

**University of Washington School of Medicine
Department of Radiation Oncology**

Guidelines for Appointment and Promotion

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I. Guidelines Overview

This document is used by the Department of Radiation Oncology to provide guidance for faculty members in understanding what is required for appointments and promotions within the department. In the initial part of the document (sections II – III) performance criteria for promotion are described. In the second part of the document (section IV) guidelines for appointment and promotion at specific ranks and titles are described. Appointments will be based on an assessment of the candidate's professional training, record of achievements, and level of peer recognition within his/her field of expertise. Assessments for promotion will be based on well-documented achievements in the areas of teaching, administrative service, clinical practice, research and professionalism that the faculty member has performed. A third part of the document (section V) describes how the faculty member's performance will be measured based on their level of performance, and allocation of effort, in the areas of their job focus.

II. General Guidelines for Appointment and Promotion

Conferring a professorial rank is a means of acknowledging notable contributions of faculty members to the University and to their disciplines. Promotion is not granted as a reward for long-term service, but rather to recognize those who have excelled in specific aspects of the academic mission.

University guidelines for the appointment and promotion of faculty members are found in the University Policy Directory, and in particular Volume II, Part II, Chapter 24 of the Faculty Code found on-line at:<http://www.washington.edu/admin/rules/policies/RoadMap.html> and

<http://www.washington.edu/admin/rules/policies/FCG/FCCH24.html>

Listed below are further guidelines for promotion of faculty in the Department of Radiation Oncology. The general criteria of quality and productivity in each area of academic activity: *Teaching, Research/Scholarship, Clinical Practice, and Departmental Service* are described in this document. The criteria are applicable for regular and research faculty.

The criteria for appointment or promotion in the Department of Radiation Oncology are predicated on adoption of a single, broadly-based academic appointment that will encourage and reward performance in all aspects of the department's mission and achieve or exceed a standard in teaching, administrative service contributions, professionalism, research / scholarship, creativity, and clinical practice; recognizing that scholarly contributions as defined in this document are a requisite for academic appointment and promotion. Both quality of overall performance, admittedly a subjective measure, and quantity of achievement will be considered important determinants of a recommendation for promotion.

These Guidelines apply to all faculty (radiation oncologists, medical physicists, radiobiologists, radiochemists, and other non-physicians) within the Department of Radiation Oncology, School of Medicine. It is advisable that all faculty members within the department familiarize themselves with the content of these guidelines so as to begin the documentation of their activities in anticipation of applying for promotion at some time in the future.

General Criteria Considered in Promotion of a Faculty Member (adapted from the UW Faculty code) are as follows:

Effective Teaching: Originality, innovation, and creativity in teaching are highly prized and specially rewarded. The quality of teaching, along with scholarship, will be weighed heavily in determining eligibility for promotion. Effective teaching is evaluated by the ability to organize and promote learning at the appropriate level and with appropriate subject matter, to incorporate up-to-date information, to stimulate intellectual student discussion and debate, and the ability to test and use new approaches to education at the undergraduate, graduate and continuing education levels. A review of evaluation materials from the Department's teaching evaluation program will be considered. The opinions of students, and colleagues and student and resident performance, measured by the resident's score card, are important in this evaluation. Establishing a positive learning environment is required. A review of the number and quality of teaching interactions with students, residents, fellows, practicing physicians, and other healthcare providers will influence the rating of the individual seeking promotion.

Competence in Administrative Service: Competence in administrative service is evaluated by demonstration of effective participation on committees, in administrative functions, clinical duties, special training programs, continuing education, and community services to schools, industry, and state, local, national and international organizations and governments. Administrative service is deemed of equal importance compared to other criteria.

The Department's success requires effective administration of its teaching and clinical programs. Hence, it is expected that a high percentage of key administrative positions within our Department, School of Medicine, and the faculty's site of practice will be filled with active faculty clinicians. At the time of promotion, each faculty member will provide a description of his/her activities relating to this type of service which will include committee membership.

Professionalism: Professionalism is valued by the University and Department and is expected to be evident among its faculty in carrying out UW Medicine's mission of improving the health of the public through teaching, research and patient care. Professionalism includes demonstrating excellence, integrity, respect, compassion, accountability, and a commitment to altruism in our work interactions and responsibilities. It is expected that faculty will conduct themselves in a professional manner in all of their interactions with patients, members of the public and the University community, and each other. This requirement is to promote excellence, integrity and altruism in all of our activities; to assure that all persons are treated with respect, dignity and courtesy; and to promote constructive communication and collaborative teamwork.

Research/Scholarship: Scholarship is evaluated by effectiveness of teaching, research, and contribution to knowledge through publications, lectures, and conference presentations. Its quality is reflected in the national and international scientific reputation of the faculty member and in the performance of his/her students or trainees. Evaluation of scholarship will be based upon review of the number and quality of journal publications, chapters, textbooks, contributions on clinical and/or educational research projects,

and invited presentations at regional, national, and international meetings. Scholarly contributions may focus on clinical medicine, health services, applied clinical research, medical education, or other relevant fields. Objective evidence of scholarship will be required for advancement.

Creativity: The University recognizes that clinicians and other academics may perform a number of time and energy consuming duties essential to the role of the University in relation to health professionals and the community. These activities contribute to the candidate's function as a role model to other members of the profession and the public as a recognized expert for trainees. Creativity is evaluated by quality and quantity of published work, range and variety of intellectual interests, grant and fellowship awards and success in training graduate and professional students. Creativity is manifested through professional innovation (inventions, patents and licenses, new techniques, conceptual innovations, etc.); exemplary professional practice (instrumental in the introduction and dissemination of an invention, new technique, conceptual innovation, educational program, etc.); or contributions to the development of professional practices (guidelines development, health policy development, government policy, consensus conference statements, regulatory committees and setting of standards. Membership and holding office in professional organizations in itself is not considered evidence of creativity.

III. Performance Criteria for Promotion

Overview

Faculty members will be evaluated for promotion based on the percentage effort, as defined in their job description, in the categories of *teaching, clinical and administrative service, and Research/Scholarship*. All Faculty members are expected to spend a *minimum of 5% of their time on administrative service*. Except for Research Faculty and Clinical Faculty, all Faculty members are expected to spend a *minimum of 10% time on teaching*. The expectations for a Faculty member's effort (defined as a % time) in each of the four categories will be determined by his/her job description, outlined at the time of hire. It is expected that the job description outlining specific roles, responsibilities and duties will be reviewed during each performance evaluation. Changes in the job description, and % effort in the categories, will be negotiated between the Faculty member and the Department Chair.

Descriptions of what constitutes the specific measurements of performance are provided below. Specific examples of performance within each category are provided in Section II.1 – II.5

- **Superior Performance:** A Faculty member demonstrates superior performance by *exceeding expectations* in multiple areas of the specific category over a sustained period.
- **Satisfactory Performance:** A Faculty member demonstrates satisfactory performance if he/she consistently meets expectations in all areas of the specific category.
- **Unsatisfactory Performance:** A Faculty member demonstrates unsatisfactory performance if he/she fails to meet the expectations of that specific category.
- **Unacceptable performance:** A faculty member demonstrates unacceptable performance if he/she consistently under-performs in any of areas of the specific category.

Each Faculty member is expected to maintain at least a satisfactory rating in every category as defined by their faculty track/pathway.

III.1 Teaching

Promotion requires that the candidate has contributed in a meaningful way to the achievement of the Department's and the University's educational mission. The nature, quantity and quality of these contributions will be evaluated with reference to departmental norms, and expectations consistent with job descriptions and career pathways, and academic, and where applicable, clinical responsibilities.

The evaluation of teaching performance will be conducted in accordance with the standards outlined and be influenced by the percentage weighting of teaching in the Faculty member's job description. With the exception of Research Faculty and Clinical Faculty appointments, each Faculty member is expected to have a teaching component in the job description (minimum 10%) and is expected to engage in regular professional development for the purpose of enhancing their teaching skills. While a Clinical Faculty member is not expected to have a teaching component, there may be exceptions which will be specified in the faculty member's job description. In those occasions, the teaching component for that clinical faculty member will be adjusted based on their site of practice and may be greater or less than 10% depending on the opportunities available for teaching. Teaching shall include educational efforts directed at undergraduate, graduate, and continuing education. The effectiveness in the performance of teaching will be measured by teaching evaluations including evaluations by undergraduate students, medical students, residents, fellows, and peers. Ensuring documentation of teaching evaluation data is the responsibility of the faculty member and should include evaluation of hands-on patient-based teaching in the clinic, faculty-led resident didactic conferences and lectures, departmental lectures and grand rounds presentations, peer-to-peer reviews, and resident/fellow rotations. Two trainees will be asked to submit a letter attesting to the faculty member's ability to teach as part of the promotion packet, if there is a teaching component in the faculty member's job description. The attestations should be from trainees within the last three years. Teaching evaluations are expected annually and peer evaluation are expected annually for Assistant Professors and at least every three years for Associate and full Professors and the year before promotion from Associate Professor to Professor.

Teaching will take many forms including, didactic lectures, small group or case-based learning, bedside clinical teaching, seminars, and/or research training. Candidates seeking promotion on the basis of excellence in education and teaching must demonstrate superior (significant and high quality) contributions to teaching and/or other education related activities.

Examples:

Superior Teaching Performance:

- a. Evaluations in the top 10% of teachers
- b. Nominations for and/or receipt of one or more departmental, institutional, local or national teaching awards
- c. Contributions to course and/or curriculum development
- d. Development and/or participation in professional development activities focusing on medical, physics, or biomedical education, including:
 - i. Recognition of teaching talent by selection to a major educational postgraduate education and/or continuous professional learning
 - ii. Directorship of a graduate training, residency, or fellowship program

- iii. Coordination or participation in an undergraduate, medical student, resident or fellow teaching block in the medical curriculum
- iv. Chairing of a major faculty, departmental or hospital education-related committee

Superior teachers will have published education-related research or experiences in prestigious medical or basic sciences journals, presented papers or posters at national and international educational/professional meetings and encouraged trainees in these endeavors. They will be regular and/or invited participants in the Faculty's continuous professional development efforts and/or actively participated in Faculty departmental or divisional continuing medical education events including departmental, multidisciplinary group or institutional presentations/lectures such as grand rounds.

Leadership in the educational forums shall be considered a measure of superior performance and include activities as identified above, but also the development, implementation and/or evaluation of innovative teaching methods. Superior teachers shall be identified by their role-modeling impact as evidenced by unsolicited testimonials from peers or trainees. They will have accepted formal or informal mentorship relationships with undergraduate students, medical students, residents, fellows or junior faculty.

Satisfactory Teaching Performance:

- a. Fulfillment of their assigned teaching duties within the context of their job description
- b. Satisfactory evaluations of their teaching activities by students, residents, fellows, and peers
- c. Participation in formal evaluations of students, residents, fellows, and peers
- d. Demonstrated commitment to personal professional development of their teaching skills by participation in teaching enhancement activities
- e. Consistent active participation in departmental teaching activities such as, didactic lectures, chart and QA rounds, when appropriate

Abstract presentations at educational meetings and participation in local professional development efforts are expected if the individual has a significant clinical educator/administrator role or if they are more senior educators.

An effective teacher will have the following attributes. One is not expected to have all of these attributes; however, candidates seeking promotion on the basis of excellence in teaching would be expected to show greater evidence of three or more of these attributes:

- a. Mastery of the subject area
- b. Skill in one or more of : lecturing to large groups, facilitation of small groups, one-to-one teaching, and supervision and mentoring
 - i. The ability to effectively employ appropriate educational methods
 - ii. The ability to stimulate and challenge the intellectual capacity of learners
 - iii. The ability to influence students' intellectual development and development of critical skills and critical thinking
- c. Be a professional and educational role model
- d. Professionalism in teaching that includes respect for students and colleagues, sensitivity to diversity; ability for self-assessment and participation in ongoing professional development and accessibility to learners.

Unsatisfactory Teaching Performance:

- a. Inconsistent teaching evaluations with several below average scores without consistent and sustained improvement over time.
- b. A lack of commitment to professional development in the area of teaching
- c. Lack of participation in mentorship activities with students, residents, fellows or other postgraduate trainees.
- d. Non-active participation in didactic lectures, chart and QA rounds, when appropriate

Faculty in this category may also have few scholarly contributions to local or national educational endeavors.

Unacceptable Teaching Performance:

- a. Consistent under-performance in teaching activities and duties
- b. Unwillingness to participate in teaching activities such as lectures, small group seminars and didactic sessions, clinical bedside teaching, mentorship activities
- c. Consistent poor evaluations of teaching activities, such as didactic presentations; poor evaluations of clinical or research trainee supervision
- d. Failure to participate in continuing medical education
- e. No evidence of scholarly contributions to educational endeavors.

Documented unprofessional or unethical behavior in the teaching role is considered unacceptable, as is unresponsiveness to recommendation for professional development of teaching or supervisory skills.

III.2 Administrative Service

Service within the University and to external agencies forms an important and often time-consuming aspect of many faculty members' academic careers. In providing this service, they contribute to the continued excellence of the academic environment and allow the University a voice and visibility in external agencies. Although service in itself cannot be the main criteria for promotion, the department may consider service in support of the mission of the University and Department.

The evaluation of a Faculty member's administrative service performance will be influenced by the negotiated percentage in the Faculty member's job description. Each Faculty member is expected to provide at least 5% administrative service to his/her professional discipline, the Department of Radiation Oncology, UW Medical School or the University of Washington. Administrative service to the discipline includes leadership responsibilities for professional societies (e.g., holding office, chairing committees, organizing meetings), responsibilities for review of research proposals (e.g., ad hoc external reviews, grants panels, site visits, advisory committees) and/or review of research publications (e.g., article reviews, editorial boards). Administrative service to the Department of Radiation Oncology includes membership and/or chairing of committees, running residency training programs, and/or leadership positions (e.g., Department Chair or Vice Chair). Administrative service to the School of Medicine or University includes serving as Associate/Assistant Deans, Division Leaders, Directors, or Program Directors. Administrative service to the public in a Faculty member's professional capacity include communication of expertise to government, lay audience education and voluntary professional services.

Examples:

Superior Administrative Service Performance: Contributions can be related to research or education and include contributions to the discipline such as

- a. serving as Chair of grants panel or site visit,
- b. serving as editor of a high-impact journal,
- c. organizing a major national or international conference, or
- d. serving as president of a professional organization;
- e. recognition by receipt of a service award from a professional society would be considered meritorious.

Superior effective leadership in coordination of teaching programs, chairing major committees, developing significant new educational or clinical initiatives and leadership of multidisciplinary tumor board groups is expected.

Satisfactory Administrative Service Performance:

- a. being a member of an ad hoc review of research proposals and articles
- b. serving on a grants panel, editorial board or conference organizing committee
- c. holding office or committee membership in a professional organization
- d. serving on teaching, administrative and/or quality-assurance committees
- e. participating in policy development
- f. organizing for the department

For a Faculty member whose job description is greater than 30% research, some administrative service to the discipline (e.g., journal or grant reviews, service on grant panels, a research ethics board and/or office in professional societies) is expected.

Unsatisfactory Administrative Service Performance:

- a. consistently failing to participate in discipline-related activities
- b. making minimal contributions to the organizational efforts of the Department; and/or
- c. having frequent absences from the departmental meetings

Unacceptable Administrative Service Performance:

- a. refuse to participate in at least one Department/Faculty/University committee
- b. refuse to peer review journal articles or grant applications
- c. refuse to contribute to quality assurance efforts
- d. being asked to withdraw from a review or other committee for ethical reasons (e.g., breach of confidentiality)
- e. providing inadequate supervision of a program resulting in loss of funding or accreditation, or
- f. providing inaccurate information to the public

III.3 Professionalism

It is the policy that all faculty members of the Department of Radiation Oncology should behave in a professional manner at all times. They will conduct themselves appropriately in interactions with patients, colleagues, trainees, staff, and students. Faculty should promote communication and teamwork in their interactions. Professionalism refers to demonstrating integrity, respect, dignity, courtesy, and a commitment to excellence. An individual's professional behavior will be an important factor in evaluation for appointment and promotion for all faculty appointment tracks. Interaction with

other professionals includes, but is not limited to, front desk personnel, intake staff, medical assistants, nurses, therapists, dosimetrists, physician assistants, nurse practitioners, administrative staff, residents, and physicians.

Excellence represents a dedication to the continuous improvement of the quality of care, research inquiry, and teaching effectiveness. Pursuit of excellence should be accompanied by integrity, empathy, compassion, and respect for the diversity of values and opinions of others.

Accountability refers to taking responsibility for ones' behavior and activity.

Altruism reflects a commitment to advocate for the interest of others over ones' own interests.

Unprofessional behavior means behavior that violates laws or rules regarding discrimination and harassment; violates rules of professional ethics, including professionalism in clinical, educational, research or business practices; or is disrespectful, retaliatory or disruptive.

Discrimination and harassment means discrimination or harassment on the basis of race, color, creed, religion, national origin, citizenship, sex, age, marital status, sexual orientation, disability, or military status.

Professional ethics means ethical standards that have been established by external professional societies or associations, e.g., Joint Commission, American Association of Medical Colleges, National Institutes of Health, or by UW Medicine entities for various professions (e.g., physicians, physicists, nurses).

Professionalism in clinical practice settings includes, but is not limited to safeguarding the care needs and privacy concerns of patients and adherence to established standards on patient safety, timeliness of completing medical records, quality improvement initiatives, communication and follow-up with patients, reporting errors, and regulations governing billing practices.

Professionalism in the conduct of research includes, but is not limited to a commitment to intellectual integrity, welfare of human subjects and research animals, diligent and unbiased acquisition, evaluation, and reporting of scientific information, adherence to university research regulations, and collegial and fair treatment of trainees and research staff at all levels.

Professionalism in education includes, but is not limited to a commitment to the highest standards of scholarship, innovation in teaching methods, respect for the student-teacher relationship and learning environment, and leadership through modeling of life-long learning.

Ethical business practices means the wise use of resources and practices that are compliant with and appropriate under laws and regulations governing conflicts of interest, sponsored research, or the delivery of and reimbursement for healthcare services.

Disrespectful, retaliatory, or disruptive behavior includes, but is not limited to behaviors that in the view of reasonable people impact the integrity of the healthcare team, the care of patients, the education of trainees, or the conduct of research such as:

- Shouting or using profane or otherwise offensive language
- Degrading or demeaning comments
- Physical assault or other uninvited or inappropriate physical contact;

- Threats or similar intimidating behavior, as reasonably perceived by the recipient; unreasonable refusal to cooperate with others in carrying out assigned responsibilities; and
- Obstruction of established operational goals, beyond what would be considered respectful dissent.

III.4 Clinical Practice

The evaluation of clinical practice performance will be influenced by Faculty member's rank and the percentage in the Faculty member's job description. Evaluation of clinical competence will focus on two main areas: 1) fund of knowledge, technical expertise, problem-solving skills, management of complex patients, overall clinical skills, and mastery in implementation of evidence-based treatments; and 2) humanistic qualities, responsibility, compassion, integrity, professional behavior and attitudes, interpersonal skills, and effectiveness in working in multidisciplinary settings. The Faculty member must abide by the professional standards of his/her discipline. To demonstrate superior clinical practice, the candidate must show that his or her practice is recognized as exemplary by peers and has been emulated or otherwise had an impact on practice. Being a competent health care practitioner, while valuable to the public and profession, and for educational role-modeling, is not sufficient to meet the criterion of superior clinical practice performance.

Examples:

Superior Clinical Practice Performance:

- Achieved substantive recognition at the regional, national and/or international level as a leader in his/her clinical area of expertise.
- Exceptional recognition by peers or patient groups for exemplary patient care and/or clinical services
- Exhibit a fund of knowledge, problem-solving skills, and the ability to successfully manage complex patients
- Introduction or development of a new treatment approach or treatment paradigm, diagnostic or therapeutic strategy, procedure, or device
- Evidence of initiative and leadership in clinical care such as leadership of multidisciplinary tumor board groups/teams, development of clinical programs, trials or research initiatives, participation in multi-institutional collaborations, coordination of efforts to improve quality of care through quality assurance (QA) measures, medical error reduction, or improved cost effectiveness
- Serving as an advisor or resource or holding a leadership position in academic, national or government agencies/organizations (such as NIH/NCI, NCCN, RTOG, AMA, etc.)
- Successful mentorship of junior faculty and trainees
- The Faculty member is considered by their peers to be a role model of professional integrity and exhibit collegiality and cooperativeness

Satisfactory Clinical Practice Performance:

Providing the standard of care expected within their medical profession. This includes effective patient care and management of patient problems and clinical responsibilities on a day-to-day basis. It is the expectation that each Faculty member would be recognized as an expert in his/her area of expertise within the department and institution. Regular attendance and active participation in departmental

meetings including faculty meetings, chart rounds, and grand rounds is expected. Faculty members are expected to work and interact in a collegial manner with staff within the department, through the institution and with others in the medical community. Participation and representation in multidisciplinary tumor board group conferences and clinics. The Faculty member does not have any formal complaints about them to the Department, Hospital or regulatory/licensing body and has demonstrated active participation in a regular maintenance of competence program and continuing professional development.

Unsatisfactory Clinical Practice Performance:

Demonstrated difficulties in performance of their clinical duties such as:

- a. Significant gaps in one's fund of knowledge, technical expertise , overall clinical skills, or problem-solving skills
- b. Delays or failures to complete medical records or other documents
- c. Substantiated complaints filed about their interactions or communications with patients, families and/or colleagues
- d. Failure to behave in a collegial manner and/or instances of significant conflicts with trainees, staff, or peers
- e. Limited attention to maintenance of competence activities and continuing professional development

Unacceptable Clinical Practice Performance:

Egregious errors or behaviors; this would include:

- a. Failure to exhibit a fund of knowledge, technical expertise, overall clinical skills, or problem-solving skills
- b. Any form of substantiated unethical or unprofessional behavior
- c. No evidence of activity dedicated to maintenance of competence and continuing professional development
- d. Persistent failure to complete medical records or other documents
- e. Persistent failure to interact with and communicate effectively with patients, families and/or colleagues, including clinical and administrative staff with numerous complaints and/or
- f. Persistent failure to behave in a collegial manner or numerous significant conflicts with trainees, staff, or peers

Persistent, unjustified and significant deviation from generally-accepted practice guidelines or behavior, particularly after efforts of a remedial nature have been suggested or provided, would indicate that this categorization is appropriate.

III.5 Research/Scholarship Performance

Successful research leads to the advancement of knowledge through contributions of an original nature. Promotion to Associate or Full Professor based on research requires that the candidate has a record of sustained and current productivity in research and research-related activities. For the criterion of superior achievement in research to be met , the research should result in significant changes in the understanding of basic mechanisms of molecular or cellular function and disease, accuracy of predictive models, clinical care, health services delivery or health policy, or the social sciences and humanities as

applied to health. The researcher's work should present creative insights, ideas or concepts, and must have yielded a significant quantity of information leading to new understanding. The new information may derive from the invention and/or application of new techniques, novel experimental approaches and/or the identification and formulation of new questions or concepts. It is expected that research advances will be communicated through the publication of papers, reviews, books and other scholarly works.

Sources of funding may vary depending on the area of research. Not all research requires external funding. However, as a general rule, the individual seeking promotion on the basis of achievement in research should have a strong and continuing record of external funding commensurate with the type and area of research. Although usually recognition will be given to funding in the form of peer-reviewed grants, other sources may be appropriate. For example, funding from industry may be a major source available to basic and clinical scientists performing clinical trials, studying new drugs and developing new technologies. This funding is expected to comply with the conflict of interest guidelines in the School of Medicine.

The evaluation of Research/Scholarship performance will be conducted in accordance with the standards outlined below and will be influenced by Faculty member's rank and the percentage weighting of Research/Scholarship in the Faculty member's job description.

Examples:

Superior Research/Scholarship Performance: Publications of the research, obtaining research funding, presentations at professional meetings and supervising research efforts.

- a. having a substantial record of research productivity with either a landmark paper in a prestigious international journal or multiple papers in high-impact journals that make a significant impact on the field
- b. having a consistent successful record of funding in the form of multiple peer-reviewed national or international grants with substantial funding
- c. having a significant leadership role in obtaining major peer-reviewed or industrial funding
- d. obtaining recognition in the form of a major national or international award or invitation to present a keynote address at a major meeting with national or international participation, and
- e. taking on exceptional administrative service, such as serving as Chair or Deputy Chair of a grant review panel or editor of a high-impact journal.

Satisfactory Research/Scholarship Performance:

- a. having continued publication productivity in respected journals in the field
- b. having success at obtaining adequate funding to support the Faculty member's work
- c. having an established or emerging national/international reputation with invited presentations in accordance with rank,
- d. being invited to serve on national committees, grant review panels, or as a journal reviewer

Unsatisfactory Research/Scholarship Performance:

- a. a record of low publication output, in accordance with job description, over a number of years;

- b. having a lack of or inadequate research funding; and
- c. having few or no research trainees over a number of years

Unacceptable Research/Scholarship Performance:

- a. having no publication over a number of years
- b. having no (or minimal) research funding with no attempts to obtain additional funding
- c. failing to provide a supportive environment and adequate supervision for trainees, or
- d. display substantiated deceptive or unethical practices or academic misconduct

IV. Guidelines for Appointment and Promotion in Specific Tracks/Pathways and Ranks

Overview

The Department of Radiation Oncology has a multidisciplinary faculty covering a wide range of professions and expertise, including several clinical sciences, physical sciences, biological sciences, chemistry, and radiation sciences. There are several faculty tracks and pathways available in the Department of Radiation Oncology including:

- a. Regular Track
 - i. Clinician Educator Pathway
 - ii. Clinician Scientist Pathway
- b. Research Track
- c. Salaried Clinical Faculty (Annual Appointments)

The criterion for appointment and promotion of faculty within each of these tracks/pathways is described below. When a specific Department Policy is not documented the University Policy is the sole criteria.

A. Regular Track –

These are the general guidelines for the ranks within the Regular track. Appointment to and promotion within the Regular Track requires an MD, DO, and/or PhD degree. Following this section, more specific guidelines will be listed for the two pathways within this track. The candidate must meet the requirements in both this overview section and the section specific to their pathway for appointment and promotion. Evidence of published scholarly activity is an essential component for all pathways within the Regular track.

1. Assistant Professor

University Policy: At the time of appointment, an Assistant Professor is expected to have demonstrated ability in research and teaching

Department Policy: Appointment to the rank of Assistant Professor requires completion of a doctoral degree (i.e., MD, DO, PhD, MD/PhD, or an equivalent degree). Those involved in patient care are expected to have successfully completed residency training and to be certified by or eligible for certification prior to appointment. Any physician faculty member with a clinical practice or involved in clinical care must become appropriately board certified within 3

years of his/her initial appointment unless this requirement is waived by the Department Chair due to specific and unusual circumstances.

2. Associate Professor

University Policy: At the time of appointment, an Associate Professor must show evidence of substantial record of success in research and teaching.

Department Policy: To be appointed or promoted to the rank of Associate Professor the candidate must meet the requirements of Assistant Professor. Appointment or promotion to the rank of Associate Professor requires regional/national recognition and a record of substantial success in effective teaching and research, except that in individual cases a superior record in one of these activities may be considered sufficient achievement with satisfactory performance in the other area. Teaching and research must demonstrate creativity and scholarship as defined under the general criteria presented on page one.

In addition, the provision of clinical care and administrative leadership are important missions of the School of Medicine and therefore excellence in these areas will be given consideration. Regardless of an individual's balance between teaching, research and service, evidence of scholarly contributions might include research published in refereed journals; texts, chapter and review articles; prepared written or audiovisual materials; or other types of educational or program development. Success in clinical teaching and patient care will be measured by resident, student, staff, and peer evaluation to document good to excellent performance. Quantity and quality of achievements in all of these areas will be considered, but excellence in clinical care, clinical teaching or administrative function alone will not suffice.

Regional/national recognition may be documented by peer evaluation, by such things as participation on editorial boards, study sections, invitations to speak at meetings, symposia and other institutions, or by special honors, awards, or other recognitions. National recognition for other than scholarly contributions will not in itself substitute for this requirement.

3. Professor

University Policy: Appointment to the rank of Professor requires outstanding mature scholarship as evidenced by accomplishments in teaching and in research, as evaluated in terms of national recognition.

Department Policy: The successful candidate for promotion will be expected to have established an international reputation in his or her field of interest, to be deeply engaged in scholarly work, and to have shown him or herself to be an effective teacher. These are the main criteria. However, either superior teaching or superior scholarship, sustained over many years, and satisfactory performance in the other area could also in itself justify eventual promotion to the rank of Professor. Administrative or other service to the University and related activities will be taken into account in assessing candidates for promotion, but given less weight than the main criteria; promotion will not be based primarily on such service. Promotion to Professor is not automatic, but it is expected that the majority of full-time tenured or without tenure due to funding faculty will eventually attain this rank.

Building upon the requirements for Associate Professor, appointment or promotion to the rank of Professor requires outstanding, mature scholarship as evidenced by national and international recognition. National and international recognition may be documented by peer evaluation, by such things as participation on editorial boards, study sections, invitations to speak at meetings, symposia and other institutions, or by special honors, awards, or other recognitions. National or international recognition for other than scholarly contributions will not in itself substitute for this requirement.

A Professor is expected to maintain high quality and substantial contributions to teaching, research, and service upon which promotion to this rank are based in the department.

Listed below are more specific departmental criteria for the specific ranks within the Regular faculty Track.

A.1 Clinician Educator Pathway

Overview

The Clinician Educator Pathway has been developed to provide clinicians, including, but not limited to Physicians and Medical Physicists committed to clinical service and teaching an opportunity to successfully pursue full-time academic careers as members of the faculty of the University of Washington School of Medicine. Evidence of scholarship is required for promotion contributing to medical education through peer review articles, development of teaching materials such as evidenced-based clinical guidelines, teaching program curricula and methodology to evaluate success of educational programs and the progress of trainees if appropriate. Evidence of scholarship may also include contributions to research.

Individuals in the pathway should devote the majority of his/her time to clinical practice and clinical teaching at one of the University's major affiliated clinical sites. Individuals on this pathway will have an MD, DO, PhD or equivalent.

Promotion within the Clinical Educator Pathway requires superior clinical performance. This should be demonstrated by fund of knowledge, problem solving skills, management of complex patients, and overall clinical skills. Humanistic qualities such as integrity, compassion, professional behavior and attitudes, interpersonal skills, and effectiveness in working in multidisciplinary settings are also required.

1. Assistant Professor

An individual who is a physician and practicing radiation oncologist appointed to this rank must be Board-eligible or Board-certified in Radiation Oncology or appropriate field, have advanced clinical credentials and hold at least an advanced degree. If Board-eligible, the practicing radiation oncologist must become Board-certified within 3 years of their initial appointment. If foreign trained, equivalent international qualifications will be accepted. This requirement can be waived by the Department Chair due to specific and unusual circumstances. The individual must have a valid appropriate State license to practice medicine, if appropriate for field, be able to practice in an independent manner, if appropriate, and participate in the teaching, research, and administrative functions of the Department.

A non-physician appointed to this rank must have a PhD or equivalent from a recognized graduate program. If required for their profession, they must possess a valid appropriate State license. The individual must be able to and actively participate in the teaching, research, and administrative functions of the Department.

The mandatory promotion clock begins with the appointment to Assistant Professor.

2. Associate Professor

To be appointed or promoted to the rank of Associate Professor the candidate must meet the requirements of Assistant Professor. Appointment or promotion to the rank of Associate Professor requires a record of substantial demonstrated success and exemplary commitment to teaching and creative professional activity over a period of time as an Assistant Professor. In addition, the individual must have demonstrated excellent clinical care and administrative leadership. Regardless of the individual's balance between teaching, research, and service, evidence of sufficient scholarly contributions is important.

Such contributions may include refereed journal articles, texts, chapters, and review articles, audiovisual materials, and/or other educational program development. Contributions may also include mentorship programs for undergraduate students, medical students, residents, or peers within and outside the UW community. Quality of teaching will be measured by student, resident, and peer evaluation. It is expected that the individual will have demonstrated high productivity as a clinician with regional/national recognition as a clinician, administrator, or medical educator.

3. Professor

To be appointed or promoted to the rank of Professor the candidate must meet the requirements of Associate Professor. They must also have high ranking as a teacher and clinician, evidence of mature scholarship, and national/international recognition as a clinician, teacher, or medical educator.

The successful candidate for promotion will be expected to have established a wide reputation in his or her field of interest, to be deeply engaged in scholarly work, and show him or herself to be an effective teacher. There must be evidence that the activity has changed policy-making, organizational decision-making, or clinical practice beyond the candidate's own institution or practice setting, including when the target audience is the general public.

A.2 Clinician Scientist Pathway

Overview

Individuals on the Clinician Scientist Pathway are expected to be involved in research that generates "new knowledge". They will also participate in the clinical, educational, and administrative missions of the Department. Scholarship is evaluated by quality and quantity of published work, range and variety

of intellectual interest, grant and fellowship awards, and success in training graduate and professional students. The regional/national/international scientific reputation of the faculty member will be considered in promotion decisions. It is expected that during his/her career the faculty member will obtain independent grant funding although it is not necessary that currently funded grants be in place at the time of promotion. In general, individuals on this pathway will be Board-certified in Radiation Oncology or Medical Physics unless the individual's contributions in non-clinical areas are such that this may be waived.

1. Assistant Professor

Individuals must have an MD, DO, PhD or equivalent. At the time of appointment the Assistant Professor is expected to have demonstrated activity in research and teaching. If clinically active and a physician, the individual is expected to have successfully completed resident training in Radiation Oncology and be Board-certified or Board-eligible prior to appointment. If Board-eligible, the practicing radiation oncologist is expected to become Board-certified within 3 years of the initial appointment. If foreign trained, equivalent international qualifications will be accepted. This requirement can be waived by the Department Chair due to specific and unusual circumstances. The physician must have a valid unrestricted State license to practice medicine.

A non-physician appointed to this rank must have a Ph.D. or equivalent from a recognized graduate program. If required for their profession, they must possess a valid appropriate State license. The individual must be able to and actively participate in the teaching, research, and administrative functions of the Department.

The mandatory promotion clock begins with the appointment or promotion to Assistant Professor.

2. Associate Professor

To be appointed or promoted to the rank of Associate Professor the candidate must meet the requirements of Assistant Professor. Appointment or promotion to the rank of Associate Professor requires a record of demonstrated substantial success in research, teaching, excellent clinical care, and administrative leadership. Regardless of an individual's balance between teaching, research, and service, evidence of published scholarly contributions is essential.

Such contributions may include refereed journal articles, text, chapters and review articles, audiovisual materials and/or other types of educational program development. Quality of teaching will be measured by resident, student, and peer evaluation. In rare circumstances, an individual with an outstanding record in one or two of these areas with satisfactory accomplishments in the other areas would be considered for promotion. It is expected that the individual will have a demonstrated record of grant funding although, it is not necessary that the individual have active grant funding at the time of promotion or appointment.

3. Professor

The candidate must meet the requirements of Associate Professor. Additionally, individuals promoted to the rank of Professor must have demonstrated outstanding mature scholarship as evaluated by national and international reputation in research and/or teaching. This may be documented by peer evaluation, participation on editorial boards of appropriate journals, invitations to speak at national/international meetings, symposiums, and visiting professorships at other institutions. The individual should also have contributed to the educational mission of the Department and be a respected mentor as evidenced by his/her teaching evaluation.

B. Research Track

Overview

Research faculty will be permitted and generally expected to conduct independent research programs. Research professional track appointments will be distinguished from regular track appointments by the absence of expected teaching or clinical responsibility although research faculty will be permitted to contribute to teaching activities to the extent that time and interest permit. Appointment to one of the ranks within the Research track requires qualifications corresponding to those prescribed for that rank, with primary emphasis upon research.

Research professor and research associate professor appointments are term appointments for a period not to exceed five academic years. The question of their renewal shall be considered by the voting faculty who are superior in academic rank to the person being considered and are faculty of the department in which the appointments are held. An exception is that the voting faculty at rank of professor shall consider whether to recommend renewal or non-renewal of the appointment of a research professor.

Research assistant professor appointments are for a term not to exceed three years with renewals and extensions to a maximum of eight years.

1. Research Assistant Professor

Appointment to the rank of Research Assistant Professor requires a doctoral degree (MD, PhD, MD/PhD or equivalent) and the individual is expected to have demonstrated activity in research, such as a postdoctoral research experience with publications in relevant journals.

2. Research Associate Professor

The candidate must meet the requirements of Research Assistant Professor. Additionally, appointment or promotion to the rank of Research Associate Professor requires a record of demonstrated significant success in research as measured by the development of new knowledge and its publication in refereed journals. Other scholarly contributions such as texts, chapters, and reviews and any teaching, administrative or other service functions may contribute to qualification but will not replace publications in referred journals as the primary criterion.

3. Research Professor

The candidate must meet the requirements of Research Associate Professor. Additionally, appointment or promotion to the rank of Research Professor requires an outstanding and currently active mature scholarship sufficient to command a (national and international reputation in research and related scholarly contributions. National and international recognition may be documented by peer evaluation, such as participation on editorial boards, study sections, invitations to speak at meetings, symposia and other institutions, or by special honors, awards or other recognitions. National and international recognition for other than scholarly contributions will not substitute for research as the primary criterion.

C. Clinical Faculty Track (Annual Appointment) –Salaried and Non-salaried Appointments

Overview

A clinical appointment in the appropriate rank is usually made to a person who holds a primary appointment with an outside agency or non-academic unit of the University, or is in private practice. However, it may also be given to individuals providing full or part-time clinical service at one of the academic units. Clinical faculty members make substantial contributions to University programs through their expertise, interest and motivation to work with the faculty in preparing and assisting with the instruction of students in practicum settings. Clinical appointments are annual; the question of their renewal shall be considered each year by the faculty of the department in which they are held. Clinical faculty members are not eligible to vote on faculty appointments or promotions.

The salaried full-time clinical faculty appointment has been developed to provide physicians devoted primarily to patient care who practice in affiliate institutions a vehicle for a career as a full-time faculty member of the University of Washington, School of Medicine. For the purposes of this document, an “affiliate institution” is one that has a relationship with the School of Medicine via a professional services agreement with the Department of Radiation Oncology through the University of Washington physicians practice plan.

This recognizes the need for the University to provide decentralized specialty medical services at locations that are often some distance from the main campus where opportunities in research and teaching may be more limited than at UWMC or the SCCA or one of the major affiliated research and/or teaching sites such as HMC, VAPSHCS, NWH, or VMC. These appointments are supported through practice income flowing through UWP. This appointment also may be offered at one or more of the major teaching sites, for example, UWMC or SCCA.

Individuals in the salaried full-time clinical faculty pathway will carry the titles of Clinical Instructor, Clinical Assistant Professor, Clinical Associate Professor, or Clinical Professor. To be eligible for these appointments individuals must be eligible for full-time appointment at the hospital or medical center where UWP has a site-of-practice agreement for Radiation Oncology Services. The individual shall have demonstrated a level of clinical competence appropriate for the appointment rank. Participation in appropriate clinical research protocols is expected and encouraged. If assigned to a site with resident teaching, participation in the University’s resident training program will be identified in the individual’s job description.

The individual shall be expected to generate sufficient salary via clinical activities to support the level of appointment.

Promotion Criteria

Criteria for evaluation of clinical faculty focuses on clinical activity. Teaching and research activities are clearly secondary and if expected, will be identified in the individual's job description. The individual must demonstrate excellence in patient care, be able to work well with referring physicians and support staff, and adhere to the general treatment policies of the Department of Radiation Oncology.

1. Clinical Instructor

An individual appointed to this rank must at a minimum be Board eligible, have a valid and appropriate State license to practice medicine and able to practice radiation oncology with only limited supervision. A faculty member will normally serve 2 years at this rank before being eligible for promotion.

2. Clinical Assistant Professor

An individual appointed to this rank must be Board eligible or Board certified in Radiation Oncology. If Board eligible, must become Board certified within 3 years of the initial appointment. If foreign trained, equivalent international qualifications will be accepted. The individual must have a valid and unrestricted State license to practice medicine and be able to practice radiation oncology independently. Appointment to the rank of Clinical Assistant Professor requires a doctoral degree (MD, DO, or equivalent degree) and the potential to actively participate in developing the cancer program at their assigned center.

An individual will normally serve six (6) years at this rank before being eligible for promotion. Promotion requires superior clinical performance. This should be demonstrated by fund of knowledge, problem solving skills, management of complex patients, and overall clinical skills. Humanistic qualities such as integrity, compassion, professional behavior and attitudes, interpersonal skills, and effectiveness in working in multidisciplinary settings are also required. Outstanding individuals may be considered for earlier promotion.

3. Clinical Associate Professor

The individual must meet the requirements of Clinical Assistant Professor. Additionally, appointment or promotion to the rank of Clinical Associate Professor requires a successful leadership role in developing and guiding the cancer program at their affiliate center. This may be demonstrated through service on cancer-related committees, new program development, and administrative duties. Being recognized for community service in relation to the affiliate center's cancer program will be viewed positively. Participation in the Department's clinical research program, specifically enrolling patients in clinical trials will also be viewed positively. The individual is expected to occasionally lecture on Radiation Oncology topics to residents in training.

An individual will normally serve six (6) years at this rank before being eligible for promotion. Success in patient care will be measured by resident, student, staff, and peer evaluation to document good to excellent performance. Outstanding individuals may be considered for earlier promotion.

4. Clinical Professor

The individual must meet the requirements of Clinical Associate Professor. Additionally, appointment or promotion to the rank of Clinical Professor requires demonstrated success and productive mentoring (serve as mentor) of junior Radiation Oncology faculty at the center to which the individual seeking promotion is assigned. The individual must be recognized by peers for skill and knowledge of Radiation Oncology and its role in the treatment of the cancer patient. The individual must have a senior-level role in developing and guiding the cancer program at their assigned center/site of practice. This may be demonstrated through having served as Chair on cancer-related committees, new program development, and senior administrative duties. The individual is expected to be recognized for outstanding community service in relation to the assigned center's cancer program.

D. Other Faculty titles

D. 1. Teaching Associate

Teaching Associate is the appointment title of non-physicians such as nurse practitioners, physician assistants, social workers, and others practicing in UW Medicine clinical settings. Appointment with the title of teaching associate is made to a non-student with credentials more limited than those required of an instructor. Teaching associate appointments are annual, or shorter; the question of their renewal shall be considered each year by the faculty of the department in which they are held.

D.2. Lecturer

Lecturer is an instructional title that may be conferred on persons who have special instructional roles and who have extensive training, competence, and experience in their discipline. Full-Time Lecturers appointed through a competitive recruitment may be either on an annual or a multiple-year contract (up to 5 years) and may be considered for promotion in the last academic year of the appointment term. Full-time lecturer appointments are considered annual if a competitive search is not conducted. Full-time lecturer appointments not made through a competitive search are not eligible for promotion. Lecturers may be reappointed indefinitely.

D.3. Adjunct:

Adjunct appointments are made to faculty already holding a regular or research appointment in another department. This title recognizes the contributions of a faculty member to a secondary department.

D.4. Affiliate:

Affiliate appointments recognize the professional contribution of an individual whose principal employment responsibilities lie outside the colleges or schools of the University. Appointment or promotion requires qualifications comparable to those required for appointment to the corresponding faculty rank in the Department of Radiation Oncology.

D.5. Emeritus

The emeritus appointment is recommended by departmental action for a faculty member whose scholarly, teaching, or service record has been meritorious. The normal criteria for appointment with the emeritus title are at least ten years of prior service as a member of the faculty and achievement of the rank of professor or associate professor. Non-paid faculty can be considered for emeritus status. If being paid as an emeritus faculty member, the individual is eligible to vote on appointments and promotions.

V. Measurement of Performance and Time Allocation

Promotions will be based on a faculty member's overall performance and quantity of achievements in the areas of **teaching, administrative service, clinical practice, research** and **professionalism**. To attain promotion a faculty member must have an overall superior performance and a number of documented achievements in their areas of activity. Faculty members have the responsibility to keep records of his/her achievements, and to make sure necessary supportive documents are obtained for the promotion packet. Measurement of performance can be somewhat subjective, so it is important that appropriate documents be obtained whenever possible. One document that provides a measure of performance is the review of the faculty performance given by the department chair (e.g. annually for Assistant Professor level). To simplify the chair's review, measurement of performance will be based on a simple formula, where each area of performance will be rated as **superior** (3 points), **satisfactory** (2 points), **unsatisfactory** (1 point), or **unacceptable** (0 points), using the definitions for these levels of performance provided in sections II & III. Measurement of performance will also be rated based on the level of professionalism, as defined in section III.2, which will be graded as **appropriate** (A) or **unacceptable** (U). It is an expectation that faculty members will operate at a high level of professionalism at all time, so the level of *professionalism will always be appropriate*. An unacceptable professionalism rating will have disciplinary consequences. A level of unacceptable professionalism negates any superior or satisfactory performance ratings given in a review.

The different levels of appointment on the Regular, Research and Clinical Faculty tracks have performance expectations commensurate with that rank (e.g. Lecturer, Assistant Professor, Associate Professor or Professor), as outlined in section III. For promotion consideration, the expectation is that faculty appointees at the Assistant Professor level might have ratings of satisfactory performance in the first few years, while learning and developing their skills in the new position. However, ratings should become superior in focus areas during subsequent years. For the Associate Professor level, superior performance must be demonstrated in his/her focus area over a several year period. It is an expectation that once the level of Professor is obtained, the faculty member will continue operate at the superior performance level.

On initial appointment, faculty members will negotiate with the department chair the percentage effort to be spent in teaching, administrative service, clinical practice, and research, such that the interests of the faculty member and the needs of the department are met. The percentage effort in the different areas can change, and will be reassessed at each faculty performance review with the department chair. As stated previously, there is a requirement that a minimum of 5% effort be conducted in both administrative service and teaching. The only exception for this is that the Research Professor track does not have a requirement for teaching. The expectation is that it will be more difficult to attain a high number of achievements in those areas that have a low percentage of effort, but the performance might still be superior. Thus, the level of performance will be gauged on expectations of achievement based on the percent effort in a particular area. Further, the overall measure of performance will be weighted by the percent effort (as a multiplying factor). Examples of how performance will be measured are given below for each of the professional pathways. An overall superior performance would be in the 2.5 - 3.0 range; an overall satisfactory performance in the 1.8 – 2.5 range; an overall unsatisfactory performance in the 1.0 – 1.8 range; and an overall unacceptable performance in the 0 – 1.0 range..

Examples of how performance will be measured are given below for each of the professional pathways.

A. Clinician Educator Pathway (see IV A.1)

In the Clinician Educator pathway the faculty member devotes most of his/her time to clinical practice and clinical teaching. The two grade sheets below show that one must obtain a superior rating in the area of major focus to obtain an overall superior performance rating.

Faculty Member		date			Faculty Member		date	
Performance Area	% Effort	Score	Adjusted Score		Performance Area	% Effort	Score	Adjusted Score
Teaching	30%	2	0.6		Teaching	25%	3	0.75
Administrative Service	5%	3	0.15		Administrative Service	10%	3	0.3
Clinical Practice	65%	3	1.95		Clinical Practice	65%	2	1.3
Research	0%				Research	0%		
Professionalism	100%	A			Professionalism	100%	A	
Overall score			2.7		Overall score			2.35

B. Clinician Scientist Pathway (see IV A.2)

In the Clinician Scientist pathway the faculty member devotes most of his/her time to clinical practice and research. The two grade sheets below show that one must obtain a superior rating in the area of major focus and at least one other area to obtain an overall superior performance rating.

Faculty Member				date	Faculty Member				date
Performance Area	% Effort	Score	Adjusted Score		Performance Area	% Effort	Score	Adjusted Score	
Teaching	10%	2	0.2		Teaching	10%	2	0.2	
Administrative Service	5%	2	0.1		Administrative Service	10%	2	0.2	
Clinical Practice	60%	3	1.8		Clinical Practice	40%	3	1.2	
Research	25%	3	0.75		Research	40%	2	0.8	
Professionalism	100%	A			Professionalism	100%	A		
Overall score			2.9		Overall score			2.4	

C. Research Track (see IV B)

In the Research track the faculty member devotes the majority of his/her time to research. The two grade sheets below show that one must obtain a superior rating in the research effort to obtain an overall superior performance rating.

Faculty Member				date	Faculty Member				date
Performance Area	% Effort	Score	Adjusted Score		Performance Area	% Effort	Score	Adjusted Score	
Teaching	0%				Teaching	0%			
Administrative Service	5%	2	0.1		Administrative Service	5%	3	0.15	
Clinical Practice	0%				Clinical Practice	0%			
Research	95%	3	2.85		Research	95%	2	1.9	
Professionalism	100%	A			Professionalism	100%	A		
Overall score			2.95		Overall score			2.05	

D. Clinical Faculty (see IV C)

In the Clinical track the faculty member devotes the majority of his/her time to clinical practice. The two grade sheets below show that one must obtain a superior rating in the clinical Practice effort to obtain an overall superior performance rating.

Faculty Member				date	Faculty Member				date
Performance Area	% Effort	Score	Adjusted Score		Performance Area	% Effort	Score	Adjusted Score	
Teaching	0%				Teaching	5%	2	0.1	
Administrative Service	5%	2	0.1		Administrative Service	10%	2	0.2	
Clinical Practice	95%	3	2.85		Clinical Practice	85%	3	2.55	
Research	0%				Research	0%			
Professionalism	100%	Y			Professionalism	100%	A		
Overall score			2.95		Overall score			2.85	

VI. Faculty Advisor Program

Overview

It is the goal of the Department of Radiation Oncology that junior faculty will be given every opportunity to qualify for and obtain promotions in rank. Preparation for and progress towards promotion is the responsibility of each individual faculty member. To assist faculty below the rank of Associate Professor, Research Associate Professor and Clinical Associate Professor, a Faculty Advisory Committee will be established. The Faculty Advisory Committee will be made available to individual faculty to provide annual, timely, constructive feedback to the junior faculty on his/her progress towards meeting departmental expectations for promotion. It is expected that the Faculty Advisory Committee will be a resource to junior faculty as they work towards their own promotions. The different aspects of the Faculty Advisor Program are outlined below.

Role

The role of the Committee is to serve as a resource to help the junior faculty meet and exceed the expectations of the department for promotion to the next rank. To assist in this process, the Faculty Advisory Committee will help the junior faculty members identify/contact one or two other investigators, not necessarily from within the department, who can act as mentors. In the role of mentor the other investigators can help to determine what might be expected in the junior faculty’s discipline so that “reasonable” goals can be set and help judge the progress to those goals.

The Faculty Advisory Committee will be available to meet with the junior faculty member a minimum of twice a year (more often is recommended) to review the junior faculty member’s progress. The Committee functions as a peer review for promotion and provides advice and guidance to junior faculty. The Committee may also identify resources and methods for junior faculty to enhance their scholarly effort.

It is expected that the individual faculty member actively take advantage of the Faculty Advisory Committee's guidance, as the faculty member hold ultimate responsibility for his or her progress towards promotion.

Evaluation

The junior faculty will provide a self-evaluation report to the Faculty Advisory Committee prior to his/her departmental annual review. The report will include a summary of the past year's activities in the areas of research/scholarly activities, teaching and service as is appropriate (and agreed upon) in their original appointment. The report will be discussed by the junior faculty and Faculty Advisory Committee, and may be revised as warranted. The report will be sent to the Chair prior to his/her annual review meeting with the junior faculty.

Expectations for Promotion

The Faculty member should take steps to become familiar with the expectations for promotion to the next rank and continuously work towards exceeding those expectations as their careers advance. The Faculty member should consult with the Faculty Advisory Committee for help in defining some minimum expectations and setting goals to exceed those expectations. The Committee will help set goals for junior faculty both as a group and individually, providing a more tailored experience. The expectations and goals set should be discussed with, and agreed upon, by the Department Chair.

The various parameters evaluated in considering promotions in the Department of Radiation Oncology are provided with each of the professional pathways listed in this document. As a general rule, promotion of rank requires that a faculty member make significant contributions to his/her field and be recognized for those contributions by peers in the field. It is recognized that different disciplines often have different peer-reviewed publications. It is also recognized that some faculty positions have significantly higher service roles for the department, and those circumstances will be factored in when evaluating productivity.

It is the responsibility of faculty members to take steps to document their contributions in the area of research/scholarship, teaching and service. This is usually done by maintaining a current Curriculum Vitae and gathering copies of materials such as publications, abstracts, and reviews from students in courses taught/lectures given. Those reviews should be sent directly to the department administrative office and not received by the individual performing the lecture.