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### Section 8: Expectations for Promotion Overview

#### Tenure Track Promotions

- **Promotion to Associate Professor with Tenure**
- **Award of Tenure ONLY**
- **Promotion to Professor with Tenure**
  - For Clinicians
  - For Educators
  - For Researchers

#### Promotions on Non-Tenure Tracks

- **Clinical Scholar Track**
  - Clinician-Educator Path Promotion to Associate Professor
  - Clinician-Educator Path Promotion to Professor
  - Clinician-Investigator Path Promotion to Associate Professor
  - Clinician-Investigator Path Promotion to Professor
- **Clinical Track**
  - Promotion to Clinical Associate Professor
  - Promotion to Clinical Professor
- **Educator Track**
  - Promotion to Education Associate Professor
  - Promotion to Education Professor
- **Research Track**
  - Promotion to Research Associate Professor
  - Promotion to Research Professor

### Section 9: Promotions for Part Time (PT) Faculty (appointments .5 FTE or less)

- **Part-Time Clinical Track**
  - Promotion to PT Clinical Associate Professor
  - Promotion to PT Clinical Professor
- **Part-Time Educator Track**
  - Promotion to PT Education Associate Professor
  - Promotion to PT Education Professor
- **Part-Time Research Track**
  - Promotion to PT Research Associate Professor
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### Section 10: Veterans Administration Medical Centers (VA) Affiliated Faculty

- **Definitions for VA Affiliated Faculty Appointments**
- **Promotion of VA Affiliated Faculty**
  - **Clinical Track VA**
    - Promotion to Clinical Associate Professor
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  - **Educator Track VA**
    - Promotion to Education Associate Professor
    - Promotion to Education Professor
  - **Research Track VA**
    - Promotion to Research Associate Professor
    - Promotion to Research Professor

### Section 10: Annual Timeline for Process of Academic Promotion & Bibliography
GUIDELINES FOR ACADEMIC PROMOTION AND THE AWARD OF TENURE

The University of Kansas policies and guidelines for academic promotion and award of tenure are described in the Handbook for Faculty and Unclassified Staff. The Handbook requires that schools and departments develop specific written guidelines within the general University framework such that a clear, consistent and equitable system for academic promotion and the award of tenure is available for faculty members in the School of Medicine. The following document describes the process and guidelines for academic promotion and award of tenure in the School of Medicine. This document describes a process of academic promotion designed both to reward individual achievement and to enhance the reputation of the School of Medicine as an academic institution.

SECTION 1: FACULTY APPOINTMENTS IN THE SCHOOL OF MEDICINE

The School of Medicine has academic ranks, titles, and tracks as defined in the Handbook.

**Faculty Ranks** are *instructor, assistant professor, associate professor, and professor*. The title of *teaching associate* is given to faculty members who do not hold terminal degrees and who participate in teaching under supervision. Teaching associates may be full or part-time, and do not participate in academic promotion.

**Career Tracks.** The School of Medicine recognizes different academic tracks to accommodate appropriate career paths for our large and diverse faculty. Both **Tenure** and **Non-Tenure Tracks** are available for faculty members of the School of Medicine. The Non-Tenure Tracks are the **Clinical**, the **Clinical and Research Tracks**.

**The Tenure Track** is a full-time appointment incorporating a probationary period governed by University regulations. Tenure Track appointments carry unmodified titles.

**The Clinical Scholar Track** was introduced to provide an appropriate promotion pathway for full-time faculty members who are heavily involved in clinical service, education, and related scholarship. This track is a full-time appointment for a specified term. The Clinical Scholar Track is specific to the Medical Center and is designed primarily for clinical faculty members. The Clinical Scholar Track has two ladders or career paths: Clinician-Educator and Clinician-Investigator. Significant contributions in professional and academic service are required for both paths.

The initial appointment to the Clinical Scholar Track may be a rolling or fixed term (1-3 year) contract. Consecutive fixed term contracts may not be continued for more than four years in total duration. At the discretion of the School of Medicine, the initial or subsequent appointment may be a 3-year rolling contract, subject to satisfactory annual review. Clinical Scholar Track appointments carry unmodified titles. Board of Regents’ policy provides for a one-time transfer to or from the Tenure Track. A transfer from tenure track to the Clinical Scholar Track must occur before the start of the 6th year of the probationary period.

**The Clinical Track** emphasizes professional service in clinical settings. Clinical Track appointments are one-year appointments, renewable annually. These appointments carry modified titles and are available for full, part-time and volunteer appointments.

**The Educator Track** is intended for part-time or full-time faculty members whose primary contributions are to teaching and/or administration related to medical or healthcare education. Faculty members must devote at
least 70% of their effort to teaching to be appointed to the Educator track. While the defining feature of this track is a requirement for making contributions to education, candidates are expected to contribute to scholarship, particularly the scholarship of healthcare/medical/nursing/health professions education, and service. Appointment as an Assistant Professor on this track will usually require a terminal degree.

Educator track appointments are term appointments of one to three years, with successive appointment contingent on new offers. Educator track appointments carry modified titles; full time faculty may carry an unmodified title at the discretion of the Department Chair. Faculty members can transfer from Tenure Track to the Educator Track as long as the transfer occurs before the 6th (tenure-decision year). Other transfers require approval of the Department Chair and the Dean of the appropriate school.

The Research Track emphasizes the conduct of research in all relevant areas including basic sciences, clinical investigations, health policy, health care outcomes, or history and philosophy of medicine. Research track appointments are one-year appointments, renewable annually. These appointments carry modified titles and are available for full, part-time and volunteer appointments.

The Tenure and Clinical Scholar Tracks are restricted to full-time appointments. Part-time and volunteer appointments are only available on the research, clinical, and educator tracks. While appointments are strictly defined by the School of Medicine as full-time only when the entire professional effort, equivalent to 1.0 Full Time Equivalent (FTE) takes place in facilities of the School of Medicine (all campuses and sites), for the purposes of academic promotion and tenure, faculty members with academic appointments of 0.5 FTE or less are considered under part-time guidelines. This definition has no bearing on tenure and tenure guidelines and is only used for purposes of promotion criteria for non-Tenure Tracks. Specific criteria for academic promotion have been developed for part-time faculty members and are included in this document (see section 9). Criteria for the promotion of volunteer faculty members are addressed in the document: “Manual for the Volunteer Faculty of the University of Kansas School of Medicine.”
SECTION 2: INITIAL ACADEMIC APPOINTMENT

Selection of Track and Rank
The track and rank of initial appointment must be appropriate to the role proposed for the individual faculty member, his/her experience, training, and individual career expectations, and the needs and resources of the School. The appointment must be a carefully considered decision involving the faculty candidate, departmental chair (or equivalent unit leader), and Executive Dean. Appointments on the Wichita campus involve the candidate, departmental chair, and Wichita Dean and require consultation with the Executive Dean. Candidates should be provided with written materials and participate in detailed discussions concerning the available tracks and ranks prior to formally accepting an appointment.

New appointments at the level of associate professor or professor require review by the departmental Promotion and Tenure Committee and that recommendation must be forwarded to the appropriate campus committee of the School of Medicine Promotion and Tenure Committee (Faculty Bylaws, 1997). Recommendations of the School of Medicine Promotion and Tenure Committee are forwarded to the Dean (Wichita) or Executive Dean (Kansas City).

Appointments at the level of professor must be reviewed by the joint School of Medicine Promotion and Tenure Committee and that recommendation is forwarded to the Executive Dean. From the Dean’s Office appointments are forwarded to the Office of the Vice Chancellor for Academic Affairs. Applicants and chairs must be aware of these requirements. No appointment can be finalized until administrative approval has been obtained from the Vice Chancellor for Academic Affairs.

Documentation of Expectations and Allocation of Time and Resources
The expectations set for the faculty member and his/her allocation of effort must be specified in writing at the time of appointment. Appointments must provide clarity of roles and expectations and a realistic allocation of time, faculty development opportunities, and resources to achieve appropriate career goals. The time and resources specified for research/scholarly activity and teaching are crucial. The specific commitments to each individual should reflect the track and responsibilities but all faculty members should have sufficient time, resources and faculty development opportunities to teach and pursue scholarly activities appropriate to their faculty ranks.

The initial appointment documentation forms the basis for the system of regular faculty review and academic promotion discussed below. Monitoring of the commitment of time and resources for scholarly and educational activities appropriate to the academic track is one important component of the regular review, and this information must be made available to the Executive Dean or Dean of the Wichita campus.

Faculty members appointed to the Tenure Track will be provided with written information about the probationary period, including the timing of their Mid-Cycle Comprehensive Review evaluation, the specific date by which application for tenure must be made, and the deadline for transfer to the Clinician Scholar Track (if appropriate) as part of their offer letters.

Faculty members appointed with fixed or rolling contracts will receive specific information concerning the dates and procedures for renewing or terminating those contracts in their offer letters.
Credit for Time at Other Institutions
Faculty recruited to Tenure Track positions from other institutions may request credit for time accumulated at previous institution(s). Credit for years in grade at another institution must be negotiated by the faculty member, department chair (or equivalent unit leader) and Executive Dean with input from the Promotion and Tenure Committee. The Wichita Dean is involved in decisions concerning faculty based on the Wichita campus. The decision must be documented as part of the formal appointment letters and must be consistent with Board of Regents’ tenure policies (see Handbook, Section III). Credited years concomitantly reduce the probationary period for achieving tenure. The specific date by which tenure must be awarded, the timing of the mid-cycle review or transfer to the Clinical Scholar Track (if appropriate) must be specified in the offer letter. Reminders of those critical dates will be sent to faculty members and their Department Chairs by both the Office of Professional Development and Faculty Affairs in the School of Medicine and the Office of the Vice Chancellor for Academic Affairs.
The only strict time criterion in the academic promotion system of the School of Medicine is the probationary period for the award of tenure (see below). Although the Handbook references customary time spans of at least five to six years between promotions (p.70), it stresses that promotions depend on attainment of specific criteria, not on time in grade. Promotions must be earned through academic achievements and are never automatically awarded. There is therefore, no standard time between promotion from Associate Professor to Professor on Tenure Track and for all promotions on the other academic tracks. Not all faculty members will advance to the rank of professor. As stated in the Handbook (p.67), promotion is awarded primarily upon evidence of achievement since the last promotion (or since joining the faculty for a first promotion). With the single exception of the application for tenure, faculty members are advised to delay application for academic promotion until they can document achievement of all applicable criteria. Conversely, an exceptionally early application for promotion must unequivocally document attainment of all applicable criteria – an achievement that requires exceptional merit given a relatively short period of time to complete demanding requirements. For all tracks, the promotion to associate professor is based on evidence of a successfully developing career and documentation of regional recognition. Promotion to professor depends on documentation of a successful career and national or international recognition. The process for academic promotion and/or the award of tenure is described in Section 6, and criteria for specific promotions is described in Section 8.

Non-Tenure Tracks (Clinical Scholar, Clinical, Educator, Research) Timing
All faculty members, including volunteers, may apply for academic promotion using the guidelines described in the following sections. No time restrictions apply to promotions in the Non-Tenure Tracks and it is not expected that all faculty members will advance to the rank of professor. Individuals should apply for promotion when they can document the appropriate achievements (see sections 6-8 in this document).

Tenure Track Timing
The award of tenure is usually linked to promotion to associate professor on the Tenure Track. By University regulations, faculty members appointed to the Tenure Track have a probationary period of seven years. Because of the timing of the promotion and tenure process and the requirement to provide a letter of non-reappointment at least twelve months prior to the expiration of appointments, Tenure Track faculty members must apply for tenure during or prior to the Fall of their sixth year. Reapplication or a first application for tenure in the 7th year can occur only in cases where the departmental promotion and tenure committee provides a letter and vote in support of the application. Regardless of the actual start date, July first of the calendar year of appointment is taken as official date of appointment. The probationary period therefore begins on July 1 of the calendar year of appointment to the faculty. As applications for promotion and tenure have a September deadline, tenure-track faculty without credit for time at other institutions must apply for tenure approximately five years and two months after initial appointment. (E.g. all 2009 appointees must apply by September 2014 for a decision to be completed in the Spring of 2015.) Adjustments to the length of the probationary period and latest date of application are made on an individual basis for faculty members appointed with credit for time at previous institutions.

The Handbook specifies that “under unexpected, special, and extenuating circumstances prior to the sixth year of service” an extension of the probationary period may be granted for up to one year. This extension is intended to accommodate unpredictable events that disrupt the documented progression of a faculty member towards achievement of tenure. The process requires that a special petition be made by the Executive Dean of the School of Medicine to the Chief Academic Officer of the University and is not undertaken except in cases of unanticipated hardship.
The seven-year probationary period for tenure has been established at the University of Kansas and many other universities for decades. The extension described in the preceding paragraph is one means of extending the probationary period (“stopping the tenure clock”). In 2006, the Kansas Board of regents approved a new policy for tenure clock extension related to the birth or adoption of a child.

“If an untenured faculty member becomes a parent through birth, adoptive placement, or adoption of a child under the age of 5 prior to May 1st of the fifth year of the probationary period, that faculty member, upon notification to the institution’s chief academic officer, shall be granted a one-year delay of the tenure review. Notification must occur within 90 days of the birth, adoptive placement, or adoption. Faculty members retain the right to opt out of this interruption policy.” (Adopted by KBOR on 3-20-06, see page 46 of KBOR policy manual.)

The two above mentioned processes are the only means of extending the probationary period without taking a leave of absence. A leave of absence is granted only when judged by the Chancellor to be in the best interest of the Institution.

The strict time realities for Tenure Track faculty and the necessity of compliance with regulations of the University and Board of Regents emphasize the importance of decisions concerning selection of track, transfer of credit-years, and realistic allocation of responsibilities, time and resources. They also underscore the significance of constructive regular review and the mandatory Mid-Cycle Comprehensive Review evaluation for Tenure Track faculty members. Academic promotion should mark stages of an orderly, sustained academic career planned in full appreciation of the requirements for promotion at each stage of development.
Regular reviews of the progress toward academic promotion are conducted at the departmental level. The annual assessment of all faculty members helps to guide and document individual career development. As described in the University Handbook and School of Medicine policy, the Annual Faculty Assessment is the formal review that provides regular assessment of achievements, establishment of objectives, and monitoring of progress. In conjunction with the requirements of the academic promotion and tenure system, the annual review process ensures that the objectives and academic activities for each year cumulatively achieve longer-term academic goals. In addition, the continuous documentation of activities and achievements encouraged by the review process enables faculty members to prepare more complete and meaningful applications for academic promotion and/or award of tenure.

Mid-Cycle Comprehensive Review
In addition to regular annual review, all Tenure Track faculty members are required to complete a formal Mid-Cycle Comprehensive Review evaluation. This is a mandatory review of progress towards tenure and is conducted during the third year of appointment. The timing of the Mid-Cycle Comprehensive Review is adjusted as appropriate for individuals who have received credit for years in grade prior to the current appointment and the date of that review must be specified in the offer letter and letter of appointment to the faculty. For individuals receiving an extension to the tenure clock, the Mid-Cycle Comprehensive Review should be conducted as designated in the offer letter.

The purpose of the Mid-Cycle Comprehensive Review is to provide constructive recommendations to the faculty member and department chair (or equivalent unit director) regarding the anticipated application for tenure. Mid-Cycle Comprehensive Review is not required of Non-Tenure Track faculty members.

The Mid-Cycle Comprehensive Review is conducted by the Departmental Promotion and Tenure Committee. The outcome is forwarded to the Executive Dean (or Dean of the Wichita Campus) for inclusion in the subsequent application for tenure. The review is based upon the following documents:

- the required KU School of Medicine Curriculum Vitae (CV) used in academic promotion
- a written summary evaluation by the department chair
- copies of each annual review
- other appropriate evidence of progress towards tenure and academic promotion.

The conclusions of the Mid-Cycle Comprehensive Review must be provided in writing to the faculty member being reviewed and the contents reviewed in person with the Department Chair. It also must be included in any subsequent application for promotion and/or tenure.

The format and timing of the Mid-Cycle Comprehensive Review enable Tenure Track faculty members to become familiar with the documentation and process required for award of tenure and to identify potential areas of concern. The recommendations should be used by the faculty member and chair as a basis for planning the activities, faculty development and mentoring appropriate to the remainder of the probationary period. The Mid-Cycle Comprehensive Review may also stimulate consideration of change in academic track. As the Mid-Cycle Comprehensive Review is conducted independently of the School of Medicine Promotion and Tenure Committee, there is no implied guarantee that following these recommendations will assure a successful application for promotion and tenure.
SECTION 5: CHANGE IN ACADEMIC TRACK

Transfer between tracks recognizes a serious change in career intent. It is designed for faculty members whose interests, expertise, and achievements suggest that their career progress would be better served by a track different from that of their current appointment. While the ability to transfer between tracks recognizes that professional interests and activities change, particularly in the rapidly evolving environment of academic medicine and the related sciences, **Board of Regents and University regulations strictly control the ability to transfer between Tenure and Non-Tenure Tracks.** A change in academic track requires the support of the faculty member, recommendation of the department chair, concurrence of the Executive Dean (also of the Wichita Dean for Wichita based faculty members) and approval by the Vice Chancellor for Academic Affairs. Change should only be undertaken by mutual agreement between the faculty member, departmental chair, and others and after serious consideration of all implications. Requests for change must be supported by documentation of the rationale for the transfer, including cumulative annual reviews documenting the trend in career development.

Transfers from the Tenure Track to the Clinical Scholar Track must be completed prior to the end of the fifth year of the probationary period. **Transfer to the Clinical Scholar Track is not permitted following an unsuccessful application for award of tenure at the end of the probationary period.** No time limitations have been placed on transfer from Tenure Track to Clinical or Research Tracks. Faculty members who have achieved tenure may also request transfer to a Non-Tenure Track, but must formally resign tenure if the transfer is granted. A faculty member may not return to a Tenure Track position following a transfer to any Non-Tenure Track.

Faculty in Non-Tenure Tracks (Clinical Scholar, Clinical, or Research) whose career paths change significantly, such that their development is more appropriately served by a Tenure Track appointment, may apply for a Tenure Track position. This change must be made only after thorough consideration of the implications. The application for change must be supported by documentation of the change in career trajectory of the individual and requires extensive consultation and a process of approvals identical to that described above. Change to a Tenure Track position must only occur when there is reasonable expectation of eventual acquisition of tenure and academic promotion on the Tenure Track. Faculty members previously on Non-Tenure Tracks become subject to the expectations of the Tenure Track, including the probationary period. Time in Non-Tenure Tracks does not count toward the probationary period. Rank in the Tenure Track is established at the time of appointment to the Tenure Track and may not necessarily be the same as previously held on the Non-Tenure Track. The request for change in tracks requires the approval of the departmental chair, Executive Dean (and Wichita Dean for Wichita-based faculty members) and Vice Chancellor for Academic Affairs.
The academic promotion and tenure process depends upon the faculty member’s ability to document appropriate achievements in the classical three areas of academic life (Teaching, Scholarship, and Service): specifically to document that they have met or exceeded the guidelines for the relevant promotion. The responsibility to prove that academic promotion and/or tenure has been earned rests with the applicant. This documentation must be clear and unequivocal as the application is scrutinized at several levels of the School of Medicine and the University to verify that criteria have been met.

Faculty members must present documentation in the required School of Medicine format. The required documentation consists of:

- nomination form
- curriculum vitae in required format
- assessment from Departmental Promotion and Tenure Committee
- assessment from Department Chair
- input from external referees
- other supporting evidence

Complete instructions for applicants are available online on the APT website.

Applications are first reviewed by the Departmental Promotion and Tenure Committee in the department of the applicant’s primary appointment. These department reviews should occur no later than August 1st. A letter summarizing the recommendation of this committee forms one of the six required components of the final application materials. The Department Chair provides an independent assessment in his/her recommendation letter.

Completed applications are provided to the Office of the Dean on each campus. The deadline for submission of complete applications is September 1st. When September 1st falls on a Saturday or Sunday, the deadline is on the following Monday at 5 p.m. The next stage of the promotion process is review is by the campus Promotion and Tenure Committee followed by review by the joint School of Medicine Promotion and Tenure Committee.

Following thorough and confidential review by the campus and School committees, recommendations for academic promotion and/or award of tenure are made to the Executive Dean in January of each year by the joint School of Medicine Promotion and Tenure Committee, which includes members of both campus Promotion and Tenure Committees. For Wichita-based faculty members, recommendations are made to the Wichita Dean who forwards his/her recommendations to the Executive Dean for his/her decision. The final award of promotion and/or tenure requires scrutiny at several levels within the University, culminating in action by the Chancellor. This highly structured, careful, and deliberate process is necessary because academic promotion not only confers significant prestige and recognition on individuals; it reflects the academic values of the Institution. The process is indeed “essential to the morale and luster of our faculty and University” (Handbook).
The increasing diversity of the faculty and the size and complexity of the School of Medicine require that the Handbook descriptions of each of the three academic domains (Teaching, Scholarship, and Service) be more extensively described as they apply to the School of Medicine. The following section provides extensive examples of the activities that could be included in an application. Faculty members are not expected to do all of the activities listed – they are provided as examples of the activities that could be undertaken within each domain by faculty members fulfilling different roles.

Within each domain, applicants must provide both qualitative and quantitative evidence that the requirements for the requested promotion have been met or exceeded. Wherever possible, objective evidence of outcomes should be provided rather than mere lists of how time is allocated and subjective impressions of achievements. Similarly, assessments by external referees, department chair, departmental promotion and tenure committee and others should include objective evidence of the applicant’s achievements in addition to the subjective assessment of suitability for the requested promotion or award of tenure. Instructions for applicants are available online on the APT website.

Teaching
Examples of teaching activities include but are not limited to:
- instructing medical students, residents, fellows, undergraduate students, graduate students, and postgraduate trainees in classroom, laboratory, patient care or other environments
- advising, counseling, evaluating, and recruiting students, residents, or fellows
- presenting or leading continuing professional education programs
- presenting or leading faculty development activities
- instructing learners of other schools and institutions (must be professionally related and within University policies for conflict of interest and consulting)
- developing curricula, organizing new teaching programs, substantially improving established courses, or integrating teaching activities within or between departments
- developing or facilitating improvements in teaching techniques and methods of evaluation
- developing or substantially improving teaching resources such as syllabi, manuals, testing procedures, electronic resources, and equipment, including the preparation and evaluation of standardized patients and similar resources.

The standard curriculum vitae form requests quantitative information (such as specific courses taught, numbers and types of learners, length and format of instruction). Applicants should ensure that all relevant teaching activities are documented. If necessary, the significance of specific teaching activities should be clarified as reviewers may not be familiar with the specific discipline or teaching program.

Measures of the quality of teaching must be provided. As described in the Handbook, departments are expected to maintain systematic, anonymous, and standardized systems of teaching evaluation incorporating input from learners and peers. Although these systems may be primarily designed to provide feedback and identify areas for faculty development, they also provide data that may be highly appropriate to document the quality of teaching.
Measures of the quality of teaching include but are not limited to:

- evidence of the effectiveness of teaching (e.g. objective evidence of learner gains in knowledge, skills and/or other outcome measures)
- evaluation by learners
- evaluation by colleagues (peers or supervisors)
- teaching awards or other formal recognition of teaching excellence
- performance of learners on standardized exams such as USMLE Step exams and NBME Subject (Shelf) exams
- learner and/or peer evaluation of educational materials, course management or other educational activities
- adoption of teaching methods or materials by other courses or institutions
- selection by other faculty members as a mentor for educational activities.

Early Career Level. The level of teaching responsibility expected varies enormously on an individual basis. Faculty members who are early in their careers or Non-Tenure Track faculty members for whom teaching is a relatively small component of their professional activities should document competency in activities such as:

- lecturing to medical and/or graduate students, residents, fellows, and peers
- instructing during laboratory or similar experiential learning activities
- teaching in patient care environments, including conducting teaching rounds
- facilitating and teaching in small group formats
- participating in supervision and individualized teaching of graduate students
- presenting patient conferences, grand rounds, and similar sessions
- assisting with journal clubs
- advising individual students and learners

Mid-Career Level. Faculty members with more significant teaching responsibilities or experience should demonstrate proficiency in activities such as:

- developing and participating in teaching of major components of courses (medical student, graduate student, resident, fellow, or CME courses)
- supervising graduate students and participating on dissertation committees
- sustained and substantial teaching in patient care settings
- developing significant educational and curricular materials (e.g. syllabi, curricular objectives, teaching cases, software)
- developing significant evaluation techniques (e.g. examinations, surveys, software, standardized patients)
- advising, mentoring and/or providing career guidance to significant numbers of learners

Established Career Level. Faculty members with significant teaching responsibilities or those for whom achievements in education are the principal basis of application for promotion to the rank of professor should demonstrate excellence in activities such as:

- supervising or coordinating teaching by others (e.g. course director, residency program director)
- developing a course, curricular materials, or evaluation resources/techniques that are used regionally or nationally
- playing a major role in the organization, implementation and evaluation of a regional or national educational activity
- supervising an educational program for a regional or national audience
- writing or editing textbooks or equivalent resources adopted by other institutions
- acting as an education consultant to national bodies or a reviewer for national grants in education
• participation in developing national examinations, standards, or resources for medical education (including specialty-specific activities).

At this level there should be evidence of recognition outside the School of Medicine such as presentations to regional audiences or professional groups related to medical education, invitations to teach at other institutions, use by other institutions of materials or techniques, or publications related to education (see “scholarship”).

For all levels, evidence of quality for all activities must be documented, including awards for teaching excellence or service to education.

Scholarship
As discussed in the Handbook, scholarship is an integral and indispensable part of the University’s mission “to create, preserve, and transmit knowledge”. In keeping with broad definitions of scholarship (Boyer1), the School of Medicine expects faculty members to be distinguished from non-faculty professionals by their commitment to expanding the understanding of medicine and the related sciences as well as by their teaching activities. As shown below, “scholarship” incorporates activities that expand, integrate, and disseminate knowledge, as well as the “discovery” scholarship of classical research.

Faculty members of the School of Medicine undertake scholarship in an increasingly diverse spectrum of activities, some of which have little in common with traditional investigative research on which the academic promotion system was historically based. Simultaneously, increasing specialization can complicate articulating the value of specific research or scholarly work. All applicants should clarify the significance of their scholarly achievements such that they can be understood by colleagues from very different academic backgrounds. Both departmental chairs and chairs of departmental promotion and tenure committees should elucidate aspects of scholarship unique to specific disciplines or specialties in their letters of recommendation. Instructions for applicants are available online on the APT website.

Examples of activities in Scholarship include but are not limited to:

• conducting original research
• developing patents, devices, or procedures
• developing or testing clinical guidelines or similar techniques to improve clinical services
• developing public policy, quality assurance standards for medical discipline, or conducting related studies/ reviews
• editing and writing for scientific books, journals, and other communications media
• synthesizing knowledge in book chapters, monographs, and review articles
• describing cases, outcomes, or other events that contribute to the recognition and/or understanding of health problems

Applicants must provide evidence of both the quantity and quality of their scholarship and ensure that the significance of their achievements is clear to colleagues who may have very different academic backgrounds. As scholarly activity is frequently conducted as a team, the specific contribution and achievements of the applicant must be clarified.

Measures of the quality of scholarship include but are not limited to:

• publication of original clinical, educational, policy, or basic science research in professional journals and equivalent formats. The status of the journal and ranking of the applicant in multi-authored works will
be taken into consideration. The significance of the work, for example by citations or published commentary generated, should also be indicated.

- publication of reviews, essays, book chapters, case reports and other publications on clinical, educational, policy and/or scientific topics in appropriate journals and other media.
- award of grants or contracts as principal investigator from federal, foundation, or other sources. The status of the award, stringency of peer-review, and other factors will be taken into consideration.
- significant contributions as a co-investigator on a major research project leading to publications in appropriate journals. The collaborative efforts need to represent novel expertise as part of interdisciplinary or trans-disciplinary research/scholarship programs. The specific expertise must be clearly delineated and a rationale for why the contribution is novel or particularly valuable must be documented.
- presentation of research and other scholarly work at other institutions and professional conferences, seminars or other gatherings (or equivalent electronic formats). The status of the venue, in particular the degree of peer-review for acceptance must be explained.
- development of policy documents or medical quality assurance standards for a discipline and similar work that enhances the scientific basis on which public or private bodies make decisions related to health, the health sciences, education, or other pertinent areas
- selection as a mentor in research leading to scholarly activities by students, residents, fellows, and faculty members.

The following activities must include evidence of integration/expansion of existing knowledge and extensive literature review:

- publication of case reports and review articles on clinical and scientific topics.
- significant involvement in the development, implementation and evaluation of clinical guidelines locally or regionally for a local, state or federal organization.
- significant contribution to policy development for the Institution or a local agency
- contribution to State or other policy as a member of an expert team

The Early Career Level in scholarship and research establishes initial achievements appropriate to the field of expertise/study including but not limited to:

- publications concerning clinical or basic science research (evidence of significant contribution to publications)
- presentation (verbal or poster) of study results to local audiences
- evidence of application as principal investigator for locally or regionally-funded studies or contracts
- co-investigator status on major grants or projects
- publication of case reports and review articles on clinical and scientific topics.
- involvement in the development, implementation and evaluation of clinical guidelines locally or regionally for a local, state or federal organization.
- contribution to policy development for the institution or a local agency
- contribution to State or other policy as a member of an expert team

The Mid-Career Level is evidenced by a portfolio of high-quality, peer-reviewed scholarly materials demonstrating expertise in a defined field of study. These materials include but are not limited to:

- clinical, educational, policy and/or basic science research publications in peer-reviewed journals and equivalent formats (senior author)
- extramural grants or contracts (principal investigator)
- patents or other evidence of acceptance of devices or procedures
• developing local or regional clinical guidelines and/or membership of group developing national guidelines or equivalent activity
• developing local or regional health policy and/or membership of group developing national policy.
• provision of reviews or ad hoc editorial services to professional publications
• authorship of book chapters, monographs, and other publications or electronic formats on topics in medicine or the related sciences.

At the Established Career Level, evidence is expected of national or international recognition for scholarship in terms of a significant portfolio of high-quality, peer-reviewed scholarly products demonstrating major contributions to a field of study. This evidence could include:

• substantial and significant published papers in medicine or the related sciences
• authorship of major books or other text or electronic formats relevant to medicine and the related sciences
• invited presentations to prestigious gatherings
• regular oral or poster presentations at prestigious (competitive) national conferences
• consistent success in obtaining extramural grants or contracts that are peer-reviewed and depend on scientific excellence.
• significant contributions to the development of other scholars and researchers
• contributing editor or regular writer for a major scientific publication

Service:
Service is divided into the two broad areas of clinical/professional service and academic service. Clinical service includes patient care in any setting. The key distinction between other professional service and academic service is whether the faculty member’s contribution is based primarily on his/her expertise as a professional (clinician or scientist in professional service) or as a KU faculty member (in academic service). In cases of overlap, such as IRB or IACUC participation, the APT committee has allocated an activity to either professional or academic service.

Clinical/Professional Service includes patient care in any setting. For clinical service, measures of both quantity and quality of activities are required. Examples of measures of patient care activities include numbers of patients, time spent in the clinical activity, procedures completed, or Relative Value Units (RVUs). If the primary quality evaluation is the subjective assessment of peers, this should be available in letters from departmental colleagues, chair, or referees.

If the clinical service is provided at a non-KUMC facility, such as a clinical affiliate medical center or private clinic, the value of the service to the community and/or KUSM educational programs must be described. This might include provision of a unique learning opportunity, service to a vulnerable population or provision of a regional service.

Other professional service includes activities dependent on exercise of the faculty member’s professional qualifications and expertise.

For clinicians this includes those activities that support and enable patient care services to be provided such as hospital committees or work related to UKP, MPA or the management of clinical organizations.
Non-clinicians undertake professional service when acting as reviewers, consultants, or performing contract work when these activities are dependent on the professional experience and qualifications of the faculty member.

Professional service also includes activities related to professional organizations at the local or national level and exercise of professional expertise as a reviewer or editor.

**Examples of Clinical/Professional Service include, but are not limited to:**

- patient care
- service to organizations for patients, their families, and community groups
- service related to the development, management, evaluation, and improvement of clinical and professional services, including public health or community health services
- professionally-related public or government service
- external consulting or services as an expert witness
- service and leadership in professional organizations
- reviewing for professional journals and communications media
- editing for professional journals and communications media
- service on a national committee, study section or advisory group that substantially impacts health/scientific issues

Because of the heterogeneous nature of professional service and the potential overlap with other areas considered for academic promotion, applicants should clearly describe the activity and provide measures that clearly and concisely document accomplishments and the value of the activities to the Medical School and University.

All professional consulting services, including “expert witness” services may be presented as evidence of expertise in the profession. These activities must be professionally related, enhance the reputation of the University, and be carried out in accordance with the conflict-of-interest and other regulations of the University. Services undertaken for personal profit are not admissible for academic promotion.

For administrative work in support of clinical and professional services, the significance of the boards, committees, task forces, and similar groups should be explained and the specific role of the applicant clarified. Special attention should be given to documenting the impact of the service on patient care and any leadership role of the applicant.

Serving on study sections/grant review committees, reviewing and editing for professional journals and other dissemination media indicate recognition of expertise by peers in the discipline and are thus valuable expressions of professional service. The review groups or journals/media should be described such that the significance can be assessed. This might include circulation, impact factor or other form of ranking for a journal or description of the grant program for a funding source. The number, dates and types of reviews or other contributions should be provided so reviewers can assess the value of the work.

**Early Career Level** expectations for professional service include:

- clinical competence and demonstrated potential for excellence in area of expertise
- contributions to collaborative team efforts in clinical, public health, or scientific activities
- local consulting in area of expertise
• participation on clinically-related advisor/expert consultant to State government and regional organizations
• active participation in professional medical organizations

The Mid-Career Level is determined by regional reputation for excellence for example:
• consulting on a regional basis
• awards and other recognition as an outstanding regional clinician
• responsibility for a clinical program
• leadership role/chair of major committees of professional medical organizations on a regional basis
• spokesperson for the School of Medicine or University on areas of expertise

Established Career Level professional service at the requires demonstration of significant, prestigious activities at the national or international level such as:
• recognition as national leader in area of clinical expertise
• chair/leadership role on committee developing national standards in area of expertise
• leadership role in national or international professional medical organization

Academic Service
In academic service the contribution of the candidate to the academic community should be clearly documented. Names and dates of committees, task forces, or working groups should be provided. A concise description of the significance of the group and explanation of the role of the applicant should be provided. Activities related to School of Medicine Academic Societies should be documented in this section.

Examples of Academic Service include, but are not limited to:
• responsibility for local or university scientific or educational program
• activities related to faculty governance
• service on task forces, committees, and other groups of the School of Medicine and the University, such as IRB and IACUC
• service on committees related to the conduct of research
• administrative responsibilities for divisions, departments, centers or institutes
• organizational responsibility for student or resident organizations (including Academic Societies and specialty groups)

In Academic Service, the Early Career Level is demonstrated by active participation in the activities. Applicants should explain the significance of the activity and provide evidence of the caliber of their contribution to the work of groups. At the Mid and Established Career Levels, evidence of leadership, initiative, and substantial contributions to the work of groups or conduct of an important facet of academic organization should be demonstrated.
SECTION 8: EXPECTATIONS FOR PROMOTION

Promotion depends upon the ability of the applicant to document achievements that are consistent with the guidelines for the requested promotion in rank on the academic track of the applicant. Each application is assessed by several peers in committees at the departmental, campus, and School of Medicine level in order to develop recommendations to the Executive Dean and hence to the Executive Vice Chancellor for Academic Affairs and Chancellor of the University. At each stage, individuals and committees apply professional judgment within the following guidelines.

Promotions on the Tenure Track

To Associate Professor. Proficiency and contributions must be demonstrated in all three academic domains with documentation of attainment of at least Mid-Career Level in both teaching and scholarship, Early Career Level in service.

Promotion to associate professor with tenure is awarded to individuals whose career progress shows potential for eventual attainment of professorial rank. Consideration for tenure usually occurs with the promotion to associate professor on the tenure track. In rare cases, the award of tenure is considered independently.

Award of Tenure ONLY to Associate Professors or Professors on Tenure Track.

In contrast to promotion in rank which is based on documentation of academic achievements, decisions about tenure depend on the mutual benefits of a long-term commitment between the School of Medicine and faculty member. Recommendations for the award of tenure are based on the applicant’s potential for sustained contributions to core missions of the School of Medicine and/or leadership of essential programs. Those who are primarily researchers are reviewed principally on their ability to function as independent investigators and/or lead major collaborative programs. Faculty members whose primary roles are in education and/or clinical services are reviewed on their actual or potential leadership of core clinical and/or educational programs. Each application for tenure by an associate professor or professor is reviewed on its merits and no single set of quantitative criteria could apply to all cases. For tenure, faculty members should perform beyond the specified scope of their duties to demonstrate leadership and innovation, especially in activities that enhance the reputation of the Institution for scholarship, patient care or education.

To Professor. Appointment to professor with tenure confers the greatest academic prestige and recognition in the University and requires demonstration of sustained contributions and achievements in all three domains with documentation of Established Career Level in the two domains most appropriate to the role of the individual and at least Mid-Career Level in the remaining domain. National or international recognition of expertise is required.

For researchers, the application is assessed upon excellence (Established-Career Level) in scholarship plus either teaching or service activities. Researchers are required to demonstrate at least Mid-Career Level achievements in either teaching or service in addition to their two principal areas of established career achievements.

For clinicians, the application is assessed on excellence in clinical service plus either teaching or scholarship. It is stressed that significant achievements of Mid-Career Level are required in the third domain. Therefore, clinicians on the Tenure Track are required to document substantial achievements in scholarship (at least Mid-Career Level) even if their applications rest primarily on Established-Career Level achievements in clinical service and teaching.
For educators, faculty members whose principal responsibilities are in education are required to demonstrate excellence in teaching, plus either scholarship or service. It is stressed that significant achievements of Mid-Career Level are required in the third domain. Therefore, educators on Tenure Track are required to document substantial achievements in scholarship (at least Mid-Career Level) even if their applications rest primarily on Established-Career Level achievements in clinical service and teaching.

Promotions on Non-Tenure Tracks
No time limits apply to promotion on Non-Tenure Tracks, and not all faculty members are expected to achieve the rank of professor.

Clinical Scholar Track
As described previously, faculty members on this track focus on professional and academic service plus teaching and have full-time contracts with the School of Medicine and unmodified academic titles. Scholarship is expected. This scholarship is usually derived from clinical and educational activities and the levels of scholarly productivity expected for promotion are lower than for faculty on Tenure Tracks. As clinical scholar faculty are viewed as key to the governance and other organizational activities of the School of Medicine, academic service is expected and is a criterion for promotion on the Clinical Scholar Track. For promotion to Professor, evidence of a leadership role in the academic service domain is expected.

The Clinical Scholar Track is comprised of two academic pathways: one for Clinical Educators and the other for Clinical Investigators. These are not formal tracks, but vary in the primary/critical domain. For the Clinician-Educator, teaching excellence is the more critical domain. In the case of the Clinician-Investigator, excellence in scholarship is the more critical domain.

To Associate Professor. Attainment of Mid-Career Level in professional (clinical) service, academic service, and teaching (Clinician-Educator) must be documented plus documentation of at least Early Career Level in scholarship. For the Clinician-Investigator there is the same expectation for professional and academic service. In addition, scholarship must be documented at the Mid-Career Level with at least Early Career Level in teaching.

To Professor. Documented Established-Career Level in professional (clinical) service, academic service, and teaching (Clinician-Educator) is required, plus Mid-Career Level in scholarship. For the clinician-investigator there is the same expectation for professional and academic service. In addition, Established Career Level must be attained in scholarship and Mid-Career Level in teaching.

Clinical Track
While faculty members on this track participate in teaching and other activities as part of clinical service, their focus is to provide exemplary clinical service to the institution and to promote the reputation of KUMC for clinical services. They participate in education when learners are assigned to their clinical services, but their teaching responsibilities are primarily as role models – these faculty members are not expected to have significant responsibility for course administration or didactic instruction. Similarly they may participate in scholarship derived from clinical practice such as preparing case reports or clinical reviews or participating in clinical trials or other research projects.

To Clinical Associate Professor. Applicants must document attainment of Mid-Career Level in professional (clinical) service, plus Early Career Level in either teaching or scholarship.
To Clinical Professor. Applicants must document Established Career Level in professional (clinical) service with Mid-Career Level achievements in either scholarship or teaching and Early Career level in the remaining domain.

Educator Track
Appointments on the non-tenure, Educator track are intended for part-time or full-time faculty members whose primary contributions are to teaching or administration related to medical education. While the defining feature of this track is a requirement for making contributions to education, candidates are expected to contribute to scholarship, particularly the scholarship of healthcare/medical education, and service. Appointment as an Assistant Professor on this track will usually require a terminal degree. There is no required or recommended timeline or deadline for promotion on this track. Faculty members will be considered for promotion when they have attained the achievements and met the criteria of the next academic rank.

To Education Associate Professor. Normally requires 3 years of service as an assistant professor. Applicants must document attainment of Mid-Career level in Teaching, plus Mid-Career in Academic Service and Early Career in Research/Scholarship. Compared to his/her colleagues on tenure or research tracks, the faculty member on the Educator Track is more likely to be a participant in collaborative research and educational scholarship. Consideration for academic promotion on this track places less emphasis on being an independent investigator than other tracks, but active engagement in research/scholarship is required. Scholarship aimed at improving educational programs, as evidenced by poster and other presentations and workshops at national meetings and publications in educational journals may be an important element of research/scholarship achievements.

To Education Professor. Appointment to this rank or promotion from the rank of Associate Professor normally requires a minimum of three years of service as an Associate Professor and evidence of national and/or international recognition of expertise in medical/healthcare education. Applicants must document Established Career level achievements in Education and Academic Service, and Mid-Career level achievement in Research/Scholarship.

Research Track
The major emphases of faculty members on this track are research and scholarship. For promotion the primary domain is scholarship, however, teaching and/or service related to the faculty member’s research program is expected. Examples of teaching may include training of graduate students, postdoctoral fellows, residents and medical students. Examples of service may include participation on University, School of Medicine and department research related committees. On the research track, consideration will be given to individuals who play a major role in collaborative scientific efforts as well as those who develop an independent research program. Those collaborative scientific efforts must be clearly documented and should result in publications related to the collaborations. Scholarship is defined in its broadest sense to include Boyer’s four components: scholarship of discovery; the scholarship of integration; the scholarship of application; and the scholarship of teaching. (Boyer, 1990)

To Research Associate Professor. Attainment of Mid-Career Level in scholarship must be documented plus at least Early Career Level in one of the other two domains.

To Research Professor. Attainment of Established Career Level in scholarship must be documented plus at least Early Career Level in one of the remaining domains.
SECTION 9: PART-TIME FACULTY APPOINTMENTS

Part-time faculty members have appointments of 0.5 FTE or less. Appointments to the Part-Time faculty of the School of Medicine require evidence of professional expertise, willingness and ability to perform the proposed activity, and potential as a role model and colleague. Evidence of professional expertise includes specialty or subspecialty board certification and current state licensure\(^1\) (or their equivalents). Individual departments or units may have additional requirements, including prior teaching or research experience. Letters of appointment and systems of regular review must document the expected role of each faculty member.

**Part-Time Clinical Faculty**

By nature of their part-time status, faculty members on this track are not expected to reach goals for promotion at the same rate as their full-time clinical track colleagues. In addition, these faculty members usually have very focused responsibilities for the School of Medicine and hence may not have opportunities to serve in more than one domain. The School of Medicine encourages scholarship by part-time faculty members, but recognizes that scholarship activity may be neither appropriate nor practical to the role of all part-time clinical faculty members.

**To Clinical Associate Professor (Part-Time).** Applicants must document attainment of **Mid-Career Level** achievements in professional (clinical) service for the School of Medicine or in the teaching of medical students, residents, fellows, or physicians for the University of Kansas School of Medicine.

**To Clinical Professor (Part-Time).** Applicants must document **Established Career Level** achievements in professional (clinical) service for the Medical School or in the teaching of medical students, residents, fellows, or physicians for the University of Kansas, School of Medicine.

**Part-Time Educator Faculty**

**To Education Associate Professor (Part-Time).** Applicants must document attainment of **Mid-Career Level** achievements in teaching and **Early Career** achievements in Academic Service.

**To Education Professor (Part-Time).** Applicants must document **Established Career Level** achievements in teaching and **Mid Career level** achievements in Academic Service.

**Part-Time Research Faculty**

It is anticipated that promotion will for part-time faculty on the Research Track take longer than for full time colleagues because of the part-time status.

**To Research Associate Professor (Part-Time).** Attainment of at least **Mid-Career Level** in scholarship for the School of Medicine.

**To Research Professor (Part-Time).** **Established Career Level** must be documented in scholarship for the School of Medicine.

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\(^1\) Kansas licensure for health professionals requires documentation of aspects of professional responsibility such as record of incapacity to practice due to use of alcohol, substances, mental illness or malpractice.
SECTION 10: APPOINTMENT OF FACULTY AFFILIATED THROUGH THE VETERANS ADMINISTRATION MEDICAL CENTERS

The Veterans Administration Medical Centers in Kansas City, Leavenworth, Topeka and Wichita have formal affiliation agreements with the University of Kansas. Individuals at these institutions make important contributions that support the mission of the University of Kansas, School of Medicine and have academic credentials consistent with faculty status. In reward for their efforts faculty appointments are offered at the ranks of Instructor, Assistant Professor, Associate Professor and Professor. Appointment covers no more than one academic year at a time. Faculty members included in this category are those whose salary is mostly or entirely derived through VA Medical Center funds.

Individuals who wish appointments in this category must apply through a regular department at the University of Kansas Medical Center or the Wichita Campus. Acceptance of such appointment will imply a significant contribution of time and effort to the University and its mission. Appointments in this category may be offered with a modified or unmodified title at the discretion of the department chair.

Following initial appointment in this track, promotion in rank or status within the track is considered by the normal, peer review at the department level followed by consideration of the promotion recommendation at the level of the School of Medicine Promotion and Tenure Committee and approval by the Executive Dean in Kansas City or Dean in Wichita and the Vice Chancellor for Academic Affairs.

PROMOTION OF FACULTY AFFILIATED THROUGH THE VETERANS ADMINISTRATION MEDICAL CENTERS

Clinical Track VA faculty
Clinical VA faculty members may be promoted as Clinician Educators or Clinician Investigators. These are not formal tracks, but vary in the primary/critical domain. For the Clinician-Educator, teaching excellence is the more critical domain. In the case of the Clinician-Investigator, excellence in scholarship is the more critical domain.

To Associate Professor for Clinical VA Faculty. Attainment of Mid-Career Level in professional (clinical) service and teaching (Clinician-Educator) must be documented plus documentation of at least Early Career Level in scholarship. For the Clinician-Investigator there is the same expectation for professional service. In addition, scholarship must be documented at the Mid-Career Level with at least Early Career Level in teaching.

To Professor for Clinical VA Faculty. Documented Established-Career Level in professional (clinical) service and teaching (Clinician-Educator) is required, plus Mid-Career Level in scholarship. For the clinician-investigator there is the same expectation for professional service. In addition, Established Career Level must be attained in scholarship and Mid-Career Level in teaching.

Educator Track VA Faculty
Promotion guidelines for the non-clinical VA faculty on the Educator Track are identical to those criteria for full-time Educator Track and are listed below.

To Education Associate Professor for VA Faculty. Normally requires 3 years of service as an assistant professor. Applicants must document attainment of Mid-Career level in Teaching, plus Mid-Career in Academic Service and Early Career in Research/Scholarship. Compared to his/her colleagues on tenure or
research tracks, the faculty member on the Educator Track is more likely to be a participant in collaborative research and educational scholarship. Consideration for academic promotion on this track places less emphasis on being an independent investigator than other tracks, but active engagement in research/scholarship is required. Scholarship aimed at improving educational programs, as evidenced by poster and other presentations and workshops at national meetings and publications in educational journals) may be an important element of research/scholarship achievements.

**To Education Professor for VA Faculty.** Appointment to this rank or promotion from the rank of Associate Professor normally requires a minimum of three years of service as an Associate Professor and evidence of national and/or international recognition of expertise in medical/healthcare education. Applicants must document Established Career level achievements in Education and Academic Service, and Mid-Career level achievement in Research/Scholarship.

**Research Track VA Faculty**
Promotion guidelines for non-clinical VA faculty on the Research Track are identical to those criteria for full-time Research Track faculty and are listed below.

**To Research Associate Professor** Attainment of at least Mid-Career Level (regional or national standing) in research and scholarship must be documented plus at least Early Career Level in one of the other two domains.

**To Research Professor Established Career Level** (national or international recognition) must be documented in research and scholarship plus at least Early Career Level in one of the remaining two domains.

- Teaching related to their research to include:
  - Formal medical-student teaching
  - Preparation of syllabi and teaching materials for medical students
  - Formal graduate-student teaching
  - Preparation of syllabi and teaching materials for graduate students either in the IGPBS coursework or in advanced graduate courses.
  - Teaching related to research/scholarship including:
    - personal training of graduate students
    - personal training of postdoctoral fellows
    - organization of workshops, seminars and other graduate-program duties (e.g. directing a journal club)

- Service related to research
  - Participation on departmental, university, or medical center-wide committees related to research/scholarship where permitted
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<tr>
<th>Date Range</th>
<th>Event Description</th>
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<tbody>
<tr>
<td>March 1</td>
<td>Formal call for applications (Executive Dean)</td>
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<tr>
<td>May 1</td>
<td>Registration is due</td>
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<tr>
<td>August 1</td>
<td>Deadline for Departmental Promotion and Tenure Committees to meet</td>
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<tr>
<td>September 1</td>
<td>Deadline for applications</td>
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<tr>
<td>September Thru December</td>
<td>Review by campus Promotion and Tenure committees</td>
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<tr>
<td>Mid-January</td>
<td>Joint School of Medicine Promotion and Tenure Committee makes recommendations to the Executive Dean</td>
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<tr>
<td>Early February</td>
<td>Executive Dean sends his/her recommendations to Vice Chancellor for Academic Affairs</td>
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<td>Individual faculty members who have been denied at the School level, must be informed in writing by the Executive Dean (with a copy to Academic Affairs) that they have the right to appeal the decision. The appeal must be filed by the faculty member within two weeks of notification by the Executive Dean.</td>
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<tr>
<td>As soon as possible after Appeal Deadline</td>
<td>Appeal Hearings for denial of promotion and/or tenure (appeals must be based on process only)</td>
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<tr>
<td>Dependent on Appeal Hearing Schedule</td>
<td>Vice Chancellor forwards recommendation list to the Chancellor for final approval</td>
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<tr>
<td>Dependent on Appeal Hearing Schedule</td>
<td>Chancellor either approves or denies individual recommendations and communicates decisions to the EVC who in turn notifies individual faculty members in writing with copy to Department Chair (and Dean on Wichita campus, when applicable).</td>
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**Bibliography**
