<u>Department of Emergency Medicine</u> Statements of Evidences of Faculty Activity for Promotion

(Revised 3/15/2021)

Basic Evidence for Use in Guiding the Evaluations of Faculty for Promotion and Tenure in the Department of Emergency Medicine:

<u>For Assistant Professor:</u> Board Eligible or Certified by the American Board of Emergency Medicine or American Osteopathic Board of Emergency Medicine

<u>For Associate Professor or higher:</u> Board Certified by the American Board of Emergency Medicine or the American Osteopathic Board of Emergency Medicine.

While promotion is not based on time in rank, submission for promotion earlier than 5-6 years in rank is unusual but may be considered with Departmental support by the faculty member, Chair and Department APT Committee.

Unique factors for each Title Series:

- 1. Most faculty in the Department of Emergency Medicine being considered for promotion will do so in the Clinical Title Series (non-tenure eligible). For faculty applying for promotion in the Special Title Series (tenure eligible), successful candidates will demonstrate significant accomplishments in teaching **and** either administrative service **or** research depending on the allocation of effort in the faculty member's DOE. For Research Title Series candidates (non-tenure eligible), research is the predominant factor upon which a candidate will be judged. Teaching efforts in the Research Title Series is not included in a candidate's distribution of effort.
- 2. Title Series are associated with each position in the Department of Emergency Medicine and cannot be changed; however, faculty are eligible to apply for a new position in a new Title Series at any time per the Department and College procedures. Any appointment to a new Title Series must also be approved through the usual College and University procedures. There is no "time clock" limitations on applying to new Title Series positions.
- 3. Below are lists of performance items by DOE categories. However, performance should be strongest in alignment with an individual's DOE and/or title series.
 - a. Regular title series: Faculty in the Regular title series are expected to have service in the following areas: teaching, advising and other instructional activities; research or other scholarly and creative activity; and service to the institution, the profession and the public. Regular title series is a tenure eligible appointment. Generally, these faculty will have extramural funding support. Expectations for excellence should align with areas of assignment on the DOE.
 - b. Special title series: Faculty in the Special title series are expected to have service mainly focused in instruction and service categories, and this assignment does not necessarily

- include research or creative work. Special title series is a tenure track appointment. Expectations for excellence should align with areas of assignment on the DOE
- c. Clinical title series: Faculty in the Clinical title series are expected to have service mainly focused on clinical practice, service to clients or patients, and experiential training of students of the profession. Clinical title series -non- tenure eligible appointment, and this appointment does not necessarily include research or creative work. Expectations for excellence should align with areas of assignment on the DOE.
- d. Research title series: Faculty in the Research title series are expected to have service focused only on participation in research. These faculty are not permitted to have any regularly scheduled teaching or service assignments as part of the distribution of effort. The majority of faculty in the Research title series will participate in team science research. Research title series is not a tenure eligible appointment. Expectations for excellence should align with areas of assignment on the DOE, with the notable exception that these faculty are not expected to have attained independence in research or creative work, but rather show evidence of continuous improvement and contributions in research or other creative activity as evidenced by published scholarship.

General Information:

To be considered for promotion, all faculty members must meet the terms outlined in their letters of appointment (or reappointment) consistent with the Departmental Statement of Evidences. As part of an academic medical center, it is expected that each faculty member will demonstrate excellence in areas to which they have assigned effort. It is expected that all faculty will work toward the advancement of their Professional Development

In general, reputation by rank is as follows:

- i. Assistant Professor- Local achievements and renown
- ii. Associate Professor- Regional achievements and renown
- iii. Full Professor- National/International achievements and renown

The following table is used to define local, regional, or national reputation. Regional definition is subdivided into rankings (progressive rankings indicate progressive expansion of regional reputation)

	Clinical Title Series	Regular, Research or Special Title
		Series
Local	Within department	Within College of Medicine
Regional	1. Outside of Department	Beyond COM/UK Healthcare
	2. Outside of College of Medicine	system
National	Outside of Kentucky	Outside of Kentucky

Examples of Evidences of Activity that can be considered in guiding the evaluation for appointment/promotion/tenure:

- Prior academic faculty position(s)/appointment(s) in this or other academic institutions
- Letters attesting to performance and/or accomplishments by experts in the particular area.

Below are lists of performance items stratified by DOE categories. However, performance should be strongest in alignment with an individual's DOE and/or title series.

The definition of instruction:

Instruction is defined as the act of teaching or providing education. The college recognizes that instruction may be provided through many means, including formal didactic instruction, bedside teaching while providing clinical care, laboratory or experiential instruction, creation of online enduring educational materials such as online manuscripts, podcasts, educational blogs etc. Additionally, instruction may be provided to anyone including enrolled students, graduate trainees, faculty peers, and learners outside of the University.

Instruction and Mentoring

- Outstanding Teaching performance as evidenced by such measures as outcomes of resident, student, and peer evaluations
- Successful administration of a University/College of Medicine curriculum course
- Creation of a new University/College of Medicine curriculum course
- Recognition by residents of particular value as a professional role model, as shown through evaluations and awards
- Creation of innovative instructional methods, such as with human patient simulators, or experiential learning models
- Organization/direction of resident research or creative activity that is validated by peers
- Selection for a departmental, College of Medicine, university, or professional society teaching award
- Direction or leadership role in administering COM courses
- Direction or leadership role in administering Graduate Medical Education programs
- Developing a new course that fills an identified need in the curriculum
- Successful planning or participation at teaching workshops or CME conferences
- Invitation to teach as a visiting professor at other clinical or biomedical departments within the college
- Invitation to teach as a visiting professor at a domestic or international institution of higher learning
- Successful participation at teaching workshops
- Unique/special effort and creativity in instructional activity, development of educational courses, development of an educational podcast, and creation of online educational material
- Creation of educational materials with global impact that improve the visibility of The University of Kentucky, such as medical education courses and CME programs

- Teaching in CME programs, refresher courses, workshops, etc., including development and presentation of a problem-based learning discussions
- Significant contribution to the professional development of students and/or residents, as judged by the Chairman and/or Program Director and/or as evidenced in evaluations, and/or by awards, and/or through subsequent feed-back to the department, etc.
- Academic recognition/award for a learner mentored or supervised by the faculty member
- Excellent placement of learners mentored or supervised by the faculty member into academic, scholarly, or professional position(s) following training
- Outstanding performance as an advisor or mentor to a resident/student, as judged by the Chair and/or Program Director and/or as evidenced in evaluations, by awards, through subsequent feed-back to the department, etc.
- Member or chair of doctoral or graduate student research/advisory committees
- Publication of online educational activities related to Emergency Medicine including blogs, educational Twitter posts, podcasts, peer-reviewed and non-peer reviewed journals or national publications, online instructional videos or webcasts (impact of activity could be gauged by the number of postings, on-line comments, or analytics data such as views, downloads, impressions or followers)
- Writing, performing, or supervising written, oral, or simulation-based exams
- Percentage of fourth-year medical students seeking a residency in the given specialty
- Timeliness of grade submissions
- ACGME survey reports on the residency program (i.e. accreditation without citations)
- Number of applicants per residency program position
- Accreditation of a fellowship under the guidance of a faculty member
- Positive outcomes of learners:
 - o Board certification pass rates of residents
 - o Matching rates of students into excellent training programs
 - o USMLE pass rates, shelf exam scores, pre- and post-tests, etc.
 - o Letters of support from former learners attesting to the teaching skills of the faculty member and the importance of those skills in the former learners' success.
- Significant contribution to the professional development of students
- Evidence of success/excellence in mentoring/advising activities is provided by:
 - 1. Placement of graduate students or post-doctoral fellows into academic, scholarly or professional positions
 - 2. Trainee/learner accomplishments such as board pass rates
 - 3. Trainee/learner publications or presentations
 - 4. Mentee faculty accomplishments promotion, funding, publications, etc.
 - 5. Letters of support from trainees
 - 6. Letters of support from faculty colleagues attesting to excellence in role
- Outstanding performance as a departmental undergraduate or graduate advisor
- Evidence of student mentoring (professional or graduate students)
- Evidence of junior faculty mentoring
- Member or Chair of graduate student advisory committees
- Evidence of courses taught at a rigorous and challenging level, with recognized excellence

- Direction of graduate student thesis or dissertation research
- Leadership positions on national organizations or national committees and taskforces
- Evidence of success/excellence in mentoring/advising activities is provided by:
 - 1. Trainee (graduate/post-graduate) publications, presentations, awards
 - 2. Trainee degree completion/ position placement
 - 3. Re-appointment in directorship role ("invite-backs") provide evidence of strong leadership
 - 4. Letters of support from trainees or faculty peers
 - 5. Participation in specialty board review courses, self-assessment guides, or board question development
 - 6. Letters of support from Committee chair or group leader indicating the specific role and contributions of the faculty member.

The definition of scholarship:

At the College of Medicine, scholarship must have a clear societal impact. According to Boyer's model of scholarship, it should include:

- Work involving faculty expertise, peer review, and impact.
- Scholarship of application, integration, and teaching.
- Criteria for unpublished scholarship.
- It must be public.
- It must be amenable to critical appraisal.
- It must be measurable.
- It must be in a form that enables its use by other members of the scholarly community

The definition of written scholarship:

Written publications in high-quality outlets will only improve the reputation of the UK College of Medicine and UK HealthCare. Therefore, clinical title series faculty will be recognized for the publication of first and senior author original research, chapters, reviews, and/or textbooks related to area of clinical expertise that are recognized as authoritative and are widely cited. Publication as the first and senior author manuscripts in peer-reviewed publications demonstrate the impact of the candidate's innovation on quality of care, clinical outcomes, and/or access to care. Those publications in a group authorship will be weighted relative to the quality of the journal and new knowledge generated and author's role in the research and manuscript as evidenced by attestation from the senior or first author.

During this process, participation in meaningful clinical research is significant. The highest weight will be given to original clinical research that impacts clinical care at the national or international level. Additional weight will be given for being institutional PI as opposed to associate investigator. It is not enough merely to participate in clinical trials. Finally, it is suggested that weight be given to clinical trial recruitment and stewardship of resources as demonstrated by adherence to budgets.

Research/Scholarly Activity

- Intramural research funding (including applications pending or approved)
- Extramural research funding, including contracts and industry-sponsored, in the department or otherwise in the College of Medicine (including applications pending or approved)
- Number of publications in refereed print journals, publication of invited articles or editorials, publications in professional newsletters, or non-refereed but widely recognized publications
- Number of publications in non-PMID indexed journals (print and or online)
- Receipt of a research award
- Frequent citation of past publications
- Number of publications (author or editor) of a scholarly book by a recognized publisher

- Number of publications of a chapter in a scholarly book
- Development, editing, and/or publication of a peer-reviewed national CME product
- Selection as an editorial board member of a recognized journal
- Number of presentations of accepted abstracts or invited papers at local, state, regional, national or international professional meetings
- Organization, administration, participation in the program committee, etc. of a scientific meeting
- Number of publications and/or funding resulting from interdisciplinary collaborative efforts with researchers in other academic areas and/or departments where the faculty member has a substantive role in the project
- Enrollment/mentoring of previously uninvolved clinical faculty in organized basic or clinical research, as evidenced by their inclusion as co-investigators, co-authors, co-grant applicants, etc.
- Cumulative impact factor of all peer-reviewed publications for the year
- Dollars of funding per square foot of research space
- Participation on other regional or national panels or committees that review research and/or set research policy or guidelines.
- Participation as a "team" expert for regional and national reputation (ex. college alliances, guidelines/talks/webcasts based on expertise).
- NIH funding awards and/or study section participation (chair>member>invited)
- Indirect funds realized
- Total research funds for fiscal year
- New grants received (peer reviewed, industry, philanthropy, etc.)
- Grants submitted (NIH, other peer reviewed, industry, etc.)
- FDA panel participation
- Evidence of success/excellence in research/scholarly activities when not self-evident by the faculty holding PI funding or senior author status is provided by:
 - Letters of support from the study PI or senior author of the publications indicating the specific role and contributions of the faculty member (Examples of unique creative contributions could include conception and design of the project; program evaluation; clinical support; analysis and interpretation of data; intellectual contribution to grants and manuscripts; and administrative, technical, supervisory or material support of the project. These efforts may not require or result in independent funding).
 - o For team science projects letters of support should assess the faculty member's contribution as major, moderate, or minor (defined below). Contributions assessed as "major" should be considered as equivalent to first or last authorship.
 - Major: substantive input into overall design of research protocol or manuscript; regular participation in study meetings with input on a range of issues or protocol amendments; planning and directing analyses that span the breadth of the protocol.
 - Moderate: input into one or more specialist areas of a protocol or manuscript; regular participation in data collection, analysis, management, or quality control activities on a specific aspect that contributes to overall

- project, but without direct input into the overall project; assistance with revision/resubmission/rebuttal of a manuscript or project.
- Minor: provision of critical review to sharpen a research protocol or manuscript without major substantive changes; advising only on specific issues when requested by the PI (e.g. – not regularly involved), performance of data acquisition or analysis without participation in the overall project.
- Letters from trainees indicating the faculty member's role in their degree completion and/or position placement
- o Letters of support from faculty peers indicating the faculty member's role

Administrative metric examples*:

- Increase diversity in administered programs
- Complete renovations in a particular clinical area.
- Complete business plan for expansion (ex. new office site/new line of business)
- Enhance faculty retention rate
- Faculty expansion and recruitment (new hires)
- Demonstrates Diversity in recruitment of faculty and residents
- Publish a state of the department annual report
- Publish a quality and safety annual report
- Percent faculty eligible for promotion who got promoted
- Implementation of a mentoring program
- Residency accreditation
- Collaborative endeavors with other departments/schools
- Successful direction of a clinical program or clinical laboratory. Examples may include financial measures such as contribution margin, relevant accreditation, program growth, or independent awards of excellence.
- Administration of a CME program, refresher course program, workshop, etc., either at University or at outside institution
- Process Improvement projects that show positive outcomes for financial, patient safety, or other departmental or institutional priorities

Non-clinical service examples:

- Service to College of Medicine, UK HealthCare and University of Kentucky committees, advisory, mentorship teams, etc.
- Organization, administration, participation in the program committee, etc. of a scientific meeting
- Service as editor or editorial board member of a recognized journal

^{*}These metrics are applied when the faculty member has administrative responsibility for the metrics, such as a departmental chair or vice chair

- Non-clinical regional and national committees
- Activities by the faculty member that build relationships which translate into philanthropy benefiting the department or university (such as gifts, endowed chairs or professorships) as evidenced by:
 - o Collaboration with a philanthropic office at UK or the Committee on Endowed Chairs with a record of service
 - o letters of support from the Department Chair
 - o letters of support from programs
 - o program announcements
- Philanthropic dollars pledged
- Philanthropic dollars realized
- Community engagement or outreach programs to schools as evidenced by:
 - o letters of support from the Department Chair
 - o letters of support from programs
 - o program announcements
- Participation in regional networks such as the Stroke Care Network or the Cancer Center Network

Clinical service examples:

- Recognition as a consultant through sustained referrals of patients beyond the local level
- Referral beyond the local level of the most complex and sickest patients as demonstrated by objective measures such as case mix index
- Productivity indicators such as achieving RVU minimum work standards
- Quality indicators, mortality metrics, complication rates, and patient satisfaction rates where performance measures can easily be internally and externally benchmarked for comparison
- Invitations to speak regionally, or nationally, on issues related to area of clinical expertise with information that is accessible and usable for additional practitioners
- Service on regional or national committees developing guidelines and policies for management in area of clinical expertise
- Peer-reviewed funding to support innovations that influence clinical practice regionally or nationally
- Regional or national awards for contributions or innovation in the area of clinical expertise influencing clinical practice
- Letters or other documented measures of patient and referring physician satisfaction that demonstrate excellence above general expectations
- Leading development of clinical protocols or pathways that objectively demonstrate a measurable positive impact on patient care beyond the local level, that are usable
- Ambulatory or inpatient service patient volume.
- Access metrics such as wait time for appointments

Service

- Demonstrated skills and abilities in clinical practice, with particular note of extra day-to-day clinical effort invested in order to free up time for other departmental faculty to pursue their academic endeavors calculated to lead to their own academic promotions
- Successful completion by the faculty member of a relevant certificated clinical instructional program
- Demonstrated clinical leadership, such as organization/administration/innovation of patient care activity in the Emergency Department
- Directorship
- Service as a committee member, committee chair, officer, or director in a local, state, regional, national or international professional organization (including ACEP, SAEM, CORD, AAEM, etc.)
- Award or recognition, including academic and honorary appointments, for service from a recognized academic institution or professional organization
- Service in an administrative role at UK [or in support of an administrative function, *e.g.*, interviewing applicants] (department, hospital, College of Medicine, university), including on committees, task forces, reviews, *ad hoc* projects, or similar groups
- Service on a governmental, inter-governmental (e.g., WHO), or standards-setting (e.g., ISO) commission, task force, board, or organization
- Primary organizer/promoter of a UK, local, state, regional, national or international meeting, conference, workshop, or symposium
- Service as program chair or similar position for a UK, local, state, regional, national or international meeting, conference, workshop, or symposium
- Service as an officer in the UK Faculty senate or equivalent
- Service as a scientific or clinical consultant at a local, state, regional, national, or international level
- Service on editorial boards in area of clinical expertise
- Service as a member of a UK IRB, data safety monitoring board or a review panel or study section for a nationally recognized research organization
- Service in charitable professional organizations (*e.g.*, Doctors without Borders, Operation Smile, Shoulder to Shoulder, medical missionary trips) or participation in service activities of/for relevant non-profit organizations (*e.g.*, Fayette County or other schools, charitable disease-specific advocacy and/or support groups)
- Evidence of excellence in professional service to the local community and public at large
- Representative of the University or College of Medicine as a content expert on topics relevant to Emergency Medicine (newspaper, radio, television interviews or articles)

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