

OVERVIEW OF THE FACULTY TRACKS

The Medical School utilizes three faculty tracks in addition to several supplemental appointments and we will describe each of these separately. Faculty members are expected to be role models of collegiality, integrity, scholarship, and excellence in their professions. Respect for diversity and engagement in the community of the university and the world at large are the norms. Affirmative Action Guidelines apply to all tracks.

- I. The ***Instructional Track*** was the original fulltime faculty track in the Medical School with ranks of assistant professor through professor (the instructor title is no longer utilized in this track). This track is governed by Regents' Bylaw 5.09 that mandates a tenure clock of eight years. This is the only faculty track for which tenure applies. The Instructional Track duties encompass; instruction of medical students, graduate students, residents, and other trainees; scholarly activity that is typically manifested by medical research; organizational contribution to the mission of the Medical School; and in many instances professional work that usually relates to health care.
- II. The ***Research Track*** began in 1974 and has two pathways; the Research Professor Track and the Research Scientist Track. The research investigator rank lies in the Research Scientist Track. Promotion beyond this rank ascends through the research professor or the research scientist pathway. As the titles indicate, Research Track faculty have a predominant commitment to the research arena. There is mandated ascension in rank (four years for the research investigator and six years for the research assistant professor and assistant research scientist), such ascension reflects achievements in research. Faculty members in the Research Professor Track are engaged in teaching missions within the context of research programs in the Medical School.
- III. The ***Clinical Track*** began in 1986 and actively contributes to the clinical and teaching missions of the Medical School, as well as scholarship and administration. The ranks are instructor through professor. Although there is no mandated ascension in rank, ascent to senior level titles requires scholarly engagement and productivity as well as excellence in health care and teaching.
- IV. The ***Supplemental Appointments and Other Titles*** are used for entry level faculty (lecturers/clinical lecturers) before assignment to the Instructional Track or Clinical Track or for special faculty appointments that fall outside the standard categories. Adjunct (or supplemental) faculty contribute to research and teaching missions of the Medical School while maintaining primary employment outside the Medical School. Visiting faculty spend specified lengths of time at the University of Michigan, usually before returning to their home institution.

I. EXPECTATIONS FOR EACH PROFESSORIAL RANK OF ALL TRACKS

Professor

1. National and international stature
2. Significant impact on their field
3. Recognition as a thought leader in relevant professional organizations
4. Ongoing commitment to Institutional missions and citizenship

Associate Professor

1. National or regional stature
2. Recognition by peers for significant scholarly contributions to their field
3. Emerging role as a thought leader in relevant professional organizations
4. Substantive participation in Institutional missions and citizenship

Assistant Professor

1. Local or regional stature
2. Shows progress toward becoming a scholarly leader in their field
3. Participation in relevant professional organizations
4. Contributions to Institutional missions

Instructor/Investigator

1. Training relevant to chosen career path
2. Declared willingness to fulfill responsibilities of academic position

Promotion to the next level is determined by the track specific metrics.

II. 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 lecturer/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.

III. RESEARCH PROFESSOR TRACK

A. Definition of the Research Professor Track

The Research Track in the Medical School consists of three ranks: Research Assistant Professor, Research Associate Professor, and Research Professor.

Research professor track faculty actively contribute to the Medical School research and teaching missions. Research professor track faculty appointments are intended for individuals whose primary activity is research; and who also teach and mentor within the context of research in the Medical School. Substantive curricular teaching by Research Professor Track faculty may be reflected in a fractional appointment in another track.

Research professor track faculty are voting members of the Executive Faculty and University Senate, have representation on the Executive Committee of the Medical School and University Senate Assembly, and are candidates for emeritus/emerita status. They do not qualify for sabbatical leave but may be granted leaves for educational or training purposes.

B. Ranks and Criteria for Appointment and Promotion of Research Professor Track Faculty

Research professor track faculty must have achieved or demonstrated the potential for autonomy as independent scientists or as part of a scientific team and excellence in initiation, direction and completion of research projects. A record of substantial teaching and mentoring within the context of one or more

research programs with postdoctoral fellows, junior research colleagues, or students at any level is an expectation in the Research Professor Track.

Research Assistant Professor

Candidates who are appointed or promoted to this rank must have an established record of publications in peer-reviewed journals in which they are a primary or senior author. Participation in national and international professional meetings is usually present. Candidates for Research Assistant Professor will have evidence of extramural funding (often mentored K awards and/or foundation grants); with a strong potential for independent “R01 NIH type” proposals. Contributions to education and Institutional citizenship are typical. Candidates at this rank typically have documented teaching and mentoring within the context of one or more research programs with postdoctoral fellows, junior research colleagues, or students at any level.

Appointments and promotions to research assistant professor require review by the Advisory Committee on Primary Research Appointments, Promotions, and Titles (APRAPT) and approval by the Medical School Executive Committee. The time-in-rank limit for the Research Assistant Professor is six years. (A review of progress will be conducted by the Medical School upon completion of the third year in rank).

Research Associate Professor

Appointment or promotion to this rank requires independent, distinguished, and productive research that has been consistent over a number of years and has gained national or international recognition. There should be clear evidence of obtaining significant independent external funding as principal investigator; past the level of initial research grants and fellowships. There should be a strong record of publication in peer-reviewed journals, including numerous first-author and/or senior-author publications and evidence that this accomplishment will continue. Many researchers appointed or promoted to research associate professor also have a substantial record of book chapters, abstracts, and textbook co-authorships.

A Research Associate Professor must have produced research that has achieved a national reputation. A candidate for this rank should have a record of invited national lectures, seminars, study sections, and *ad hoc* reviews. Candidates at this rank will have a record of substantial teaching and mentoring, both in quantity and quality, within the context of one or more research programs with postdoctoral fellows, junior research colleagues, or students at any level. Institutional citizenship is expected to achieve this rank but cannot substitute for distinguished research performance. Promotion to Research Associate Professor signals the passage into medical academia’s senior rank.

Appointments and promotions to Research Associate Professor require review by APRAPT; approval by the Medical School Executive Committee; endorsement by the Dean, the Executive Vice President for Medical Affairs, the Vice President for Research, the Provost and Executive Vice President for Academic

Affairs, and the President. There is no time-in-rank limit for this position. However, longevity in this rank is not sufficient evidence of accomplishment or merit for promotion.

Research Professor

Appointment and promotion to this highest rank in the Research Track requires an internationally recognized record of continued excellence in research. A Research Professor will have a substantial and continued record of first-author and/or senior-author publications in peer-reviewed journals. A Research Professor will have served as principal or co-principal investigator on center grants, major grants (e.g. NIH R01) or equivalent and demonstrate a maintained record of such funding. National and international lectures, seminars, study sections, and *ad hoc* reviews are expected of a Research Professor. Research Professors are expected to perform mentoring, supervising, and laboratory or research based teaching in a number of venues. Institutional citizenship is expected of a Research Professor.

Appointments and promotions to Research Professor require review by APRAPT; approval by the Medical School Executive Committee; endorsement by the Dean, the Executive Vice President for Medical Affairs, the Vice President for Research, the Provost and Executive Vice President for Academic Affairs, and the President.

IV. RESEARCH SCIENTIST TRACK

A. Definition of the Research Scientist Track

The Research Scientist Track in the Medical School consists of four ranks: Research Investigator, Assistant Research Scientist, Associate Research Scientist, and Research Scientist.

Research Scientist Track faculty actively contribute to the Medical School's research mission. Research Scientist Track faculty appointments are intended for individuals whose primary activity is research; either in a team science/co-investigator role or as an independent scientist.

Research Scientist Track faculty (except for research investigators) are voting members of the Executive Faculty and University Senate, have representation on the Executive Committee of the Medical School and University Senate Assembly, and are candidates for emeritus/emerita status. They do not qualify for sabbatical leave but may be granted leaves for educational or training purposes.

B. Ranks and Criteria for Appointment and Promotion of Research Scientist

Track Faculty

Research Scientist Track faculty are typically part of a scientific team or have achieved independence in a research program and have demonstrated excellence in initiation, direction and completion of research projects. A record of peer-reviewed publications is expected.

Research Investigator

A person appointed to the position of Research Investigator must hold a doctoral degree or its equivalent in professional and technical experience and typically has completed two or more years of postdoctoral work. The typical candidate for this position is someone whose scholarly reputation is equivalent to a person who has recently completed a Ph.D. or M.D. and/or postdoctoral training and demonstrates evidence of potential for scholarship. Candidates for research investigator are not expected to have a record of Institutional citizenship or teaching, although achievement in these areas is a welcome addition.

Research Investigator positions are intended for persons for whom a full-time career in research is expected. Appointments are recommended by the Department Chair or unit head, within the constraints of the University appointment procedures, and must be approved by the Dean's Office of Faculty Affairs. The time-in-rank limit for the Research Investigator is four years. The Research Investigator can be promoted to Assistant Research Scientist or to Research Assistant Professor on the Research Professor Track.

Assistant Research Scientist

Candidates who are appointed or promoted to this rank must have a record of publications in peer-reviewed journals. Participation at professional meetings is typically present. Candidates for Assistant Research Scientist should demonstrate potential for scholarly development, possibly as part of a larger research program.

Appointments and promotions to Assistant Research Scientist require review by the Advisory Committee on Primary Research, Appointments, Promotions, and Titles (APRAPT) and approval by the Medical School Executive Committee. The time-in-rank limit for the Assistant Research Scientist is six years. (A review of progress will be conducted by the Medical School upon completion of the third year in rank).

Associate Research Scientist

Appointment or promotion to this rank requires a growing national and/or international scholarly reputation. Independence in research is not required, but may be developing as represented by a substantial record of collaborative funding as a team scientist (usually as co-investigator). There should be a strong and sustained record of publication in peer-reviewed journals, including a number of first-author and/or senior-author publications and evidence that this accomplishment will continue. A candidate for this rank should have a record of participation in or presentation at professional meetings.

Promotion to Associate Research Scientist signals the passage into medical academia's senior rank.

Appointments and promotions to Associate Research Scientist require review by APRAPT; approval by the Medical School Executive Committee; endorsement by the Dean, the Executive Vice President for Medical Affairs, the Vice President for Research, the Provost and Executive Vice President for Academic Affairs, and the President. There is no time-in-rank limit for the Associate Research Scientist. However, longevity in this rank is not sufficient evidence of accomplishment or merit for promotion.

Research Scientist

Appointment and promotion to this highest rank in the Research Scientist Track requires an internationally recognized record of continued excellence in research productivity and contributions. A Research Scientist will have a sustained record of first-author and/or senior-author publications in peer-reviewed journals. A Research Scientist will have served as principal investigator on center grants, major grants (e.g. NIH R01) or equivalent. A significant and sustained record of participation in relevant professional meetings is expected of a Research Scientist.

Appointments and promotions to Research Scientist require review by APRAPT; approval by the Medical School Executive Committee; endorsement by the Dean, the Executive Vice President for Medical Affairs, the Vice President for Research, the Provost and Executive Vice President for Academic Affairs, and the President.

V. CLINICAL TRACK

A. Definition of the Clinical Track

The Clinical Track is designed for those pursuing a career that focuses mostly on clinical care and teaching with a variable degree of involvement in scholarship and organizational service in the Medical School. Although there is no mandated ascension in rank, scholarly engagement and ascent in rank are desirable. The University is the sole employer of Clinical Track faculty. Appointments are made for up to seven years and are renewable.

Faculty in the Clinical Track are voting members of the Executive Faculty of the Medical School and have representation on the Executive Committee of the Medical School. They are not members of the University Senate and do not participate in the election of representatives to the University Senate Assembly, and do not qualify for sabbatical leave although other types of leave may be granted for specific educational or training purposes. Clinical privileges in the units are granted only by the Medical Staff Executive Committee on Clinical Affairs (ECCA). Clinical Track faculty may be candidates for emeritus/emerita status.

B. Ranks in the Clinical Track

The Clinical Track includes four ranks: instructor, assistant professor, associate professor, and professor. The official title (Assistant Professor, Clinical Track) is used on all appointment, promotional, university human resources correspondence and the curriculum vitae. Routine correspondence (e.g., patient correspondence, scholarly work, etc.) can use shorter working title, e.g. Assistant Professor without identifying track. Time in rank alone is NOT sufficient for advancement in rank.

To obtain a faculty position in the clinical track for persons without an MD degree, a terminal degree in their field is expected.

Instructor

An instructor is fully trained to provide clinical care and is qualified to participate in educational programs at the University of Michigan Medical School. Appointment to this rank requires evidence that the individual has received an appropriate medical and graduate medical education and documentation of full clinical competence. Certification by the relevant professional board must be pending or completed, recognizing that exceptions for some internationally trained physicians may be granted by the Medical School. Evidence of competence in clinical and didactic teaching is expected. Letters from individuals with firsthand knowledge of the candidate are helpful in documenting the candidate's clinical competency, suitability for an academic medical environment, potential as a teacher and clinical role model, and potential for growth in clinical and scholarly areas. Publications in a candidate's professional field are encouraged but not required. Instructor appointments are made by the department chair or unit head, within the constraints of University appointment procedures, and must be approved by the Dean's Office of Faculty Affairs.

Assistant Professor

An Assistant Professor has excelled in clinical care and teaching, and these are the primary requirements for appointment or promotion to this rank.

1. Clinical work

Clinical excellence is documented by letters, which may be from local sources and must attest to the quality of clinical service. Certification by a relevant professional board or the equivalent is a usual expectation at this rank, although this qualification may be in progress at the time of appointment according to the requirements of the relevant professional board; exceptions for some internationally trained physicians may be granted by the Medical School.

2. Teaching

Quality of teaching is usually documented by objective teaching evaluations from the learner groups that are being taught (medical students, residents, fellows, undergraduate and graduate students as well as peer education), letters, and awards. If the candidate comes from an outside institution, letters describing the teaching efforts and quality are required.

3. Scholarship

An Assistant Professor should show progress toward becoming scholarly engaged in their field. On the Clinical Track, invited presentations as well as publication of articles in professional journals, chapters, reviews, abstracts, textbooks, videotapes, or other educational materials are evidence of scholarly contributions and are usual features of faculty at this rank.

4. *Service*

The candidate's organizational service, if present, to his or her department should be documented. For faculty members with predominantly clinical effort, several years of postgraduate clinical experience (post residency or post fellowship) combined with excellent teaching evaluations may qualify for promotion or appointment at this level, although some evidence of scholarly contribution is generally expected as noted above. New faculty members with evidence of distinct clinical expertise may also be appointed at this level.

Appointments and promotions to assistant professor require review by the Advisory Committee on Clinical Track Appointments and Promotions (CLINACAP) and approval by the Medical School Executive Committee.

Associate Professor

An Associate Professor has excelled in teaching and clinical work, and has achieved a regional or national reputation in his or her area of expertise. Peer-reviewed published scholarship and service to the institution, regional or national organizations is expected. The associate professor signals the passage into medical academia's senior rank. Individuals at this rank are expected to be role models of collegiality, integrity, scholarship, and excellence in their professions. Typically, a reputation of this sort is documented by letters from impartial external sources.

1. *Clinical work*

As an Associate Professor on the clinical track, development as a clinician has progressed to the point of establishing broad interdepartmental and regional recognition by professional colleagues for clinical expertise. This is usually documented in letters from colleagues and peers who attest to the clinical excellence. Appointment or promotion to this rank requires board certification or the equivalent (although occasional exceptions for some internationally trained physicians may be granted by the Medical School)

2. *Teaching*

Evidence of continued valuable contribution to medical education is expected. This may be through customary teaching situations (lectures, clinical instruction of students and residents, mentorship pairing, or scholarly work with trainees including formal evaluations to assess quality) or through the preparation of educational materials, including educational brochures and learning aids, textbook chapters, reviews, videotapes, web based learning, and other instructional interfaces. Teaching evaluations from all learner groups should be available. Administration and organization of teaching programs are also valued activities, and creativity in their execution can be documented by letters from appropriate knowledgeable faculty, students, and peers.

3. *Scholarship*

The candidate should have produced scholarship that influences knowledge and/or clinical care. Scholarship should include peer – reviewed papers, but may also include books, book or web based chapters, or some other mode of communicating results and ideas.

4. *Service*

Administration or leadership at the school level or at local, regional, or national organizations are a typical feature of this rank.

Appointments and promotions to associate professor require review by CLINACAP; approval by 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.

Professor

Appointment and promotion to this highest rank in the Clinical Track requires continued outstanding teaching, mentoring and clinical service. A national reputation is expected in scholarship, research or teaching.

A Clinical Professor has many products of their scholarly activity and will have a substantial record of first-author and/or senior-author publications in peer-reviewed journals that have resulted in broad peer recognition in their area of expertise. Service in regional or national specialty societies or boards is the norm. Institutional citizenship is expected of a Senior Clinical Faculty.

Appointments and promotions to professor require review by CLINACAP; approval by 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.

C. Criteria for Appointment and Promotion in the Clinical Track

The criteria for appointment and promotion in the Clinical Track will be applied with an emphasis on the impact of the nominee on his or her professional environment. This impact may be in the teaching arena, in professional activity usually manifested by clinical care, in institutional citizenship (organizational, administrative, community, or volunteerism for example), or in scholarship and research.

Longevity in a rank or position is not sufficient evidence of accomplishment or merit for promotion to a senior level. Although tenure is not a facet of Medical School Clinical Track, the University and the Medical School envision parallelism between the Clinical Track, the Instructional Track, and the Research Track, not only in accomplishments but also in the mechanics of appointment and promotion.

1. *Clinical Work*

A clinical faculty member has usually significant clinical responsibilities and a high level of clinical competency is expected in all ranks. Clinical excellence may be documented by letters from UM faculty and current or former colleagues as well as former trainees. Letters typically attest that the nominee is considered by the medical community as a clinical resource, is sought out for clinical expertise, and has a strong referral base. By their nature these letters will often come from sources that have personal knowledge of the individual's clinical skills and character. A clinician is a role model for medical students and must demonstrate outstanding compassionate patient care, collegiality, integrity, professional excellence, respect for diversity, engagement in community, and commitment to individual learning and scholarship.

2. *Teaching*

Successful teaching of medical students and residents is an important component of the Clinical Track. In the senior ranks, sophisticated and broad-based educational achievement is expected with the creation/ integration of new (clinical) knowledge and the teaching of other teachers.

Educational excellence may be demonstrated in a variety of settings. Some faculty will have assigned responsibility for teaching individual medical students and house officers one-on-one in the course of delivering clinical care or for organizing and leading clinical educational programs. The educational roles of other clinical faculty may involve a broad range of educational activities targeted at diverse audiences such as organizing or participating in local or regional CME activities or developing patient education tools, health profession education modules, or public health education programs. Objective evaluation of teaching from all learner groups should be available. In addition to the usual peer sources, letters from former trainees or from colleagues may document educational impact in special circumstances.

In the Adjunct Clinical Track, sufficient involvement in the educational program of the department is defined as a minimum of *50 hours of direct participation* in clinical education per year or an *equivalent contribution* to the academic mission of the Medical School, as documented by the department chair or unit leader.

3. *Scholarship*

Promotion to the senior levels of the Clinical Track requires scholarly engagement and productivity. Excellence in scholarship or academic achievement is evidenced by published peer-reviewed and other creative work, participation in grant-funded research, success in training graduate and professional students in scholarly methods, participation and leadership in professional associations, and in editing of professional journals. The ideal clinical professor is a scholar, engaged in life-long professional learning related to some clinical aspect of the human condition. Written evidence of scholarship may also include chapters, review articles and other creative ways to education. Individual scholarship is an essential part of the clinical professoriate, as it

professes its work through instruction and role modeling for the next generation of physicians.

4. *Service*

Many organizational service activities are expected of more senior faculty in the Clinical Track, such as participation in committee work, IRB, administrative tasks, counseling, and special training programs. Medical staff activities (such as leadership of or service on a quality assurance, risk management, or utilization review committee) also pertain to this type of service. In addition, the University expects many of its staff to render extramural services to relevant professional organizations other schools, industry, governmental agencies, and the public at large. Examples include:

- Memberships and offices held in professional societies.
- Continuing participation and leadership roles in medical service organizations (e.g., American Cancer Society, Planned Parenthood, American Red Cross).
- Public service activities that relate to the health of the general public.

Usually a promotion is based on a balance between all 4 areas discussed above. In exceptional circumstances a faculty member may have had a profound effect on his or her environment in the role of clinician, educator and/or with extensive administrative responsibilities. This may qualify the candidate for appointment or promotion to a senior level, with such extraordinary service offsetting to some degree the usual expectation of scholarly activity. In this case, letters of support must explain the individual's impact with great detail and specificity.

SUPPLEMENTAL APPOINTMENTS AND OTHER TITLES

A. Definitions of Supplemental and Other Titles

Supplemental Titles are used for entry level faculty before assignment to one of the three principal tracks (e.g. lecturers/clinical lecturers) or for special faculty appointments that fall outside the standard categories.

Clinical Lecturer

Some faculty members are appointed as clinical lecturers by the Medical School before moving into the Instructional Track or Clinical Track. Clinical lecturers have shown competence as teachers and hold a doctoral degree or its equivalent in professional and technical experience. An appointment as a clinical lecturer does *not* start the tenure clock for a faculty member. If a person is appointed clinical lecturer as the result of a normal, open, national search process that includes posting, advertising, and efforts to secure a diverse applicant pool, an Affirmative Action document is filed at the time of the initial appointment as clinical lecturer. Otherwise, the clinical lecturer must compete in a national search process in order to be recommended for appointment at a higher rank. Appointments of clinical lecturers are the prerogative of the department chair or unit head, within constraints of University appointment procedures, and must be approved by the Dean's Office

of Faculty Affairs. The appointments are for one year and are renewable, usually for up to four years.

Lecturer

The lecturer title pertains to those individuals whose sole responsibility is to teach in an academic setting. Appointments of lecturers are the prerogative of the department chair or unit head, within constraints of University appointment procedures, and must be approved by the Dean's Office of Faculty Affairs. The appointments are for one year and are renewable, usually for up to four years.

Visiting I

- This title may be used in conjunction with all instructional, clinical, and research titles.
- Appointees to this title *must* have employment responsibilities with another institution of higher education and are usually on leave from that institution. (e.g. A professor from UCSF who is here for a six month sabbatical).
- Appointees may be full-time, with a maximum length of appointment of one year or less.
- Written requests to extend appointments beyond one year may be granted under unusual circumstances. Such requests must specify what contributions the visiting faculty member has made, why an extension is needed, and what provisions are being made for allocation of space and for payment of any salary.

Adjunct

According to the Regents' Bylaws (Sec. 5.22 Adjunct Professorships and Sec. 5.23 Clinical Instructional Staff):

- Require annual renewal.
- Are part-time (less than 50%).
- Are used for the Instructional Track, Clinical Track, or Research Track.
- May be compensated or uncompensated.

Further Special Notes on Adjunct Faculty

Increased collaboration between the University and industry has resulted in requests for faculty appointments in the Medical School from qualified employees of industrial companies. These appointments should enhance the Medical School's instructional programs and foster research collaboration with industry. Adjunct appointments are appropriate for individuals with special talents to provide this industrial interface. People whose primary employer is a for-profit organization should be appointed only as adjunct faculty.

In 1990, the Medical School Executive Committee compiled procedures, privileges, and restrictions for adjunct faculty whose primary employment is with an industrial organization. At the time of appointment, there must be full disclosure of all details of employment status so that any potential for conflict of interest can be prospectively addressed. Ownership of intellectual property must be thoroughly disclosed: the nominating chair should define claims to patent ownership and royalties and should identify eligibility to publish and present findings.

Appointment of adjunct faculty as principal investigators on University extramural grants will not occur under ordinary circumstances. Any University space, for example, must be requested by the department chair of the prospective adjunct faculty and must be used primarily for the academic benefit of the department and the Medical School.

Adjunct faculty are generally *not* eligible for clinical privileges at the UMHS or VAMC. Adjunct faculty may be involved in medical education, graduate medical education, or clinical research in the clinical setting at UMHS, but they should *not* be the attending of record or responsible for the delivery of patient care.

Adjunct faculty are not voting members of the Executive Faculty of the Medical School, may not serve on the Executive Committee of the Medical School, are not members of the University Senate, nor participate in the election of representatives to the University Senate Assembly.

Adjunct Instructional Track

Adjunct Instructional Faculty appointments are used to supplement teaching in a specific field; to facilitate research collaboration with individuals in other units of the School or University, with individuals at other educational or health care institutions, or with scientists employed by industry; or to permit faculty or trainees who are leaving the University to complete ongoing educational or research responsibilities.

Adjunct Research Track

Adjunct Research Faculty appointments are made when an individual's primary employment responsibilities lie outside the University. This appointment indicates that the individual is working for a limited portion of his/her time (part-time) on a research project housed in the Medical School. Adjunct appointments may be made at any research faculty rank, but must be consistent with the individual's professional qualifications as specified in this document.

Adjunct Clinical Track

Adjunct Clinical Track faculty are usually in the private practice of medicine outside the University of Michigan; in other words, the University is not the sole employer. These appointments are at 0% to 49% effort, are for no longer than one year, are renewable, and are without tenure. Ranks in the Adjunct Clinical Track follow the same guidelines mentioned above and must fulfill the 50 hours of teaching requirement per year. Even though appointments in this track are not mandated to follow the Affirmative Action procedures of the University, it is the policy of the Medical School to seek as diverse a group of people as possible as teachers and role models for students.

Adjunct Clinical Associate

A non-faculty title given to a health care provider under special circumstances by the Medical School to provide health care in university outpatient settings. Adjunct Clinical Associates are usually community physicians.

Clinical Associate

A non-faculty title given to a health care provider under special circumstances by the Medical School to provide health care in university outpatient settings. Clinical Associates are employees of the University of Michigan.

Emeritus

An honorary title received upon retirement (assistant professor, associate professor, professor, research professor, associate professor-Clinical Track and professor-Clinical Track) given by the Regents on recommendation of the School. An “active status” appointment may be requested for retirees who wish to continue their clinical, research, or service activities to the institution. An active appointment is necessary if the retiree requires clinical privileges, receives payment for clinical services or teaching, or continues to be formally involved in research grant activity.

B. Supplemental Appointments

Supplemental appointments are made under the same criteria as appointments in the regular tracks to which they correspond. For example, the criteria for a visiting or adjunct associate professor are the same as for an associate professor in the Instructional Track: the recommendation packet has the same documents and the approval procedure is the same. ACAPT, APRAPT, or CLINACAP has jurisdiction according to whether the supplemental appointment is an instructional, research, or clinical appointment. No Appointment Activity Record (AAR) is required for any supplemental appointment, but departments are urged to be aware of the need for diversity among UMHS faculty.

C. Supplemental Promotions

Visiting faculty, appointed for a year or less, are normally not involved in any promotion considerations. The appointment of each adjunct faculty member, however, is subject to annual review and renewal. A request for promotion to a higher level may be made, with documentation, as would be required in the corresponding regular track. An adjunct associate professor, for instance, must meet the requirements of an Instructional Track associate professor promotion.

D. Joint Appointment Criteria

Joint appointments are implemented in a secondary or tertiary department for instances of substantial and ongoing academic or clinical collaboration beyond routine collegial interactions. The primary or home department usually is responsible for the paperwork. Joint appointments are extraordinary, they are not used for perfunctory title dissemination or routine recruitment enticements. They may be funded or unfunded (dry). Joint appointments, without tenure, can be initially requested for up to three years, and can be administratively renewed for additional years at the request of the department. A Memorandum of Understanding (MOU) should be generated for all new joint appointments at the assistant/associate and full professor level for tenure track/tenured instructional faculty (excluding dry (0%) appointments.

GLOSSARY

Adjunct

Adjunct appointments are used to supplement teaching in a specific field; to facilitate research collaboration with individuals in other units of the School or University, with individuals at other educational or health care institutions, or with scientists employed by industry; or to permit faculty or trainees who are leaving the University to complete ongoing educational or research responsibilities. Adjunct appointments are part-time appointments (less than 50%).

Adjunct Clinical Track

Adjunct Clinical Track faculty are usually in the private practice of medicine outside the University of Michigan; in other words, the University is not the sole employer. These appointments are at 49% or less. Ranks in the Adjunct Clinical Track follow the same guidelines as the Clinical Track below.

Clinical Associate

A non-faculty title given to a health care provider under special circumstances by the Medical School to provide health care in university outpatient settings.

Clinical Care

The provision of health services and medical care to patients or experimental subjects.

Clinical Lecturer

A preliminary entry level position to the faculty ladder.

Clinical Track

Supports the clinical and teaching missions of the Medical School. There are four faculty ranks within this track: instructor, assistant professor, associate professor, and professor.

Emeritus/Emerita

An honorary title after retirement (assistant professor, associate professor, professor, research professor, associate professor-Clinical Track and professor-Clinical Track), given by the Regents on recommendation of School.

Instructional Track

Members of this track are expected to make contributions to the Medical School in the areas of scholarly research, teaching, organizational service, and clinical care as it pertains to professional fields of study. There are three faculty ranks within this track: assistant professor, associate professor, and professor.

Joint Appointments

Are implemented in a secondary or tertiary department for instances of substantial and ongoing academic or clinical collaboration, beyond routine collegial interactions.

Lecturer

A preliminary entry level position to the faculty ladder. This title is used for individuals who have primarily didactic teaching roles.

Research Track

Supports the Medical School research and teaching missions. There are two pathways in this track. Research Professor Track, which consists of three ranks (research assistant professor, research associate professor, and research professor) and Research Scientist Track which consist of four ranks: (research investigator, assistant research scientist, associate research scientist and research scientist).

Scholarship

1. The methods discipline, and attainments of specialists in branches of knowledge.
2. Systematized knowledge resulting from study and research in a particular field.

Supplemental Titles

Special faculty appointments that fall outside the standard categories (e.g. visiting/adjunct).

Tenure

May be granted by the Regents to Instructional Track faculty at the ranks of Associate Professor or Professor.

Tenure Probationary Period (Tenure Clock)

The maximum probationary period of Instructional Track faculty consists of service with the University for a total of eight years in the ranks of assistant professor or higher.

Visiting I

Appointees to this title *must* have employment responsibilities with another institution of higher education and are usually on leave from that institution.