

**University of South Carolina School of Medicine**

**Tenure and Promotion Procedures and Criteria for Tenure-  
Track Clinical Faculty**

**Approved by the University Committee on Tenure and Promotion on 3/19/99**

## University of South Carolina School of Medicine

### Criteria for Tenure and Promotion of Tenure-Track Clinical Faculty

#### ***I. Introduction***

The University of South Carolina School of Medicine is a University-based, community-oriented, medical school whose mission includes the development and implementation of programs for medical education, research, and the delivery of health care in order to improve the health of the people of South Carolina.

Demands on faculty in clinical departments may include responsibilities for patient care, administrative tasks, research, and teaching medical students, postgraduate students (residents and fellows), undergraduate students on the main campus, and graduate students. To assure quality practice as a basis for clinical teaching and role modeling, faculty must maintain clinical competence.

To evaluate faculty members in the School of Medicine, the promotion/tenure criteria of excellence in teaching, scholarship/research, and service/patient care should be viewed as a means of ensuring that faculty members meet performance expectations. Since all three activities are significant and necessary for the academic health of the school, they are considered in promotion and tenure decisions. However, the three need not be treated equally, and their application depends upon the definition of the position to which the individual has been appointed and to which the candidate is to be promoted as outlined by the department chair.

The following document provides a structure for achieving this balance in evaluating faculty members in clinical departments who apply for promotion and/or tenure. Candidates must provide evidence that their work performance consistently meets the standards established in this document.

#### ***II. Procedures***

All School of Medicine procedures will be in conformity with the University-wide timetable for tenure and promotion considerations and will comply with the University of South Carolina procedures.

- A. All non-tenured faculty are considered for tenure, and all tenure-track faculty members below the rank of professor are considered for promotion each year and will receive written notification at least 30 days in advance of the deadline for submitting their file for promotion and/or tenure consideration. The chair of the Tenure and Promotion Committee, in collaboration with the department chair, is responsible for notification of the individual faculty members under consideration (with a copy to the Dean's Office).

- B. Any faculty member who does not wish to be considered in any given year must notify the chair of the Tenure and Promotion Committee and the department chair in writing by the stated deadline. Faculty in the decision year do not have the option of not being considered. The faculty member desiring consideration must submit an updated file to the department chair by the University deadline. From referees outside the unit, the chair of the Tenure and Promotion Committee, in consultation with the department chair and faculty from the unit with similar specialties, will solicit a minimum of five letters of support. Two of these will be selected from a list of five provided by the candidate. Referees suggested by the candidate should be so indicated in the file. Referees should not normally be former teachers, co-authors, co-investigators, etc. A minimum of three will be independent of this list and should be selected to evaluate the candidate's teaching, scholarship/research, and/or service/patient care. The candidate may solicit additional letters which will be filed in a section separate from that of the external referees' letters. The referees should be sent (a) criteria for promotion and tenure in the University of South Carolina School of Medicine, (b) the candidate's curriculum vitae, and (c) representative publications of the candidate. A bibliographic paragraph, which states his or her qualifications to comment on the candidate, should be obtained from each external referee and included in the file. The department chair will forward the information, along with his or her personal recommendations, a description of what the candidate's position has been within the department from the date of hire, and a statement of the distribution of the candidate's time and effort in teaching, scholarship/research, and service/patient care, to the chair of the Tenure and Promotion Committee.
- C. Following the deadline for submission of updated personnel information, the Tenure and Promotion Committee of the School of Medicine will meet and make its recommendations. The Tenure and Promotion Committee will consist of all tenured faculty in the clinical departments in the University of South Carolina School of Medicine. The committee will elect a chair for a two-year term early in the fall semester of alternate academic years. The chair can be removed from office at any time by a simple majority vote (one more than 50 percent of the eligible voters) of the committee. The chair must be a tenured professor.

Promotion and tenure must be considered separately, but the two may be recommended at the same time. All voting will be by secret ballot. Ballots will be returned to the chair of the Tenure and Promotion Committee (or his/her designee). Votes will be recorded as favorable, unfavorable, or abstain. Written justification of all votes is mandatory. The chair of the Tenure and Promotion Committee (or his/her designee) will record the faculty members who voted and whether or not their vote or abstention was justified. Decisions will be by majority of the justified "yes" or "no" votes of all members. Abstained votes will not be counted in determining majority. In the matter of tenure, decisions will be by all tenured faculty of equal or higher rank; and in the matter of promotion, decisions will be by those of higher rank. The chair of the Tenure and Promotion

Committee will forward all recommendations to the Dean with supporting material.

The chair of the Tenure and Promotion Committee (or his/her designee) will compile and send to the Dean a list of all eligible faculty casting ballots and those failing to vote or failing to justify their votes or abstentions.

The Dean will review the file, add an assessment and recommendation, and forward the file to the Provost. The Provost will review the file, add an assessment and recommendation and forward the file to the University Committee on Tenure and Promotions.

- D. It is the responsibility of the chair of the Tenure and Promotion Committee to notify faculty members under consideration of the negative or positive recommendation by the Tenure and Promotion Committee. The numerical vote count is not revealed to the candidate at this time.

#### Appeals

1. A faculty member receiving a negative decision by the Tenure and Promotion Committee may appeal the committee's recommendation by notifying, in writing, the chair of the Tenure and Promotion Committee of the intention to file an appeal within the schedule of deadlines for tenure and promotion decisions promulgated each year by the Provost.
2. If the candidate appeals, the chair of the Tenure and Promotion Committee will invite further written comments from all of the faculty, and the file will be processed as described in C. above.

The Dean will forward the file of all faculty members recommended favorably by the Tenure and Promotion Committee and also the file of all faculty who choose to appeal the Tenure and Promotion Committee's recommendations to the Provost. The Dean will add a recommendation letter prior to transfer of the file to the Provost.

- E. Additions to the file initiated by the candidate or faculty after the unit vote has occurred are limited to the following:
1. Candidates may add to the list of published articles those titles which were shown as submitted or in process when the file was prepared.
  2. Letters submitted directly to the Dean or as part of an appeal may be entered in the designated section of the tenure and promotion file.
- F. Failure to recommend favorably at a particular time is without prejudice with respect to future consideration.

- G. The procedures for appeals to the University Grievance Committee are presented in The Faculty Manual.

### ***III. Criteria for Promotion and Tenure***

#### **A. Eligibility Criteria**

1. Earned doctoral degree.
2. Full-time faculty appointment within a clinical department of the School of Medicine.
3. For physicians (M.D.s), board certification or equivalent experience base and clear licensure status with the South Carolina Department of Labor, Licensing, and Regulation Board of Medical Examiners.

#### **B. General Guidelines**

1. Where clinical practice constitutes a significant part of a candidate's professional activity, its application within the medical school can be considered as an adjunct and contributing factor toward meeting the criteria set out below.
2. Criteria will comply with policies and procedures of the University of South Carolina and the School of Medicine applicable at the time of appointment or as amended. If revisions occur, a candidate may elect to have either the initial or amended rules apply as outlined in The Faculty Manual.
3. The general performance in the areas of teaching, scholarship/research, and service/patient care comprise the basis for evaluation for tenure and promotion. The unit uses a numerical system as a means to rate achievement across performance areas.
4. The School of Medicine's Tenure and Promotion Committee requires that "percentage of effort" assignments, among the three areas of teaching, scholarship/research, and service/patient care be made by the candidate's department chair. A candidate's percentage of effort assignment is determined by averaging the percentage of effort assignments recorded in the candidate's Annual Faculty Evaluation and Planning Document for the years under consideration. It is recognized that achievements in a given area may be limited by the effort assigned, i.e., by limits imposed by the candidate's job description. For example, a candidate assigned 20 percent time for scholarship/research will not be expected to achieve the same

quantity of scholarly works as one who is assigned 50 percent time for scholarship/research.

C. Promotion and Tenure Criteria

Tangible evidence of balanced and progressively effective past performance and future promise is required for advancement through faculty ranks. Members of the unit Tenure and Promotion Committee will be guided by the following criteria in making their recommendations:

1. Instructor to Assistant Professor

Promotion from the rank of Instructor to the rank of Assistant Professor should be accompanied by evidence of promise of further academic development in teaching, scholarship/research, and service/patient care and the accrual of a minimum of three points.

2. Assistant Professor to Associate Professor

Promotion from the rank of Assistant Professor to the rank of Associate Professor should be requested only if individuals show real promise that they will become leading teachers, researchers, or scholars. Promise should, in fact, be substantiated by tangible, developing evidence. A candidate at the rank of Associate Professor must possess maturity of judgment, personal and professional integrity, highly motivated productivity, potential for leadership, and commitment to institutional and professional goals. Promotion from the rank of Assistant Professor to the rank of Associate Professor requires at least an “Adequate” record in each of the three categories (teaching, scholarship/research, service/patient care) and the accrual of a minimum of four points.

3. Associate Professor to Professor

Promotion from the rank of Associate Professor to the rank of Professor should [normally] be based upon promise fulfilled. A move to the rank of Professor should be accompanied by evidence of attainment of national or international stature in a field. Additionally, a candidate for promotion at the rank of Professor must demonstrate maturity of judgment, personal and professional integrity, leadership skills, administrative abilities, and commitment to institutional and professional goals. Promotion from the rank of Associate Professor to the rank of Professor requires at least an “Adequate” record in each of the three categories (teaching, scholarship/research, service/patient care) and accrual of a minimum of seven points.

4. Tenure

Awarding of tenure requires demonstrated and anticipated professional growth and development at a level necessary for the candidate to function as a long-term member of and constructive contributor to the unit, the School of Medicine, and the University. In general, awarding of tenure requires a documented record of continuous productivity over a period of several years, achievement of a level of “Outstanding” accomplishment in one of the three categories (teaching, scholarship/research, service/patient care), and the accrual of a minimum of five points.

<b>Performance Categories Levels</b>	<b>Teaching</b>	<b>Scholarship/Research</b>	<b>Service/Patient Care</b>
Unsatisfactory	0	0	0
Adequate	1	1	1
Substantial	2	2	2
Outstanding	3	3	3

D. Criteria for Achievement

1. Criteria for “Adequate” Achievement

- Teaching

Recognition as an effective teacher of medical students and residents. Documentation will include a rating of at least “3” (on a scale of “1” to “5” with “1” being lowest and “5” being highest) on the majority of student and peer evaluations and favorable letters from the clerkship and/or training director(s).

- Scholarship/Research

Publications of merit and significance as senior author or principal collaborator. It is not possible to give a precise, quantitative criterion for the number of publications, since the scope and influence of the work must be weighed in each case. Ordinarily the candidate would be expected to have published a minimum of 8 articles in refereed journals or the equivalent. Articles counted the teaching category may not be counted again under scholarship/research or service/patient care. (Book reviews, letters to the editor, abstracts of oral presentations, and papers submitted but not yet accepted are not considered as meeting this requirement). Documentation will include copies of published work and drafts of work that have been accepted by a journal or are in press.

- Service/Patient Care

Recognition as effective in carrying out assigned roles as leader or coordinator of programs, committee assignments, and/or counterpart activities in the community (e.g., participation in local, state, or national professional organizations). Effective participation in assigned patient care activities. Documentation will include a favorable letter from the principal clinical program supervisor and the individual(s) to whom the candidate is accountable for committee work and public service assignments.

2. Criteria for “Substantial” Achievement

The criteria below are in addition to those above required for “Adequate” achievement:

- Teaching

Documentation will include a rating of at least “4” (on a scale of “1” to “5” with “1” being lowest and “5” being highest) on the majority of student and peer evaluations and favorable letters from the clerkship and/or training director(s) for a significant teaching load. In addition, at least one of the following achievements will be documented: publication in a refereed journal on educational issues; teaching award from residents or medical students; School of Medicine Teaching Advancement Award; peer (CME) teaching beyond the institution at regional or national professional meetings; or receipt of a career teacher grant or award, or serving as principal investigator for a training grant awarded to the department.

- Scholarship/Research

A “Substantial” publication record is required. While this is impossible to quantify precisely, it would ordinarily be expected that the candidate has published 15 or more articles, acting as senior author of at least 8, in refereed journals, or the equivalent. Articles counted the teaching category may not be counted again under scholarship/research or service/patient care. In addition, the candidate’s scholarship should have become recognized by one or more of the following: approval or funding of a competitive research grant with candidate as the principal investigator; editorship (or associate or assistant editor) of a refereed professional or scientific journal; reviewer of several manuscripts for referred journals or of several grant proposals for a study section of a competitive grant-awarding agency; appointment to a study section, scientific task force, or advisory group for NIH or equivalent; or several refereed scientific presentations at national or international meetings. Documentation will include copies of publications, evidence of other peer recognition as described, and favorable review of the significance of the candidate’s scholarship in all outside letters of reference.

- Service/Patient Care

Candidate will have served effectively as chief of a clinical program (e.g., ward, outpatient clinic, or consultation service); as director of a training program; or the equivalent; or the candidate will have documented a “Substantial” patient care record in any of several ways.

A “Substantial” service record also requires that the candidate will have served effectively on at least three hospital, School of Medicine, or University committees. Documentation of a “Substantial” service record will include a favorable letter from the principal clinical or academic supervisor and committee chairs, as appropriate.

Documentation of a “Substantial” patient care record requires that the candidate may have become known, at least within the School Of Medicine, for expertise and innovation in the diagnosis and/or treatment of a particular disease or of a particular group of patients. Or, the candidate might have developed a substantial reputation as a clinician treating a broad range of patients in support of the clinical mission of the department. The best documentation of these clinical contributions would come from

letters written by the major clinical supervisor; faculty of other clinical departments; and, if the reputation of the clinician has gone beyond the institution, outside letters as well.

In addition to the above, “Substantial” achievement in service/patient care also requires that the candidate will have achieved at least one of the following: refereed publications on administrative or patient care issues; presenting one or more workshops or demonstrations on diagnosis or treatment at a national meeting; appointment to a regional, state, or national task force or committee addressing administrative, organizational, service delivery, or patient care issues; serving as a principal investigator for a training, clinical program, or public service grant awarded to the department; receipt of a grant or award for research on patient treatment or participation in a multi-center collaborative treatment study; or departmental receipt of a national recognition award for excellence of a clinical program in which the candidate has devoted significant effort.

3. Criteria for “Outstanding” Achievement

The criteria listed below are in addition to those above for “Substantial” achievement:

- Teaching

Documentation will include a rating of “5” (on a scale of “1” to “5” with “1” being lowest and “5” being highest) on the majority of student and peer evaluations and favorable letters from the clerkship and/or training director(s) for a very significant teaching load. In addition, at least two of the following achievements will be documented: refereed publications on teaching of candidate’s field; teaching awards or other certificate of outstanding teaching contributions from residents, medical students, faculty, or an outside CME group; School of Medicine Teaching Advancement Award; refereed teaching at national professional meetings; or receipt of a career teaching grant or award, or training grant to which the candidate is principal investigator.

- Scholarship/Research

Thirty papers, 15 as senior author, published in refereed journals, or the equivalent, depending on the percent of candidate's effort assigned to scholarship/research (e.g., a candidate whose principal activity is research would be expected to meet the quantitative requirement at the high end of the range). Articles counted the teaching category may not be counted again under scholarship/research. In addition, achievement in two or more of the areas mentioned under "Substantial" achievement: grants, editorships, reviewer activities, appointments to study sections or task forces, and refereed presentations at scientific meetings. Outside letters should indicate that the candidate has a national reputation in some area in his or her field.

- Service/Patient Care

Candidate will have served the department in a major administrative role (e.g., with oversight for a clinical, teaching, or research program that has multiple program elements, typically requiring supervision of the work of junior faculty or comparable personnel, or a similar major role or roles, continuing over several years, in a state or national professional organization); or the candidate will have demonstrated an "Outstanding" patient care record. In addition, the candidate's administrative leadership will have received national recognition by peers, or the candidate will have achieved national prominence in some aspect of patient care.

An "Outstanding" service record also requires that the candidate will have served effectively on at least three hospital, School of Medicine, or University committees. Documentation of an "Outstanding" service record requires a favorable letter from committee chairs and from the major supervisor or CEO of organizations in which the candidate has had major roles, as appropriate. Outside letters will give favorable comment on the candidate's national reputation as an outstanding organizational leader.

Documentation of an "Outstanding" patient care record requires that the candidate will have become nationally known for expertise and innovation in the diagnosis and/or treatment of a particular disease or of a particular group of patients. Outside letters will give favorable comment on the candidate's national reputation as an outstanding clinician.

In addition to the above, “Outstanding” achievement in service/patient care also requires that the candidate will have achieved at least two of the following: refereed publications on administrative or patient care issues; presenting one or more workshops or demonstrations on diagnosis or treatment at a national meeting; appointment to a national task force or committee addressing administrative, organizational, service delivery, or patient care issues; serving as a principal investigator for a training, clinical program, or public service grant awarded to the department; receipt of a grant or award for research on patient treatment or participation in a nationally prominent, multi-center collaborative treatment study; or departmental receipt of a national recognition award for excellence of a clinical program in which the candidate has devoted significant leadership.

***E. Appendix: Additional Suggested Sources for Documentation of Performance***

1. Teaching

Contribution to:

a. Curriculum development

- Undergraduate medical education: give course number and type of activity
- Graduate medical education: describe curriculum, type of student, goals of program
- Postgraduate education: describe curriculum, type of student, goals of program
- Continuing medical education: describe curriculum, type of participants, goals of program

b. Undergraduate, graduate, postgraduate, and continuing medical education

- Classroom lecture: give course number, number of contact hours, number of students
- Case conference: give frequency, number and type of participants, topic area
- Clinical teaching and supervision: give frequency, number of students, type of activity
- Course coordination: give course number, number of contact hours, number of students

- c. Participation in training and educational curricula of affiliated hospitals of the School of Medicine and other schools and departments of the University
  - Programs of affiliated and cooperative hospitals
  - Other schools and departments of the University
- d. Evidence of teaching quality and quantity of teaching load
  - Peer evaluations
  - Student evaluations
  - Student performance on objective tests (e.g., National Board Exams)
  - Evaluation by department chair
  - Evaluation by faculty of higher rank
- e. Development of teaching methods or aids
  - Computer simulation
  - Audio-visual presentations
  - Medical illustrations
  - Handouts
  - Models (anatomical, biochemical, etc.)
  - Other (weekend symposium, etc.)

2. Scholarship/Basic and Applied Research

- a. Publications
  - Refereed journal articles
  - Books
  - Book chapters
  - Clinical and case reports
  - Invited reviews
  - Non-refereed journal articles
- b. Presentations
  - Invited talks at scientific and professional meetings
  - Non-invited talks
  - Seminars given
- c. Grants
  - Applications submitted, approved, and/or funded

- d. Development and supervision of student research projects
  - Medical student research projects
  - Resident research projects
  - Membership on dissertation committees, oral examination committees
- e. Attendance at and participation in professional and scientific meetings

3. Service/Patient Care

Service

- a. To students:
  - Faculty advisor
  - Student counseling
  - Advisor to student organizations
  - Membership on student-faculty committees
- b. To the department:
  - Course coordination
  - Committees and subcommittees (e.g., honors, practice plan, curriculum development, etc.)
  - Administrative responsibilities
- c. To the school:
  - Regular committees and subcommittees (e.g., admissions, library, curriculum, etc.)
  - Ad hoc committees (e.g., promotion and tenure criteria development, etc.)
  - Administrative responsibilities
- d. To affiliated hospitals:
  - Committees and subcommittees (e.g., quality assurance, medical staff, etc.)
  - Administrative responsibilities

- e. To the University:
- Committees and subcommittees
  - Faculty Senate
  - Task forces
  - Administrative responsibilities
- f. To the profession:
- Presentations at professional meetings
  - Development of symposia, professional meetings, etc.
  - Chair at professional meetings
  - Professional organization/society officer
  - Service on ethics boards, boards of examiners
  - Editorial board membership
  - Professional organization/society memberships and activities
  - Research and grant review panels
  - Membership on accreditation committees
  - Development of grants
- g. To the community:
- Professional services
    - Program development (e.g., programs for specific reference groups, such as the handicapped, etc.), patient education
    - Support and assistance to existent community groups (e.g., burn victims, the blind, epileptics, etc.)
    - Advisor to federal, state, and local decision-making groups (e.g., regarding health care to the indigent, crisis intervention, disaster preparedness, utilization of medical care, etc.)
    - Consultations to hospitals, nursing homes, etc.
  - Other: Civic activities
    - Presentations to schools, civic groups and agencies
    - Membership on governing boards of voluntary agencies, schools, churches
    - Talks to schools, clubs

Patient Care

- a. Participation in clinical services of the School of Medicine or affiliated institutions
  - b. Publications in refereed journals on patient care
  - c. Presentations at professional meetings on patient care
  - d. Membership on regional or national task force or committee on patient care
  - e. Grant for research on patient care
  - f. Participation in multi-center collaborative treatment study
  - g. Award for excellence in clinical service
  - h. Reputation among peers as an excellent clinician
4. Special Honors and Endorsements