

V. APPOINTMENTS TO THE INSTRUCTIONAL TRACK

A. Definition of the Instructional Track

The Instructional Track was the original fulltime faculty track in the Medical School. Members of this track are expected to make contributions to the Medical School in the areas of scholarly research, teaching, organizational service, and health care if it pertains to their professional field. Instructional Track faculty have no significant employment outside of the University of Michigan. Tenure may be granted by the Board of Regents to Instructional Track faculty at the ranks of associate professor or professor. Medical School faculty members assigned to the Ann Arbor Department of Veterans Affairs Medical Center, the Howard Hughes Medical Institute, or to the Life Sciences Institute may be included in the Instructional Track.

Faculty in the Instructional Track are voting members of the Executive Faculty (governing faculty) and University Senate, have representation on the Executive Committee of the Medical School and University Senate Assembly, and are candidates for tenure, sabbatical, and emeritus status.

B. Ranks in the Instructional Track

The Instructional Track includes three professorial ranks: assistant professor, associate professor, and professor. In the past some Instructional Track faculty were appointed as instructors but this is no longer the case inasmuch as two promotional events would be necessary during the eight-year pre-tenure period.

Assistant Professor

Assistant professor is the rank appropriate to a person who has demonstrated competence in teaching and scholarly activity, but has yet to achieve exceptional status as a teacher or regional/national recognition in their professional field. Persons who have begun to publish scholarly work and/or who may have had teaching responsibilities (e.g., seminars, bedside instruction, small group interactions, and/or didactic activities) before their initial faculty appointment, may begin their faculty careers at the rank of assistant professor. Some others achieve this rank by being appointed from the rank of clinical lecturer.

Appointments to assistant professor, a tenure-track position, require review by the Advisory Committee on Appointments, Promotions, and Tenure (ACAPT) and approval by the Medical School Executive Committee.

Associate Professor

Appointment to associate professor is given only to persons of well-established professional position and demonstrated scholarly or creative ability that positively impacts their field. Those promoted or appointed to this rank must have achieved national recognition for scholarly accomplishment of significance as evidenced by: evaluations from independent national leaders in their field, national lectureships, memberships on editorial boards and peer review committees, significant involvement in peer organizations beyond membership, and scholarship. Scholarly independence or a strong collaborative contribution to a scientific team effort is typical for associate professors. Usually this is evidenced by peer-reviewed publications published over the previous five years. For those with a predominate expectation of clinical or laboratory research a sustained level of external research funding is the norm. An associate professor must have demonstrated a significant contribution to the educational missions of this school or another medical school. If it pertains to their professional field, high quality clinical care or clinical service is expected. Persons with clinical responsibilities are board certified before they become associate professors, recognizing that exceptions may be granted by the Medical School Executive Committee for some internationally-trained physicians who do not fulfill American Board requirements but bring critical expertise to the medical school. The associate professor signals the passage into medical academia's senior rank. Unless otherwise specified, appointments and promotions to associate professor are with tenure although persons may be appointed as associate professors without tenure.

Appointments and promotions to associate professor require review by ACAPT; approval of the Medical School Executive Committee; endorsement by the Dean, the Executive Vice President for Medical Affairs, the Provost and Executive Vice President for Academic Affairs, and the President; and approval by the Board of Regents.

Professor

Appointment to professor is given only to persons of nationally and internationally established professional reputation and demonstrated scholarly or creative ability. This title is our highest academic rank. All of the expectations for the associate rank pertain in equivalent or greater measure for the professor. The difference between the ranks of professor and associate professor is primarily one of ongoing achievement usually over a period of five-to ten-years; promotion to professor is not automatic after a certain time in rank as associate professor. A person appointed to the rank of professor must have demonstrated *continued* scholarship, productive research, contributions to the teaching mission, organizational service, and clinical care when relevant to career. This ongoing achievement is roughly equivalent in quantity to the accomplishments that gained the previous promotional step. National and international impact must pertain to this person's work. Continued and consistent publication that contributes significantly to an area of knowledge is essential. It is expected that the case for promotion to the professorial rank may reference the work done to achieve the rank of associate professor, but will be based largely on new work accomplished since the last promotional review. For those predominantly involved in clinical, educational, or laboratory research, sustained external funding is the norm. Unless otherwise specified, appointments and promotions to professor are with tenure; persons may be appointed as professors without tenure.

Appointments and promotions to professor require review by ACAPT; approval of the Medical School Executive Committee; endorsement by the Dean, the Executive Vice President for Medical Affairs, the Provost and Executive Vice President for Academic Affairs, and the President; and approval by the Board of Regents.

C. Criteria for Appointment and Promotion in the Instructional Track

Teaching, scholarship/research, and service are three areas examined in all appointment and promotion considerations. As we are a Medical School, contributions to health care and human welfare are also a substantial area of consideration for many of the faculty. Interdisciplinary work is a core value of a Medical School and needs to be accounted for in the evaluative process. Some individuals of great value to our institution have truly outstanding performance and contributions in one area when compared with the norm of faculty performance in that area, yet the performance in other areas may be satisfactory only. A recommendation for appointment, promotion, or the award of tenure to a nominee with such an asymmetrical mix of qualifications must be justified by the department chair. In all cases, the minimum requirements must be met. Longevity in a rank or position is not sufficient evidence of accomplishment or merit for promotion.

1. Teaching

Essential qualifications for appointment or promotion are personal integrity and the ability to teach one's professional area of knowledge to relevant learning groups. Critical elements to be evaluated include experience, knowledge of subject matter, skill in presentation, interest in students, ability to stimulate youthful minds, capacity for cooperation, mentorship, and enthusiastic devotion to teaching. A teaching portfolio helps convey the scope of instructional accomplishment. The full responsibility of the teacher as a guide and friend extends beyond the walls of the classroom, laboratory, or clinical arena into other phases of the life of the student as a member of the University and world community. It also involves the duty of initiating and improving educational methods both within and outside the faculty member's department. Outcomes of instruction in the form of teaching evaluations can be described. Pedagogical research and funding are strong evidence of teaching expertise. The spectrum of instruction spans the gamut from premedical students and graduate students to established practitioners.

2. Scholarship and Research

All Instructional Track faculty must be individuals of scholarly ability and achievement. Scholarship may be categorized in terms of the scholarship of discovery (basic research), scholarship of integration, scholarship of application, and scholarship of education. The University of Michigan is a research university committed to extending and understanding the knowledge base of humanity. Accomplishment in scholarship is typically demonstrated by the quality and quantity of published and other creative work. Interdisciplinary work, success in training graduate and professional students (as attested to by academic/research positions obtained), participation and leadership in professional associations, and editing of professional journals are measures of success and stature in scholarship. Peer reviewed papers and grant funding are strong evidence of scholarship with high impact. Independent and peer-reviewed funding is the norm in research-based careers. There should be a strong prediction of continued excellence throughout the faculty member's professional career.

3. Service

Service may consist of organizational service in the Medical School and University, in the public sector, or in the national organizations of a faculty member's peer group. Service may include participation in committee work and other administrative tasks, counseling, internal review boards, and special training programs within the Medical School and University. The University also anticipates that many of its instructional faculty will render extramural services to other schools, industry, relevant professional organizations, governmental agencies, and the public at large. These services may be paid (within University guidelines), advisory, or volunteered. Organizational and volunteer services are of importance, although given less weight in promotion and appointment decisions than are teaching, scholarship, and clinical activities, when relevant to career.

4. *Health Care/Clinical*

Many faculty have a professional role related to health care, generally in terms of clinical responsibility, teaching or research. Competence is expected at entry levels in the faculty ladder and excellence is expected at the higher levels. Excellence is evidenced by documentation from independent authorities in the relevant field, regional reputation, and published work of clinical successes, innovations, or insights.

Tenure in the Medical School

The goal of tenure and indeed of all senior level appointments is to guarantee a robust, diverse, and fully-vested senior academic community. These scholars must not be look-alikes, each adhering to a semi-rigid profile. Whereas many scholars will be somewhat conventional in profile (the several dozen papers, independent grant funding, a distinct area of scholarly focus, and an excellent educator's portfolio) some will be rather unconventional in any great academic community. These unconventional types may have more vague areas of focus or maverick ideas with little peer-appeal. They may be vital members of a scholarly team. If, however, they offer strong instructional value, unique skills, critical interdisciplinary contribution, provocative collegiality, special organizational service, and the chance of an unexpected scholarly home run, then they need to be included within our ranks.

The Appointment Process in the Instructional Track: An Overview

Recommendations for new appointments may be submitted at any time, but departments should allow time for the multistep processing, as outlined below, to avoid delays in salary payments to faculty members. In particular, recommendations at the senior ranks of associate professor or professor, with or without tenure, require approval by the Board of Regents, and regentially reviewed appointments cannot be retroactive. The Regents do not meet in August.

- For clinical lecturer appointments submit recommendation packet to the Faculty Affairs Office *at least one month* before effective date.
- For assistant professor appointments submit recommendation packet to the Faculty Affairs Office *at least two months* before effective date.
- For associate professor and professor appointments submit recommendation packet to the Faculty Affairs Office *at least three months* before effective date.

The appointment process has a specific sequence of steps, dependent upon the level of the position. All appointments are made by the president of the University.

Clinical Lecturer Level

1. Authorized and legitimate search, in accordance with Affirmative Action guidelines, if applicable. (See separate instructions.) If a national search is not conducted when a clinical lecturer appointment is proposed, the individual must compete in a national search if he or she is a candidate for an assistant professor position in the future.)
2. Forwarding of draft offer letter and the Appointment Activity Record (AAR) to the Faculty Affairs Office for approval; after approval, sending of offer letter to candidate.
3. Forward Criminal Background Check Authorization form to the Faculty Affairs Office.
4. Assembly of appointment recommendation packet for candidate; see details below.
5. Forwarding of completed appointment recommendation packet to the Faculty Affairs Office.
6. Approval by Assistant Dean for Instructional Track Faculty.
7. Processing of financial and personnel paperwork.

Assistant Professor Level

1. Authorized and legitimate search, in accordance with Affirmative Action guidelines. (See separate instructions.)
2. Forwarding of draft offer letter and the Appointment Activity Record (AAR) to the Faculty Affairs Office for approval; after approval, sending of offer letter to candidate.
3. Forward Criminal Background Check Authorization form to the Faculty Affairs Office.
4. Assembly of appointment recommendation packet for candidate; see details below.
5. Forwarding of completed appointment recommendation packet to the Faculty Affairs Office.
6. Review by the Advisory Committee for Appointments, Promotions and Tenure (ACAPT).
7. Approval by the Medical School Executive Committee.
8. Processing of financial and personnel paperwork.

Associate Professor and Professor Level

1. Authorized and legitimate search, in accordance with Affirmative Action guidelines. (See separate instructions.)
2. Forwarding of draft Letter of Intent and the Appointment Activity Record (AAR); after approval, sending of Letter of Intent to candidate.
3. Forward Criminal Background Check Authorization form to the Faculty Affairs Office.
4. Assembly of appointment recommendation packet for candidate; see details below.
5. Forwarding of completed appointment recommendation packet to the Faculty Affairs Office.
6. Review by ACAPT.
7. Approval by Medical School Executive Committee.
8. Endorsement by the dean, the executive vice president for medical affairs, the provost, and the president.
9. Forwarding of draft offer letter to the Faculty Affairs Office for approval; after approval, sending of offer letter to candidate.
10. Approval by the Board of Regents. (Such approval cannot occur retroactively.)
11. Processing of financial and personnel paperwork.

The Appointment Packet: Forms and Documentation to be Submitted by the Department

1. Transmittal Letter from the Department Chair to the Dean

This letter introduces the candidate, requests the appointment, and states the proposed date of appointment. To help prevent delay in processing, the letter may also point out any unusual features about the appointment--for example, the rationale for an accelerated tenure request or an explanation of an asymmetrical evaluation that is heavier on research than on teaching. The appointment process will be compromised if this letter is missing.

2. Form B (Three-page Summary of Appointment Recommendation)

Use of this form allows all the people who must review the packet to have a standard for comparison. For clinical lecturer appointments the form may be abbreviated (or omitted) simply because prospective clinical lecturers may not yet have experience in some areas and because external evaluations may not be available. Nevertheless, Form B is an excellent document to have in the file of each faculty member, particularly as it relates to career development plans.

The standard form of submission is as a document in Microsoft Word, set in 12 point Times with side margins of 1.25 inches and top and bottom margins of 1 inch. End punctuation should not be underlined. Bullets are used for explanation only here; please write in paragraph form. The candidate's name should appear in the upper left hand corner of each page of the proposal. Do not date this material. A complete description of Form B follows.

FORM B FOR INSTRUCTIONAL TRACK FACULTY APPOINTMENTS ***-- which becomes a communication to the Regents --***

APPOINTMENT RECOMMENDATION
UNIVERSITY OF MICHIGAN
MEDICAL SCHOOL
DEPARTMENT OF _____

Name: The three-page proposal from the department chair or unit director should begin with the candidate's name and the proposed rank.

This paragraph includes *instructional titles only*, not adjunct, supplemental, primary research or professional/administrative titles. Please specify any joint instructional appointments the candidate may hold within the Medical School or other schools/colleges.

EXAMPLE:

John A. Smith, Ph.D., is recommended for appointment as associate professor of biological chemistry, with tenure, Department of Biological Chemistry, Medical School.

Academic Degrees: List these by degree, year, and college with most current first:

M.D.	1983	Ohio State University
B.A.	1979	University of Michigan

Professional Record: Include all titles held at the University of Michigan and other universities, plus any other professional affiliations. The year and employment should be most current first.

Summary of Evaluation:

The proposal summary should include a strong supporting statement covering each point, in order, as outlined below:

Teaching:

1. Document *quantity* of teaching.

Refer to subjects taught rather than to course titles. In case of shared responsibility for courses, identify the proportion actually carried out by the candidate. Mention any teaching in other units of the university. Give the total number of hours of teaching per year. In documenting which persons the candidate has taught, include not only medical students but also other groups, such as house officers, fellows, graduate students, undergraduate students, students in other curricula, and participants in continuing education programs. Note guidance of graduate students and postdoctoral fellows, particularly if in the role of chair of a doctoral committee.

2. Document *quality* of teaching.

Include description of any evaluation measurements used to assess the candidate's teaching performance, originality, and significance. Excellence can be documented by peer evaluations, student evaluations (include results produced by any systematic rating), awards, and/or invitations to teach at other institutions. Documentation of quality of teaching is essential and should include mention of the standards of the institution at which the teaching was performed.

3. Document *leadership and creativity* in teaching.

This category might include responsibility for coordinating the teaching of others, such as serving as a course director for a major course; work on curriculum or course development; or innovations in teaching techniques and materials, particularly if this has resulted in peer-reviewed publications, books, book chapters, or audiovisual materials.

Research:

Describe and evaluate the quality, originality, and significance of the candidate's research. The statement should be as complete as can be made in one paragraph. Include a description of work in progress. Scholarly activity includes, but is not limited to, laboratory research, clinical research, innovative contributions to the delivery of health care, and creativity in continuing medical education. Consider the following:

1. Level of competence and mastery exhibited in the field of research.
2. Productivity in initiation and completion of research.
3. Publications, which should be viewed not as an end in themselves but as a practical way of documenting the nominee's contributions. Comment in particular on the candidate's five most significant publications since his or her last promotion. For a multiauthor publication, it is often difficult to evaluate the contribution that each author has made to the final product. Therefore, if the nominee is an intermediate author of important publications, it is crucial that the chair identify the nominee's role in and contributions to these projects.
4. Ability to compete successfully for investigator-initiated, peer-reviewed external research funding.
5. Scholarly activity with structure, focus, continuity, and innovation.
6. Evidence of national recognition, which might include, but is not limited to
 - Service on study sections and councils.
 - Membership on editorial boards of journals.
 - Serving as an officer of national professional organizations.

- Invitations to appear on national symposia, panels, or continuing-education programs.

Appointment recommendations must specifically highlight all current and past funding agencies and funding periods; dollar amounts may be included.

Recent and Significant Publications: List the five most significant publications of the candidate since his or her last promotion, in standard bibliographic format. Publications included among these five must be at least in press.

Service: In a paragraph, describe and evaluate the administrative and other service the candidate has performed for the department, within the Medical School, to other units within the University, to governmental and other outside groups, and to the profession as a whole.

- Effectiveness in attracting referrals
- Contribution to the prestige of the university, as evidenced by clinical publications, presentations, and memberships in regional and national societies.

Professional Work: Describe and evaluate the candidate's patient care responsibility. State where clinical activities take place (e.g., University Hospitals, Briarwood Health Center, Northville). Although excellent clinical care is the expected norm and truly outstanding performance may be difficult to document, the following factors are relevant:

- Area of unique clinical expertise
- Relationship to other clinical disciplines

Career Development Plan (for clinical lecturers and assistant professors): One of the measures of our success at an academic institution is our skill at developing the careers of our younger faculty members. Some explicit statement regarding a plan for career development should be included in each of the three-page summaries (Form B). This plan need not be verbose, but it should target some career goals and explain the tactics for achieving these goals. For example, mentorship pairings could be elucidated, academic support along with protected time could be outlined, space needs could be addressed and funds related to career development, research, travel and other forms of career support might be listed here. In the Instructional Track, career development is imperative to the success of the faculty member. This is the only track in which you can obtain tenure and it must be achieved within eight years of appointment to this track.

External Review: Summarize the comments of all external peer reviewers. To maintain the confidentiality of the external peer reviewers, use designations "Reviewer A," "Reviewer B," etc. In choosing quotations from letters, look for sentences that will be clear to readers who are not specialists in the field. Comparisons with other scholars in the field and estimated rankings, nationally and internationally, are especially helpful. Avoid references to the age of the candidate. Some *abbreviated* examples:

Reviewer A: "I can state with confidence that Dr. Healer would qualify for an equivalent position at <our institution>. . . . I have personally observed that she is a caring and gifted clinician and an enthusiastic, dedicated teacher for both medical students and house officers."

Reviewer B: "Dr. Healer has already produced some noteworthy research on liver function. . . . Having two articles in the *Journal* is an outstanding accomplishment and a harbinger of things to come."

Reviewer C: "In her cohort, Dr. Healer is in the top 10% of hepatologists nationwide. She has already demonstrated that she meets the requirements of the proposed position."

Summary of Recommendation: Summarize in one persuasive four- or five-line paragraph the grounds for this recommendation, describing clearly the candidate's role in the department. Please also indicate the candidate's potential for a successful career in academic medicine, as applicable.

3. Curriculum Vitae and Bibliography

The formats for the curriculum vitae and bibliography are in Appendix B, since these same formats are used for all faculty procedures. Note that information on date of birth, gender, social security number, marital status, or family members of the candidate should *not* appear on the curriculum vitae.

4. Reprints

For all appointments at the level of assistant professor, associate professor, or professor, submit copies of reprints of five of the nominees' most significant articles that demonstrate scholarly activity. These are to be selected by the candidate as emblematic of best work and typically are those produced since the previous appointment. (Copies of these same five articles should be sent to people from whom external letters of evaluation are solicited.)

5. Bibliographic Notes.

A single page document that explains for each paper, why the author selected the paper, what unique and seminal contributions might have been made, and exactly what constitutes the author's contribution to the paper (including an explanation of the authorship position). Each paper should be keyed to its place in CV. The citation survey may be useful to demonstrate impact of some or all of the candidate's papers. The number of citation hits can be mentioned **if** this information is thought to give good evidence of impact. The URL to check on citations is as follows:

<http://www.lib.umich.edu/taubman/>

- Click on Databases by Subject
- Under Medicine click on Science Citation Index (Web of Science)
- "Full Search/Science Citation Index Expanded/All Years/
Cited Ref Search/Author's Name/Lookup"

6. Letters of Evaluation

The recommendation packet for each nominee is to include complete current letters of evaluation. For senior-level appointments (associate professor or professor) a minimum of five external letters is required. Letters beyond the minimum are encouraged. For junior-level appointments (clinical lecturer or assistant professor), three to five letters are required, all of which may be internal. Letters beyond the minimum are encouraged.

External Evaluators

The five primary "arm's-length reviewers" excludes persons who have collaborated with candidate in the 10 years prior to the appointment effective date, present or former mentors/supervisors, and close personal friends. The reviewers should be individuals in the relevant field who can critique the candidate's work and scholarly contributions. There is little need to exceed the Provost's request for five letters, outside the safety factor of perhaps getting one or two additional letters in case a reviewer fails to meet our deadlines. All letters solicited and received must be included in the appointment packet. *Letters of evaluation must be signed; if received via an-email response, they must include the email address header.*

Internal Evaluators

Internal reviewers are considered to be any University of Michigan faculty member regardless of school, unit, or department of appointment. Letters from internal reviewers can be helpful because they are presumed to have a good sense of both the candidate and the work. If such letters are included, they will be considered additional to the minimum requirement of five external letters.

7. Letters Used to Solicit Evaluations

A new model solicitation letter is attached. The chair should elicit suggested names of reviewers from candidate but also include other appropriate reviewers in final solicitation list. The letter should stress that we seek a measured, unbiased evaluation. The quality of independent analysis has special implications for a tenure decision. Evaluators will be asked to describe, very specifically, impact in field or seminal contributions in cases of senior level faculty. The evaluators should receive the candidate's CV, the five papers, the bibliographic notes, and our descriptions of faculty tracks & ranks. FOIA considerations need to be mentioned. Several chairs send the external evaluators a note or card of thanks after receiving the evaluations, with a mention of the subsequent length of process and time of outcome. This costs little and garners good will from those asked to study and report on our faculty. *One copy of the solicitation letter for external reviewers must accompany the appointment packet.*

List of External Reviewers: This list must be in alphabetical order by last name of the reviewers. A short statement for each reviewer should include the reviewer's position, fields of expertise, important contributions and standing in the discipline, and appropriateness of that individual to provide an unbiased expert evaluation. Any close professional associations with the candidate such as dissertation committee, post-doc supervisor, co-author, etc. should be disclosed.

8. Teaching Evaluations

It is important to supply the Faculty Affairs Office with relevant teaching documentation, even for external candidates. Some primary unedited data on teaching should be indicated in the appointment packet. Typical examples of acceptable measures of teaching ability include summary sheets of systematic, standardized student surveys. Students may be undergraduates, graduate students, medical students, house officers, fellows, or continuing medical education participants. Be certain to mention the standards used, e.g., "scale of 1 to 5, with 5 being outstanding."

Educator's Portfolio. Our Department of Medical Education has created a two to four page Medical School model, which should include teaching activities; documentation of teaching awards or citations; summaries of comments or evaluations for seminars, conferences, lab supervision, etc.; and documentation of research concerning the educational process.

9. Appointment Activity Record (AAR) Materials for Appointments

The search process and AAR requirements for appointments are described in a separate section of this handbook. The original, completed AAR must accompany the appointment packet.

10. Financial and Personnel Materials as Appropriate

New Hire to University of Michigan: Appointment Request Form #36400, Supplemental Appointment Information #36100, Faculty Personnel Record Form, and the I-9 Employment Eligibility Form.

Non-U.S. citizens without a U.S. Social Security number must have a copy of the receipt showing that a number was applied for from the Social Security Administration.

New Appointment for Current University of Michigan Employee: the Job Data/Department Budget Earnings Change Submittal Form, reflecting change in title, FTR, short code funding, etc.

Non-U.S. citizens with an expired work authorization end date on the I-9 may need a new I-9.

Please double check figures and signatures to avoid delays in processing.

11. Final Form of the Accepted Offer Letter

The draft should have been previously approved by Faculty Affairs Office. A copy of the offer signed by the candidate as accepted must accompany the packet.

APPOINTMENT PACKET CHECKLIST
for Instructional (Tenure) Track Appointments

*Please forward materials to the Faculty Affairs Office as a complete packet.
Incomplete packets cannot be processed.*

- 1. **Transmittal letter from the department chair to the dean**
- 2. **Form B**
- 3. **Curriculum vitae in Medical School format**
- 4. **Five reprints (assistant professor level and above)—one copy of each**
- 5. **Bibliographic Notes**
- 6. **Letters of evaluation** (minimum of **five external** for associate professor or professor; three to five for assistant professor and clinical lecturer, all of which may be internal)
- 7. **Copy of letters used to solicit evaluations and list of external reviewers, that includes a brief statement regarding the qualifications of each reviewer.**
- 8. **Teaching evaluations/Educators Portfolio**
- 9. **Appointment Activity Record (AAR)**
- 10. **Financial and personnel materials as appropriate** -Appointment Request Form #36400, Supplemental Appointment Information #36100, Faculty Personnel Form, I-9 Form (or Job Data Change Submittal Form for current employees).
- 11. **Final form of offer letter** (draft should have been approved by Faculty Affairs)