 2) to disseminate the results of these scholarly activities. Furthermore, the research efforts should be nationally recognized as positive contributions by experts, and they should be largely independent. There should be a pattern of scholarly activity that is increasing over time and has sufficient promise for continued growth and evolution.

The rank of Professor is reserved for persons of proven stature in one or more areas of their position description. Promotion to Professor may occur on the basis of consistently high level and superior performance that is recognized nationally and/or internationally and not simply on the basis of time as an Associate Professor.

The following are examples of scholarship in research that should be documented and considered for promotion and tenure.

1. Some common kinds of research-associated contributions in the School of Medicine:
 - a. Contributions to the instructional mission of the department/medical school
 1. Development, successful implementation, dissemination, and acceptance of new curricula (e.g., problem-based learning)
 2. Development of innovative methods for teaching or for student assessment (e.g., practical skills assessment)
 3. Development of innovative instructional materials or methods for training educators in new instructional methods
 4. Dissemination of new and innovative curricula, student assessment, and instructional material.
 - b. Contributions to the basic sciences
 1. Discovery and dissemination of new knowledge related to basic science disciplines
 2. Development, dissemination, and acceptance of new ideas and concepts leading to further investigation
 3. Development, dissemination, and acceptance of a new or improved method of ensuring replicability of laboratory measurements
 - c. Contributions to the clinical sciences
 1. Development, dissemination, and acceptance of a new method for assessing patient status
 2. Development, dissemination, and acceptance of a new method for diagnosis or interpreting diagnostic criteria
 3. Development, dissemination, and acceptance of an improved method of therapy
 4. Discovery and dissemination of new knowledge related to pathophysiologic processes or disease manifestation
 5. Active participation in multi-center studies that develop improved methods of therapy
 6. Outcomes-oriented and other applied research
 - d. Contributions to the behavioral, informational, and social sciences and humanities
 1. Discovery and dissemination of new knowledge related to the behavioral, informational, and social sciences and humanities disciplines
 2. Development, dissemination, and acceptance of new ideas and directions for further investigation
 3. Outcomes-oriented and other applied research

2. Examples of appropriate documentation of scholarly activity in research:
 - a. Publications in peer-reviewed journals in area of expertise
 - b. Presentation and publication of peer-reviewed abstracts
 - c. Presentation of peer-reviewed or juried papers at national or international meetings
 - d. Significant citation by other workers in the field, especially the leaders, of published papers (can be determined with Citation Index)
 - e. Published reviews by other workers in the field, especially the leaders, of papers/books
 - f. Invitations to speak at scientific meetings and at other universities
 - g. Submission of research proposals to national agencies or foundations
 - h. Grant and/or contract awards from national agencies or foundations
 - i. Funding awards from commercial vendors
 - j. Awards for outstanding research accomplishments
 - k. Referee of manuscripts for journals in area of expertise
 - l. Referee of paper proposals for meetings of national associations
 - m. Review of grant applications to local, state, national, and governmental agencies
 - n. Appointment to national committees to review research proposals or results

3. Examples of research independence as appropriately documented:
 - a. Primary funding of the research program derived from funds generated by the applicant as Principal Investigator, Co-Principal Investigator, or Investigator
 - b. Principal author on papers in early phase of career
 - c. Evidence of active research program at the School of Medicine
 - d. Research director for graduate students, residents, post-doctoral students, and fellows
 - e. Mentoring of students at all phases of educational experience
 - f. Advisor of postdoctoral fellows, residents, or junior faculty
 - g. Publications co-authored with graduate students and/or residents and/or fellows at later stage of career

4. In addition to criteria used for promotion to the rank of Associate Professors, Professors should provide solid evidence of originality and creativity that will continue into their future careers. Examples of national/international recognition for evaluating candidates for the rank of Professor:
 - a. Consistent external funding over entire career
 - b. Constant publication record over entire career
 - c. Invitations to speak at national/international scientific meetings
 - d. Membership on national grant review panels
 - e. Referee of manuscripts in area of expertise
 - f. Member of editorial board of journals in area of expertise
 - g. Chair/organizer of national/international meetings
 - h. Author/editor of monographs or books
 - i. Invitations to contribute chapters to books
 - j. Election to societies or awards of honors by societies requiring outstanding contributions associated with research

B. Teaching

Scholarship in teaching, when documented by publications or presentations at professional meetings, shall be evaluated as part of a faculty member's commitment to research. Developments of new methods and materials in teaching and assessment that are germane to the SIU educational

environment but are not published can also provide evidence of scholarship in teaching. However, it is critical that the nature of such scholarly developments be well documented in the absence of peer review that traditionally occurs with publications and presentations. Documentation should include, at a minimum, description of teaching activity, an example, rationale, and evaluation by peers and students. Activities may include course design, curriculum development, teaching methods, and assessment. In addition, the level of direct teaching activities shall be documented.

The following are activities associated with scholarship in education that, appropriately documented, should be considered for promotion and tenure.

1. Some examples of teaching-associated contributions
 - a. Development, successful implementation, dissemination, and acceptance of new curricula
 - b. Design of innovative methods for teaching
 - c. Design of relevant methods for student assessment
 - d. Development of new curricular materials
 - e. Update and/or redesign of curriculum materials
 - f. Design of new, previously untaught, curricular materials
 - g. Design of clinical cases
 - h. Incorporation of new skills, such as writing or oral presentation skills, into existing materials
 - i. Development of laboratory materials
 - j. Design of methods for presenting instructional materials in an alternate manner (Videotape, computer, CD-ROM, etc.)
 - k. Development of methods for training educators in new instructional methods
 - l. Organization of workshops and continuing education activities
 - m. Design of patient education materials

2. Examples of documentation of teaching activity, specifying the faculty member's role, the frequency of occurrence, and the number of students, and the type of student (medical student, resident, fellow, graduate student, peer, etc.):
 - a. Courses taught
 - b. Seminars given
 - c. Lectures given, other than those included in courses or seminars
 - d. Teaching rounds with students and residents
 - e. Outpatient clinics with students and residents
 - f. Other teaching activities, such as problem-based learning, introduction to clinical medicine, laboratory sessions, teleconferences, etc.
 - g. Presentations at workshops
 - h. Participation in continuing education activities
 - i. Mentoring of medical students, residents, fellows and graduate students working on independent study projects

3. Examples of efforts to improve teaching, appropriately documented:
 - a. Formal course work in education
 - b. Attendance at educational conferences
 - c. Attendance at educational workshops
 - d. Attendance at educational seminars

- e. Participation in peer consultation on teaching
4. Examples of documentation of scholarly activity in teaching:
- a. Assessments of teaching skills by medical students, residents, fellows, graduate students, peers
 - b. Assessments of the quality of teaching materials used by medical students, residents, fellows, graduate students, peers
 - c. Feedback from presentations at local, national meetings
 - d. Publication of patient-education articles in Newsletters and other non-peer reviewed publications (peer-reviewed publications should be listed under Research)
 - e. Presentation of patient-education information on radio and television
 - f. Invitations to participate in workshops on teaching
 - g. Awards for outstanding teaching accomplishments
 - h. Appointment to national board test committees for licensure or certification
 - i. Invitations to participate in national meetings on education topics
 - j. Performance by students on standardized examinations
 - k. Teaching assistance provided to colleagues

C. Service

1. General Criteria - Professional

- a. Governmental or specialty advisory committees
- b. State, regional and national organizations
 - Membership
 - Offices held
- c. State, regional and national agencies
 - Consultant/Reviewer
 - Representation/Liaison
- d. Boards and Review Committees
 - Contribution to Specialty Boards
 - Examiner in Subspecialty Boards
- e. Honors/Acknowledgment for service

2. University/School - General

- a. Administrative Affairs
 - 1. University and school committees including offices held.
 - A letter of recommendation or a checklist completed by the chairs or staff of the committees to comment on attendance, participation and contributions to the work of the committee.
 - 2. Leadership positions and role on university and school committees
- b. Student Affairs
 - 1. Screening student applicants
 - 2. Advising student organizations
 - 3. Special counseling
 - 4. Assistance in selection/obtaining of electives and residencies
- c. Residents and Fellows
 - 1. Career counseling
 - 2. Assistance in obtaining fellowships/faculty positions/practice positions

3. University/School - Department/Division

a. Administrative Affairs

1. Departmental committees
2. Career counseling for faculty, residents and fellows
3. Assistance in career development
4. Assistance to administrative/business staff
5. Assistance in faculty and other staff recruitment

b. Student Affairs

1. Academic advising outside of teaching responsibilities
2. Clerkship mentor
3. Clinical skills, exam evaluation
4. Assistance to clerkship directors in designing and conducting evaluations, tests/exams
5. Coordinating/directing clerkship and elective rotations for division/service
6. Providing research, presentation and publication experience to students

c. Residents and Fellows

1. Screening/interviewing applicants
2. Clinical competence examinations
3. Coordinating/directing resident rotations for division/service
4. Coordinating/directing fellowship programs for division/service
5. Providing research, presentation and publication experience to residents and fellows

d. Clinical Service

1. Related to clinical practice

Documentation on how the faculty member has built/expanded the practice whether he/she joined an existing service
 whether he/she expanded an existing practice by offering new services, etc.
 whether he/she established a new service at the School
 whether he/she re-established a service after the departure of a clinician
 Number of patients seen per year
 Number of operations/procedures
 Percentage of patients seen by the candidate out of the total for his/her division
 Percentage of operations/procedures performed by the candidate out of the total for his/her division

2. Related to patient care

Number of referrals from physicians in another specialty/subspecialty
 Number of referrals from physicians in the same specialty
 Ratings from residents and peers on components of knowledge, clinical skills, professional behavior (there are some existing rating scales we can use or modify as needed)
 Ratings from patients on satisfaction with their medical care
 Information on patient outcomes (as this information becomes increasingly available through patient data bases)

e. Post-Doctoral and Graduate Students

1. Screening/interviewing applicants
2. Mentoring graduate students
3. Serving on graduate student committees
4. Career counseling for graduate students and post-doctoral fellows
5. Assistance in submitting fellowship applications

6. Assistance in preparing presentations and/or publications.
4. Community - Professional Services
 - a. Hospitals
 1. Committees - membership and offices
 2. Contracts for service
 3. Consultant/advisor
 4. Committees for free clinics
 - b. Referring Physicians
 1. Type of service provided
 2. Usefulness and uniqueness of service provided
 3. Feedback and education provided to referring physicians
 - c. Local Groups - Organizations
 1. Presentations to lay groups
 2. Discussions/write ups in local newspapers
 3. Discussions/advice on local radio station
 4. Local TV appearances and presentations
 5. Volunteer work for free clinics
 6. Organizing community programs on health care issues
 5. Self Evaluation

Self assessment prepared by faculty member and critiqued by Division/Department Chair. Should include attendance at continuing education programs.

IV. Promotion

Faculty appointed to either tenure-eligible or non-tenure eligible faculty ranks shall be considered for promotion in their appropriate category.

All promotions of full-time faculty shall be reviewed by the School's Promotion and Tenure Committee.

A. Process

A faculty member shall be evaluated for promotion in any year at her or his request.

The Department review shall follow the department's own promotion guidelines and standards.

10 After Department review, the recommendation is transmitted by the Department Chair to the Dean along with requisite documentation.

20 Promotion dossiers are forwarded to the School of Medicine's Promotion and Tenure Committee for review and recommendation.

3. The Promotion and Tenure Committee sends its recommendation to the Dean.

4. The recommendation of the Dean and Provost is forwarded to the Chancellor of the University.

When a promotion confers tenure, final approval of the Board of Trustees of Southern Illinois University is required.

B. Negative Decision

It is the responsibility of the Dean and Provost to convey in writing the reasons for a negative promotion decision to the appropriate Department Chair. It is the responsibility of the chair to share these written reasons with the faculty member so as to provide constructive criticism to advance the faculty member's career.

C. Minimum Department Standards for Promotion

Departments shall establish minimum performance criteria for research, teaching, and service. The Department Chair along with the Associate Dean for Research and Faculty Affairs shall assure that position descriptions are written in such a way as to allow individual faculty members to direct their efforts towards achieving their professional development as well as the Department's overall goals. Evaluations of faculty should be based on the faculty member's position description in light of Department standards.

D. School of Medicine Standards

In evaluating a candidate's qualifications, the Promotions Committee and Dean shall judge performance based on the time committed to each area of activity as documented in the faculty member's position description. For most faculty members, one of the major activities will be teaching. The criteria for promotion described below apply to both tenure eligible and non-tenure eligible faculty ranks. It is unlikely that a faculty member who has only one area of activity would be considered seriously for promotion.

1. Time in Rank

A candidate for promotion should have the appropriate number of years in rank by July 1 of the year in which the candidate's promotion would be effective. Time in rank and performance at other institutions will be considered but usually a period of three years in rank at Southern Illinois University School of Medicine will be required before promotion.

2. Ratings

A faculty member whose performance in all areas is considered to be effective can in time be considered for promotion. However, the title of Associate Professor is a respectable one and may be the highest rank achieved by many valuable faculty members. The following ratings shall be used in the Promotion Process:

Outstanding means a clearly superior performance.

Effective means clearly acceptable performance.

Not effective means unacceptable performance.

A rating of *Not effective* in any area of the position description shall be a barrier to promotion.

3. Specific Requirements by Rank

The following requirements for both tenure eligible and non-tenure eligible faculty ranks serve as minimum criteria for promotion. Individual Departments may have requirements defined for each

rank which exceed School of Medicine requirements.

Instructor

Earned master's degree for Instructor or Bachelor's degree for Assistant Instructor.

Faculty members should demonstrate potential and interest in teaching and/or ability to teach effectively, if appropriate to position description.

Faculty members should demonstrate potential and interest in and/or ability for effectiveness in some aspects of service, if appropriate to position description.

Faculty members should demonstrate potential and interest in and/or ability to conduct research, if appropriate to position description.

Assistant Professor

Earned doctorate or terminal degree and experience appropriate to faculty appointment.

1. Faculty members with the M.D. degree shall have completed residency training leading to board certification, if appropriate.
2. Faculty members with the Ph.D. degree should have completed a post-doctoral training program if appropriate to their area of specialization.
3. Others shall be eligible for professional certification in their fields, if such is available or applicable.
4. Faculty members should demonstrate potential and interest in teaching and/or ability to teach effectively, if appropriate to position description.
5. Faculty members should demonstrate potential, interest, and/or ability for effectiveness in some aspect of service, if appropriate to position description.

An assistant professor whose position description calls for performance in all three areas of academic activity (i.e., teaching, service and research), and who has shown effective performance in two areas and outstanding performance in one area, may be promoted after five years in rank. If this same faculty member's performance in two or more areas is outstanding, promotion may occur after four years in rank. Promotion prior to four years would be an exception and in all cases would require outstanding performance in all three areas.

An assistant professor whose position description calls for major performance in only two of the three areas of academic activity, and whose performance is effective in one area, and outstanding in the other area, may be promoted after five years in rank. If this same faculty member's performance in both areas is outstanding, promotion may occur after four years in rank.

Associate Professor

(These criteria are in addition to characteristics 1. and 2. as specified for Assistant Professor.)

For an M.D., board certification in the faculty member's specialty or subspecialty (under unusual circumstances documentation of equivalent peer group evaluation may be considered). Non-M.D. faculty members shall be certified in their fields if such certification is available or applicable.

Documentation of effective or outstanding teaching, if appropriate to position description.

- 10 Documentation of effective or outstanding service, if appropriate to position description.
2. Documentation of effective or outstanding research of appropriate quality and quantity for time in rank, if appropriate to position description. Performance in at least one (teaching, service, research) shall be outstanding.

3. Established reputation in teaching, service, and research, as appropriate to position description.

Professor

(These criteria are in addition to characteristics 1. and 2. as specified for Assistant Professor and characteristic 1. as specified for Associate Professor.)

This rank is reserved for persons of proven stature in one or more areas of their position descriptions. Promotion to full Professor may occur on the basis of consistently high level and superior performance recognized nationally and/or internationally and not simply on the basis of time put in at the rank of Associate Professor. Therefore, this document does not provide time schedules for promotion to Professor.

Summary of Minimum Criteria for Promotion

An Assistant Professor whose position description calls for effort in all three areas of activity (teaching, service, and research) shall be rated in each:

When performance has been rated in the 3 areas as:	Outstanding ^a Effective ^b Effective	Outstanding Outstanding Effective
May be promoted to ^c Associate Professor in:	5 years or more	4 years

An Assistant Professor whose position description calls for performance in two of the areas of activity shall be rated in each:

When performance has been rated in the 2 areas as:	Outstanding Effective	Outstanding Outstanding
May be promoted to Associate Professor in:	5 years or more	4 years

Promotion to full Professor is expected to occur on the basis of consistently high level and superior performance recognized nationally and/or internationally and not simply on the basis of time put in at the rank of Associate Professor. Therefore, this document does not provide time schedules for promotion to Professor.

E. Documentation of Activities and Format of Dossier

A basic format for promotion and tenure dossiers is incorporated in this policy. The format should include items in *Section III. Activities for Evaluation in Promotion and Tenure*. A common format for presenting supporting information will help assure fairness in the decision-making process. Since promotion requires that a person's entire professional contributions be reviewed, the format calls for information on educational background, previous

^aOutstanding means a clearly superior performance.

^bEffective means clearly acceptable performance.

^cCandidate should have required number of years by July 1 of the year in which the candidate's promotion would be effective

academic and professional experience, teaching activities, scholarly contributions, and service activities. Some departments may wish to add special categories.

V. TENURE

A. The Locus of Tenure within the University

The locus of tenure within the University is in the Department in which the appointment resides. Tenurable ranks in the School of Medicine are the ranks of Associate Professor and Professor.

Approved Tenure Units in the School of Medicine are:

Clinical Units

Anesthesiology
 Family and Community Medicine
 Internal Medicine
 Neurology
 Obstetrics and Gynecology
 Pathology
 Pediatrics
 Psychiatry
 Radiology
 Surgery

Non-Clinical Units

Anatomy
 Behavioral and Social Sciences
 Information and Communication Sciences
 Medical Biochemistry
 Medical Education
 Medical Humanities
 Medical Microbiology and Immunology
 Pharmacology
 Physiology

B. Tenure Schedule *Approved by the Board of Trustees 12/13/01*

Individuals appointed to the **tenure track** at the rank of assistant professor will be placed into one of two tenure tracks at the time of initial appointment. This will apply to individuals in either clinical or basic science tenure units. No changes will be considered after initial appointment.

Assistant professors having job descriptions with a **clinical and education commitment greater than their research commitment** shall be notified in writing that tenure has been awarded at the end of the **eight-year** probationary period or that the appointment will not be renewed at the end of the ninth year.

Assistant professors with job descriptions having a **research commitment greater than their combined clinical and education commitment** shall be notified in writing that tenure has been awarded at the end of a **six-year** probationary period or that the appointment will not be renewed at the end of the seventh year.

Associate Professor At the end of a four-year probationary period an Associate Professor shall be notified in writing either that tenure has been awarded or that the appointment will not be renewed at the end of the fifth year. An Associate Professor who has served previously as Assistant Professor at the University shall have tenure from the date of appointment to the rank of Associate Professor.

Professor At the end of a two-year probationary period a Professor shall be notified in writing either that tenure has been awarded or that the appointment will not be renewed at the end of the third year. A Professor who has served previously as Associate Professor at the University shall have tenure from the date of appointment to the rank of Professor. The basic academic unit may recommend tenure at the time of initial appointment of a Professor.

C. Early Tenure Decision

The initiation of any tenure recommendation before the full probationary term ends shall be made in writing by the faculty member. The decision emanating from such a request shall be final. If the decision is negative, the faculty member will be notified in writing that the following contract year will be terminal. A negative decision for promotion to the Associate Professor or Professor rank before the end of the probationary period shall not be considered as a negative tenure decision.

D. Computing Years of Credit Toward Tenure

In order to facilitate the administration of tenure review procedures, there shall be a common tenure anniversary date of May 15 for all tenure-eligible academic appointments. This tenure anniversary date will not necessarily coincide with the faculty member's date of initial appointment. A year of credit toward tenure is earned in any year in which a tenure-eligible faculty member has a full-time active employment status (including leaves of absence without pay) for no less than six months between July 1 and June 30. The time spent on sick leaves and disability leaves of absence will not be considered as part of the probationary period.

E. Procedures for Review of Qualifications for Tenure

1. General Requirement

Primary responsibility for evaluation of the academic qualifications of candidates for tenure rests with the faculty. There are three sequential levels in the tenure review process: review in the Department; review at the School of Medicine level; and review by the Provost of the School of Medicine. Large Departments may utilize review at a Division or other level consistent with approved Department Tenure Policy. However, the tenure decision emanating from the Department shall involve a vote of all Department tenured faculty.

Review procedures and standards shall be developed in writing for each level of review, and these procedures shall be made known to prospective and current faculty members, as well as to the general School of Medicine community.

2. Department Review

Review shall be based on a Tenure Dossier prepared by the faculty member in cooperation with the Chair along with solicited letters of recommendation and evaluation materials. In conducting reviews at the Department level, all tenured faculty shall have an opportunity to vote on a tenure decision and *only tenured faculty* shall vote on the decision. A negative tenure vote by a majority of the tenured faculty cannot be overruled except in cases of failure to observe the standard or of demonstrated discrimination.

Department Tenure Review shall consider Department standards and the position description of the faculty member under review. The Chair is responsible for making an independent tenure recommendation, but the votes of the tenured faculty and of any special review committee are to be forwarded with the Chair's recommendation.

3. School of Medicine Review

Tenure Review shall be conducted by the tenured faculty members of the Promotions and Tenure Committee. The review process should include review the Dossier in light of Department recommendations for tenure. The Tenure Committee shall review the candidate on the basis of the Dossier considering the position descriptions of the faculty member in light of Department and School of Medicine standards.

The Tenure Review Committee shall forward its recommendations to the Dean, who is responsible for all tenure recommendations emanating from the School of Medicine. These recommendations along with accompanying documentation shall be forwarded to the Provost of the School of Medicine.

4. University Review

The Provost of the School of Medicine shall review all tenure recommendations from the Dean in terms of Department, School of Medicine, and University-wide standards in light of the position descriptions of the faculty member under consideration and shall forward recommendations to the Chancellor of the University. The final recommendation on tenure will be forwarded from the Chancellor's Office to the Board of Trustees for approval by the Board.

F. Standards

1. The activities to be considered in the tenure decision process are teaching, research, and service as defined in the faculty member's position descriptions.
2. Tenure is not granted at the rank of Assistant Instructor, Instructor, or Assistant Professor. Assistant Professors must first meet the standards that the School has set for the rank of Associate Professor and qualify for promotion to that rank before tenure will be awarded.
3. A faculty member initially appointed to the rank of Associate Professor may achieve tenure through promotion to Professor or independent of promotion through a separate tenure decision.

4. The minimum standards for tenure at the rank of Associate Professor are:

For an M.D., board certification in the faculty member's specialty or subspecialty (under unusual circumstances documentation of equivalent peer group evaluation may be considered).

Non-M.D. faculty members shall be certified in their fields if such certification is available or applicable.

Documentation of effective or outstanding teaching, if appropriate to position description.

Documentation of effective or outstanding service, if appropriate to position description.

Documentation of effective or outstanding research of appropriate quality and quantity for time in rank, if appropriate to position description. Performance in at least one (teaching, service, research) shall be outstanding.

Established reputation in teaching, service, and research, as appropriate to position description.

5. Professor

The rank of Professor is reserved for persons of proven stature in one or more areas of their position description. A faculty member initially appointed as a Professor shall consistently demonstrate a level of superior performance recognized nationally and/or internationally to achieve tenure. It should be remembered that the title of Associate Professor is a respectable one and may be the highest rank achieved by many valuable faculty members.

G. Documentation of Activities and Format of Dossier

A basic format for promotion and tenure dossiers is linked below. A common format for presenting supporting information will help assure fairness in the decision-making process. As promotion requires that a person's entire professional contributions be reviewed, the format calls for information on educational background, previous academic and professional experience, teaching activities, scholarly contributions, and service activities. Some units may wish to add special categories. The basic format example is available at www.siumed.edu/adrfa/facultyinfo.html. Go to >

VI. GUIDELINES FOR APPOINTMENT AND PROMOTION OF VOLUNTARY (NON-SALARIED) AND PART-TIME FACULTY

A. Clinical Ranks

Clinical Associate: Rank appropriate for those community faculty who have a small role in some aspect of the academic mission of the Medical School, but do not have a specific designated assignment with a written description of formal supervision and oversight according to Department Promotion Guidelines and Procedures.

Clinical Instructor through Clinical Professor are ranks appropriate for community physicians who have a specific and delineated role in the academic mission of the School, usually in undergraduate or graduate education. They should have their role delineated in writing and their performance of these roles will be under the supervision and oversight of their Department Chair.

Clinical Instructor will generally be an entry rank for those physicians fully trained in their discipline but not yet board certified. Promotion to Clinical Assistant Professor may occur

according to Department Promotion Guidelines and Procedures after board certification is achieved.

Clinical Assistant Professor may be an entry level rank for board certified physicians. (Many community faculty will be sustained in this position throughout).

Promotion to Clinical Associate professor should be considered after 8 to 10 years in the rank of Clinical Assistant Professor. Criteria for promotion should include:

Demonstration of outstanding performance in teaching or service.

Established reputation in the community of commitment to excellence in one or both areas.

Promotion to Clinical Professor should be considered after 8 to 10 years in rank of Clinical Associate Professor only for those individuals demonstrating continued excellence and commitment to the School's mission. No more than a small fraction of the community faculty should achieve this rank. Generally, criteria include:

Demonstrated outstanding teaching and service.

Recognition by the community and region of leadership qualities (i.e. hospital, county medical society or regional medical societies in leadership positions).

Appointment to and promotion in these Clinical ranks shall be initiated by the Department and recommended to the Dean. The Promotion and Tenure Committee will not review unless requested to do so by the Dean.

B. Adjunct Ranks

Adjunct Instructor through Adjunct Professor are ranks appropriate for individuals who have a delineated non-clinical role in the academic mission of the School. Such individuals shall have a designated assignment with a written description of their role or a description of their contribution to the academic mission of the School of Medicine or its constituent Department. Annual review of appointment shall be conducted according to Department Promotion Guidelines and Procedures.

Individuals holding faculty rank at comparable institutions of higher learning will normally be appointed at the equivalent Adjunct rank.

Individuals without faculty appointment at other institutions shall initially be appointed at a rank commensurate with their professional status and educational experience consistent with these guidelines and University guidelines. Normally, the rank of Adjunct Instructor will be the appropriate initial rank.

Promotion to Adjunct Assistant Professor should be considered after 6 to 8 years in rank of Instructor only for those individuals demonstrating continued excellence and commitment to the School's mission. Criteria for promotion should include:

Demonstration of outstanding performance in research, teaching or service in accord with Department promotion standards.

Established reputation of a commitment to excellence in one or more areas.

Promotion to Adjunct Associate Professor should be considered after 8 to 10 years in rank of Assistant Professor only for those individuals demonstrating continued excellence and commitment to the School's mission. Criteria for promotion should include:

Demonstration of outstanding performance in research, teaching or service in accord with Department promotion standards.

Established reputation of a commitment to excellence in one or more areas.

Promotion to Adjunct Professor should be considered after 8 to 10 years in rank of Adjunct Associate Professor only for those individuals demonstrating continued excellence and commitment to the School's mission. Criteria for promotion should include:

Demonstrated outstanding research, teaching and service as judged by the Department Chair.
Recognition by the community, region, or peers of the individual's contributions to the academic programs of the School.

Appointment to and promotion in these Adjunct ranks shall be initiated by the Department Chair and recommended to the Dean. The Promotion and Tenure Committee will not review unless requested to do so by the Dean.

Volunteer faculty should be reminded annually of the correct usage of their titles.

Approved December, 1996