

MCG Faculty Worksheet for Promotion

(MCG Faculty Senate, MCG Faculty Appointments, Development, Promotions, and Tenure Committee)

This worksheet is intended to be completed by those MCG faculty who desire to be considered for academic promotion from instructor or research scientist to assistant professor, associate professor, or full professor. As of 2017, pertinent information regarding promotion and tenure (P&T) can be found here: http://www.augusta.edu/hr/faculty-support-ser/procedures/promotionandtenure.php under the Medical College of Georgia bullet.

This worksheet is intended as a preparatory, optional aid for those faculty members that want to know whether they are 'in range' for a promotion. It is worth remembering that promotion to the assistant professor level requires at least three (3) years in rank as an instructor, while promotion from assistant professor to associate professor requires four (4) years, and promotion to full professor requires five (5) years in the prior rank. In each instance, these time lines are the minimum requirement and only those candidates with <u>exceptional</u> performance would be expected to be promoted at this earliest opportunity. In many, if not most cases, candidates would be better situated for promotion a few years beyond the minimum required time in rank.

This worksheet focuses on promotion from assistant to associate professor, and associate professor to full professor on the non-tenure track. In both instances, the worksheet assumes that those being considered for promotion will have demonstrated competence in all three areas of faculty life, and substantial achievement (excellence) in at least one area. For those on the tenure track, excellence is required in two areas (one being research), and competence in the third. Which areas a given faculty member decides to pursue for 'competence' versus 'excellence' should be congruent with his/her effort distribution as determined jointly with the chairperson or Institute director, etc. The difference between associate professors and full professors regarding 'competence' and 'excellence' is a matter of degree, and demonstration of sustained excellence since the last promotion. It is understood that areas singled out for 'excellence' versus 'competence' may change between promotions, just as effort distribution may change across years.

Here are <u>examples</u> of competence and excellence for critical domains of faculty life.... These examples are intended to be illustrative and not exhaustive or exclusive. In addition, these examples cannot be expected from instructor to assistant professor and some of them may not apply for the next step as well.

Faculty on the non-tenure track who are eligible for promotion should be able to demonstrate "excellence" in at least one faculty domain, and "competence" in two other domains. The area of "excellence" should be congruent with the faculty member's major assignment of effort in their annual reviews with their chairperson or Institute director.

Research/Scholarship Examples		
Competence	Excellence	
 Publish 1-2 items per year (article, letter to editor, review paper, book chapter, etc.) Submit an intramural or extramural request for research funding Abstract accepted or poster accepted at regional or state meeting Invited speaker on research findings at a state or regional meeting Actively involved in a IRB-approved research project at MCG Ad hoc peer reviewer for an academic publication 	 Publication of peer-reviewed journal articles at an average rate of 2-3+ per year Some journal articles first author or senior author Some articles in high impact journals, or journals recognized as major journals of the discipline A high H-index Academic productivity in the area of research which is associated with high alt-metric scores on social media Some articles with high alt-metric scores Invited plenary speaker at a national meeting Service on a grant review committee (i.e., NIH IRG committee) Principal investigator on an extramural grant Co-investigator on multiple extramural grants Editorial Board member or editor of a scientific publication 	

Education Examples		
Competence	Excellence	
 Bedside teaching on clinical services with favorable student/resident feedback Providing a few hours per year of formal lectures to trainees, with favorable student/resident feedback teaching videos* innovative teaching methods* instructional manuals* computer software* course syllabi* learner activities (i.e., PBL cases) * assessment instrument/methods/strategies* 	 Sponsoring a pre-doctoral student or post-doc in your lab Designing or performing a major revision of a course or curriculum Serving as a preceptor for Physical Diagnosis (with good reviews) Serving as a Problem-Based Learning Group Facilitator (with good reviews) Serving as a training director for a basic science-doctoral, health student or graduate health student program; especially with evidence of student proficiency on PhD qualifying exams, medical student step exams, shelf exams, etc. Leadership on a national-level committee pertaining to education or training Regular invitations to speak at other medical school's Grand Rounds (or the equivalent therefor) or invitations to speak at national meetings on topics specific to medical education or your discipline Authorship of 1-2 items per year (articles, review papers, book chapters, etc.) on educational topics in peer reviewed forums Academic productivity in the area of education which is associated with high alt-metric scores on social media Recognition by students/residents/peers for outstanding clinical teaching award(s) 	

^{*}There is agreement that for these products to be scholarship they must have demonstrable evidence of quality, peer review, dissemination, and impact, such as:

- number of downloads of a teaching video published in MedEdPORTAL
- adoption of teaching materials by other universities
- web page or blog hits
- publication of patient education materials by regional, state, or national organizations (such as a depression handout being adopted by National Alliance for the Mentally III).

Although these products can be reported under education or clinical materials, their peer review and dissemination may raise them to the level of scholarship or "excellence".

Clinical Examples Competence Excellence Maintain licensure and hospital privileges Serving as medical director for an AUMC in good standing without requirement of service **FPPE** Leadership on a clinical service with Meeting expectations in regards to major input into processes that lead to volume of clinical service measurable improvements in safety, Good citizenship, evidence by lack of complication rates, mortality indices, disruptive behaviors and respect for clinical outcomes, patient satisfaction, service efficiency, etc. other disciplines Demonstrate evidence/reputation of Collaborate across medical disciplines personal clinical excellence through patient education materials* references or quality metrics webpages, blogs and/or other social Show evidence of referrals from a wide media* region as appropriate for specialty Leadership on specific clinical QI projects Creation of a new, major clinical service, (i.e., a transplant service) Leadership in obtaining national designation or accreditation for a clinical service Membership on a national authority that creates diagnostic, treatment, or ethical guidelines, etc., for patient care Recognized innovation in clinical practice (i.e., the development of a new surgical approach, or a new treatment algorithm) Achieving patient satisfaction scores and feedback demonstrating excellent quality of care Recognition of clinical excellence through national recognition as "Best Doctors" or similar award Ability to draw clinical trainees into a MCG/AU training program Recurring, regular medical newspaper column/radio show Dissemination of peer-reviewed data and expertise in the form of Grand Rounds, clinical practice guidelines, seminars, podcasts, websites, small group activities with peer-reviewed data and internal benchmarking Published clinical and/or administrative policies adopted by one or more medical

facilities

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	 Appointed or elected leadership or membership on regional or national societies or specialty governing boards. Leadership in clinical care (e.g., membership on major clinical committees at the local, regional, or national levels) Appointed or elected leadership or membership on divisional, departmental, hospital, and/or school service-related governing boards
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Although these products can be reported under education or clinical materials, their peer review and dissemination may raise them to the level of scholarship/research or "excellence".

From Rush Medical College: "Of note, solely providing direct patient care at Rush and/or one of its affiliates over a certain period of time is NOT sufficient as a basis for senior faculty promotion."

Service		
Competence	Excellence	
Service on a standing committee of your home department or school wide committee	 Serving as chair of a major school-wide committee such as Admissions, Student Promotions, Faculty Appointments Development Promotions and Tenure, Institutional Review Board, etc. Serving on the Board or leadership position of a major national-level professional society Serving as a chair on a committee of a national-level professional society Director of a core lab of MCG, with demonstration of excellence (i.e., sustained accreditation, etc.) Leading a major administrative unit of MCG, with demonstration of achievement in stated goals of that administrative unit Authorship of 1-2 items per year (articles, review papers, book chapters, etc.) on topics related to leadership or administration in peer reviewed forums 	

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