Introduction

The mission of UW Medicine is to improve the health of the public, and we seek to advance that mission through excellence in our academic activities of teaching, scholarship, and professional service. The School of Medicine at the University of Washington is strongly committed to excellence in all components of our academic activities and to creating a transparent process for promotion of meritorious faculty members. This online document is intended as a resource for regular and research faculty to enhance their understanding of their School of Medicine appointments and the promotion processes. Familiarity with and understanding of promotion criteria specific to each department are important for all faculty members, including leaders responsible for the promotion process. Faculty are strongly encouraged also to review relevant sections of the Faculty Code.

The UW School of Medicine comprises 30 basic science and clinical departments, representing a wide array of disciplines and academic responsibilities. For this reason, evaluation of excellence and accomplishment is expected to vary somewhat among departments. To foster innovation and creativity, flexibility is encouraged in how contributions to scholarship, teaching, and service are evaluated and weighted. This document will provide examples of a range of criteria by which academic excellence can be demonstrated. Each department has developed specific appointment and promotion criteria that describe how its faculty will be evaluated. These criteria have been approved by the School of Medicine and serve as the basis for the School of Medicine's Council on Appointments and Promotions' review of the appropriateness of academic appointments and advancement. Department-specific criteria are provided to faculty at the time of

appointment and should guide individuals as they assess their progress toward reappointment and promotion.

Recognizing that each faculty member has a unique professional activity profile and assigned responsibilities in scholarship, teaching and/or professional service, the relative importance of these activities as criteria for appointment and promotion should be aligned with the relative time commitment to each of these activities. Expectations regarding faculty effort and criteria for promotion should be aligned. These expectations should be articulated clearly in the letter of appointment. Letters documenting academic assessments (completed annually for assistant professors) should indicate any change in professional activities and indicate if the faculty member is appropriately advancing toward promotion in each area of responsibility. While successful promotion is ultimately the responsibility of the individual faculty member, departments should consider various ways to provide mentorship to assist faculty in reaching their full potential.

UW Medicine is committed to excellence in professional conduct, including integrity, respect, compassion, accountability, collegiality, and altruism. Faculty members in the School of Medicine are expected to demonstrate professionalism in all aspects of their work. Evaluation of professional conduct will be a component of departmental academic assessments and will be considered in the promotion process.

Regular and Research Faculty Academic Appointments

The University of Washington has well-defined academic tracks, ranks, and titles. A description of the ranks, titles, duties and duration of the appointments for regular and research faculty can be viewed here.

The appointment process and definition of academic ranks and titles can also be found in the Faculty Code, Chapter 24 Appointment and Promotion of Faculty Members, Section 24-34 Qualifications for Appointment at Specific Ranks and Titles.

Both basic science and clinical departments recruit individuals through a national search as regular or research faculty. Research faculty do not have clinical responsibilities and, unlike regular faculty, may also have no formal teaching responsibilities.

Secondary Faculty Appointments

A. Adjunct Appointments
An adjunct appointment is made to a regular or research faculty member already holding a primary appointment in another UW unit (e.g., another department, school or college). This is an annual appointment that recognizes the contributions of a member of the faculty to the secondary unit.

B. Joint Appointments
A joint appointment recognizes a faculty member's long-term commitment to, and participation in, two or more UW departments. A faculty member who has the privilege of participation in governance and voting in the primary department may choose to participate or not to participate in governance and voting in the secondary department. A joint appointment may be discontinued only with the concurrence of the faculty member and the appointing departments.

Departmental Assessment of Progress

A. Yearly Activity Report

The Faculty Code requires departments to establish a format for faculty members to write an annual report of their activities to the chair. More information can be found in Section 24-57 Procedural Safeguards for Promotion, Merit-Based Salary, and Tenure Considerations, Part B, of the Faculty Code.

B. Regular Conference

The Faculty Code requires department chairs to meet on a regular basis with each regular and research faculty member. More information can be found in Section 24-57 Procedural Safeguards for Promotion, Merit-Based Salary, and Tenure Considerations, Part C, of the Faculty Code.

In divisionalized departments, the general practice in the School of Medicine has been to allow the delegation of the department chairs' responsibility for the regular conference to the division heads.

Each year the chair (or division head, if appropriate) is expected to confer individually with assistant professors and research assistant professors. The chair (or division head) is expected to confer individually with the associate professors at least every two years and with the professors at least every three years, including those with research titles. The purpose of the regular conference is to help individual faculty members plan and document their career goals. While the documentation of those goals will be part of the faculty member's record for subsequent determinations of merit, the regular conference should be distinct from the merit review.

At each such conference, the chair, or division head, and the faculty member are expected to discuss the following:

- The department's present needs and goals with respect to the department's academic activities (including teaching, scholarship, and professional service) and the faculty member's individual activity profile including active teaching, scholarship, and service responsibilities and accomplishments.

- Shared goals for the faculty member's teaching, scholarship and professional service in the forthcoming year (or years, as appropriate) in keeping with the department's needs and goals for the same period.

- A shared strategy for achieving those goals.

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The chair or division head and the faculty member should discuss and identify any specific duties and responsibilities expected of, and resources available to, the faculty member during the coming year(s), taking into account the academic functions described in the Faculty Code Section 24-32. The chair or division head should make specific suggestions, as necessary, to improve or aid the faculty member's work. A discussion of professionalism should be a component of the annual assessment. A letter summarizing this meeting should be written by the chair or division head to the individual faculty member.

Academic Calendar for Reappointment and Promotion

Appointments and reappointments follow timelines established in the faculty code. These timelines may be affected by what point in the academic calendar an individual joins the UW, leaves of absence, and part-time status.

A. Initial Appointment

The initial appointment term for full-time or part-time assistant professors and research assistant professors is three academic years. New appointees who have completed six months or more during the first academic year (appointed beginning July 1 through January 1), must count the full year towards the years allowed in the first three-year term. New appointees who have completed less than six months during the first academic year (appointed beginning January 2 through June 30) do not count the first academic year towards the years allowed in the initial three-year term.

B. Review for Appointment to a Second Term

The initial appointment term for full-time or part-time assistant professors and research assistant professors is three academic years. New appointees who have completed six months or more during the first academic year (appointed beginning July 1 through January 1), must count the full year towards the years allowed in the first three-year term. New appointees who have completed less than six months during the first academic year (appointed beginning January 2 through June 30) do not count the first academic year towards the years allowed in the initial three-year term.

Review for appointment to a second term takes place midway through the second academic year. The process and evaluations for reappointment are managed by the department, and departments are encouraged to guide individual faculty regarding department expectations. The length of the second term for full-time faculty is three academic years with mandatory review for promotion in the last year of the second appointment term (year six). The length of the second term for part-time faculty is based on appointment FTE and may range from three to six academic years with mandatory review for promotion in the last year of the second appointment term. Information on appointment terms for assistant professors and research assistant professors can be found in the Faculty Code, Chapter 24 Appointment and Promotion of Faculty Members, Section 24-41 and Section 24-45.

C. Extensions of Time for Promotions

Extensions of the time required for promotion to associate professor or research associate professor may be considered on the basis of child-birth, adoption, foster parenting, or other

exigencies. Information on related leave applications and extensions of time-in-rank can be found on the [Academic Human Resources website](#).

D. Postponement of Consideration for Promotion

Postponement of consideration for promotion in the last year of the second appointment term may be considered under particular circumstances and follows the review process for mandatory promotions including the assembly of a package that is reviewed by the eligible voting faculty of the department, the School's Appointments and Promotions Council, the Dean, and the Provost. Mandatory review following postponement is a full review based on the faculty member's entire promotion package at that time.

Tenure

A. Regular Faculty

Tenure at the University of Washington is defined as the right of a faculty member to hold his or her position without discriminatory reduction of salary, and not to suffer loss of such position, or discriminatory reduction of salary, except for the reasons and in the manner provided in the Faculty Code. Faculty appointed as assistant professor, tenure track, are proposed for tenure at the time of their proposed promotion to associate professor. Individuals may also be appointed as associate professors with tenure or professors with tenure.

Most regular faculty in clinical departments in the School of Medicine are appointed Without Tenure by reasons of funding (WOT). Appointments WOT generally have the same rights and privileges as tenured faculty. Information about Tenure and appointments WOT can be found.

- Tenure (Faculty Code, Chapter 25 Tenure of the Faculty, Section 25-31. Definition of Tenure)

- Appointments WOT (Faculty Code, Chapter 24 Appointment and Promotion of Faculty Members, Section 24-40 Faculty Without Tenure By Reason of Funding (WOT)

WOT appointments are described in the Faculty Code, Chapter 24, Sections 24-40 and 24-41. Relevant sections are excerpted below:

- **Section 24-40. B**. Faculty appointed WOT do not hold tenure because all or part of his or her annual University–administered salary is derived from sources other than regularly appropriated state funds. Except for this distinction, WOT faculty members have the same rights, responsibilities, and obligations as tenure–track and tenured faculty members at those ranks. The description of their duties and qualifications for promotion and salary increases for reasons of merit are the same. Except for termination of funding as defined in Section 24–41, Subsection J, or for reasons of program elimination (see Chapter 25, Section 25–52), such faculty members are not subject to removal, or discriminatory reduction in salary, except for cause (see Chapter 25, Section 25–51.)

- **Section 24-40. D**. Faculty members WOT have their salaries supported from a variety of department, school, and college resources, including, but not limited to, state funds, grant and contract funds, departmental, clinical and service funds. As defined in Section 24–57, faculty member's [sic] WOT shall have a written

understanding with the chair describing their duties to be performed to meet the department's missions. This understanding will specify the sources, distributions, and levels of funds supporting their salaries for these purposes. Salary funding shall be related to the faculty member's involvement in these departmental activities. Classroom instructional duties shall be supported from departmentally administered funds.

- **Section 24-41. I**. Termination of funding is defined as failure, for a continuous period of more than 12 months, to obtain funding sufficient to provide at least 50 percent of the faculty member's base annual salary. The University is not obligated to provide replacement funding during lapses of a faculty member's external support.

B. Research Faculty

Research titles designate appointments for faculty whose primary responsibility is research and whose salary is funded through grants, contracts or other applicable sources. These are term limited appointments that may be renewed by the department following faculty code requirements. Faculty members in the research track (research assistant professor, research associate professor, and research professor) are not eligible for tenure.

The sections of the Faculty Code relevant to termination of research faculty are Sections 24-41 G, H, and I:

- **Section 24-41. G**. Notwithstanding the provisions of this subsection, research assistant professors are subject to removal during the term of their appointment for cause (see Chapter 25, Section 25–51), for termination of funding, or for reasons of program elimination (see Chapter 25, Section 25–52.)

- **Section 24-41. H**. Research professors and research associate professors are not subject to removal during the term of their appointment except by removal for cause (see Chapter 25, Section 25–51), for termination of funding as defined in Subsection I, or for reasons of program elimination (see Chapter 25, Section 25–52.)

- **Section 24-41. I**. Termination of funding is defined as failure, for a continuous period of more than 12 months, to obtain funding sufficient to provide at least 50 percent of the faculty member's base annual salary. The University is not obligated to provide replacement funding during lapses of a faculty member's external support.

Pathways for Regular Faculty

A. Overview

Basic Science departments have one pathway for regular faculty who are all expected to engage in teaching and scholarship. The expectations for faculty effort devoted to teaching and scholarship should be defined at the time of appointment for each individual faculty member and reviewed and revised, as appropriate, on a regular basis. Promotion decisions should reflect the expectations regarding faculty effort devoted to teaching and scholarship.

Clinical departments may have one or two regular faculty pathways. The single regular faculty pathway is hereafter referred to as the traditional pathway for regular faculty. Clinical departments with two pathways have the traditional pathway (sometimes referred to as the "physician-scientist pathway") and a second pathway, called the "clinician-teacher pathway". Faculty appointed in the clinician-teacher pathway are regular faculty and hold the same academic titles and adhere to the same promotion schedule as other regular faculty appointed in the School of Medicine. A clinician-teacher must devote the majority of his/her time to clinical practice/administration and clinical teaching at one of the University's owned, operated, or affiliated clinical sites and the remaining time in scholarship. Both pathways in the clinical departments are essential to the mission of improving the health of the public and are equally valued. Regardless of whether a clinical department has one or two pathways, expectations regarding faculty effort devoted to teaching, scholarship, and clinical practice should be defined at the time of appointment and reviewed and revised, as appropriate, on a regular basis. Promotion decisions should reflect the expectations regarding faculty effort devoted to teaching, scholarship, and clinical service.

B. Changing Pathways for Faculty in Clinical Departments

Faculty members appointed in the traditional pathway in a clinical department may have the opportunity to switch into the clinician-teacher pathway under circumstances where their individual strengths and the department's needs and activities call for a change.

1. **Assistant Professors**

   Assistant professors may be considered for this status change provided they have not yet completed four academic years as an assistant professor.

2. **Associate Professors**

   Associate professors and professors also may switch into the clinician-teacher pathway, but associate professors are required to serve a minimum of three years after switching pathways before being eligible for consideration for promotion to

professor. Such a change in status requires approval by the department chair and the dean.

3. ***Clinician-teachers***

   Clinician-teachers may switch into the traditional pathway, provided that the change in status is approved by the department chair and the dean.

Guidelines for Academic Advancement in the Regular and Research Faculty Tracks

Please note: While the School of Medicine has adopted the below guidelines that supplement the Faculty Code, faculty are to refer to their departmental criteria when considering advancement in these tracks.

A. Scholarship

- *General Considerations*
  Objective evidence for excellence in scholarship is required for faculty advancement for regular and research faculty. Peer-reviewed scholarly publications are an important benchmark and are evaluated on quality, focus, and impact of the contribution. Other forms of scholarship may be considered and included in department-specific criteria. Work that has not been disseminated does not meet the definition of scholarship. An individual's role in scholarship is a factor to consider, for example whether the individual has developed independence in an area of research, or contributed with some level of independence as a collaborator with a major role in a particular prong of a research endeavor. The quality of the work and the development of expertise and impact in an area of science or on a particular topic are more important than the quantity of the scholarship.

- Each department must judge the quality of the scholarship for faculty being considered for promotion. The general criteria that should be used are the quality of the scholarship, the degree of innovation, and the extent to which this information has been disseminated and adapted for use outside of the University of Washington. External validation of the quality of scholarship is primarily accomplished through peer review mechanisms, as manifested by publication of research in quality journals, presentations at scientific meetings, attainment of patents and funding by extramural sources. These same criteria can be applied for some, but not all, of the scholarship of clinician-teachers in clinical departments. Other types of scholarship, such as curricular design, web information and videos, must be peer-reviewed by the department and by external reviewers selected by the department chair (or division head) and the faculty member.

- *Definition of Scholarship*
  Many types of scholarship are valued within the School of Medicine. Although clinician-teachers are not expected to be independent investigators, they are expected to have performed at some level of independence beyond a support role and must

demonstrate scholarship by the publication or dissemination of information meeting one of the definitions below.

a. Scholarship of Discovery

This type of scholarship includes the generation of new knowledge and publication in peer-reviewed publications. The areas of research include basic science, clinical, epidemiological, health services, social sciences, ethics, education, and health care delivery. Types of contributions might include:

- Publication in peer-reviewed journals

- Presentation of data in abstract form, oral presentation, or poster

- Participation in key elements of multi-center projects

b. Evaluation of Scholarship of Discovery

The quality of scholarship will be based on the quality of work published in peer reviewed publications and presentations at national meetings. Ability to obtain extramural funding to support the research program will be considered. In addition, letters of support from principal investigators of collaborative projects are useful. Important criteria are the quality of and impact of the study, and the specific contributions of investigators to its design, implementation, and analysis of the results.

In evaluating a faculty member's scholarship, reviewing bodies may consider the individual's overall research trajectory and evidence of growing and/or sustained activity. For example, early years with lower productivity combined with growth in productivity and impact, or lapses in productivity, may all be factors in evaluating overall scholarship of an individual.

When considering scholarly productivity, some additional considerations may be appropriate for faculty members whose translational research work involves complex clinical trials or similar multi-institutional studies. The time to initial publication of such studies may be greater, and hence the initial publication trajectory of these individuals may be somewhat slower than in other forms of scholarly endeavor. These differences can result from regulatory barriers, the extensive and lengthy investigational new drug application process to test new agents, the need to develop multi-institutional protocols to enroll adequate study participants, the long duration before many clinical trials reach meaningful study endpoints, and other factors inherent to this type of research. Moreover, the extent and nature of an individual's contributions to publications with large numbers of authors is often difficult to judge. To this end, letters of support from senior mentors as well as internal and external collaborators should clearly describe the faculty member's individual contributions

to study design, implementation, and analyses, so that these contributions can be properly considered during the promotion process.

In addition to publications, presentations and external funding, other metrics of scholarship that may be particularly useful in the context of translational research include patents, investigational new drug applications and total number of clinical trial protocols (listed on clintrials.gov) for which the faculty member is the Principal Investigator (PI) or the site-specific PI. Clinician-teachers can work as collaborators on research studies. Criteria for meaningful participation must be documented. Examples include: contributing to the generation of the research idea, recruiting patients, conducting chart reviews, participating in data collection and/or analysis, and preparing the results for publication.

c. Scholarship of Integration
The critical synthesis and integration of existing information on a particular question are considered valuable contributions, especially for clinician-teachers. This can consist of:

- Systematic reviews of the literature, including meta-analyses or Cochrane Collaboration reviews Book chapters

- Review articles in peer-reviewed journals

- Editorial board of peer-reviewed journals

- Authorship or editorship of books

- Editorship of a journal

d. Evaluation of Scholarship of Integration
Systematic reviews, review articles and editorials should be published in peer reviewed journals. Some articles or book chapters should be first authored or senior authored by the faculty member under consideration.

e. Scholarship of Teaching
Contribution to new knowledge related to the teaching of medicine is an important type of scholarship. Types of contributions include:

- Curriculum development for a new or existing teaching program

- Materials for in-house use such as resident Faculty Codes and evidence based clinical guidelines

- Educational software or video

- Educational information on the internet

- New methods to evaluate the success of educational programs and the progress of trainees

f. Evaluation of Scholarship of Teaching

Evaluation will be done by solicited evaluations from outside reviewers at the time of promotion. It may consist of solicited evaluations from users of the information, such as faculty, fellows, residents, students, and other health care professionals. Traditional evaluative criteria such as publication in peer-reviewed journals and presentation at scientific meetings can also be used.

B. Teaching

The evaluation of teaching is based upon the quality and value of teaching interactions with students, residents, fellows, graduate students, practicing physicians, and other health care professionals; an assessment of innovative education programs, projects, resources, materials, and methods; and, for some faculty, the ability to be an effective educational administrator or leader.

- *Teaching Portfolio*

  Compilation of the teaching portfolio is required for the promotion dossier of all faculty with teaching duties. It allows for more formal assessment of contribution to teaching, providing documentation and evidence of the quality and value of educational activities. The extent of the teaching portfolio will vary with the amount of time the faculty member devotes to teaching. It is recommended that faculty members proactively request supporting materials for the teaching portfolio, such as course evaluations or peer and student assessments, at the time that the teaching activity is performed. Evaluations must include peer evaluations of teaching in addition to those obtained from students or learners. In general, teaching evaluations are expected annually. Peer evaluations are also expected annually for assistant professors, and at least every three years for associate and full professors, and the year before promotion from associate professor to professor. An internal reference letter that contains a comprehensive section reflecting personal observation of teaching effectiveness may be appropriate as one element of peer evaluation (with a copy of the letter placed in the teaching portfolio). Refer to department specific guidelines on the format of the teaching portfolio and evaluation forms and materials.

- *Comprehensive Teaching Portfolio*

  A [template](#) (PDF) for preparation of the teaching portfolio has been suggested by

the Teaching Scholars Program at the University of Washington School of Medicine. This comprehensive portfolio is appropriate for individuals who have major time commitments to teaching as part of their overall academic responsibilities. Elements of the comprehensive teaching portfolio may vary depending the individual's activities and the department's guidelines, and may especially vary between faculty in basic science departments and clinical departments. The comprehensive teaching portfolio template includes the following guidance.

- It is suggested that the faculty member collate his or her teaching materials, store and update documents and letters as they are received, and select from these materials the documents that best represent activities and reflect expertise as an educator. It is not necessary to include everything that has been kept, but all evaluations (individual copies or computerized summaries) should be submitted. The submitted portfolio should not be so large as to overwhelm the reviewers and ideally be no more than 1" of paper.

- An "executive summary" should be placed in the front of the portfolio (easily readable by a review committee); table of contents, then the main portfolio should be tabbed to include the following headings:

  o Personal Information

  o Teaching Philosophy (maximum one page)

  o Teaching Activities and role as an educator. Include teaching evaluations, instructional materials, and documentation in an appendix of the portfolio.

    Direct Teaching: lectures, small group teaching, problem-based learning, grand rounds, supervision of clinical activities, etc.

    Curriculum Development: describe innovative educational activities created or implemented. Examples: courses, clerkships, faculty development, lab manuals, web-based materials, clinical cases, etc.

    Educational Scholarship: didactic materials produced and published by the individual faculty member in order to disseminate medical education experience and expertise.

  o Mentoring (typically more extensive for promotion to Professor)

Provide a list of mentees with description and duration of mentoring activities and their current career attainments and awards

Other materials the faculty member may wish to include: brief description of projects conducted with mentees, as well as letters from mentees summarizing the mentoring experience and the impact it had on their professional development

o Educational Administration

Describe relevant leadership positions held: course director, residency or fellowship program director, committee participation or chairmanship, etc.

Educational grants: include source, amount and number of years of funding

For Program Director: include achievements in accreditation, curriculum development, evaluation procedures, and innovations in training programs

o Professional Development in Education

Describe participation in programs related to medical education: workshops, seminars, CME, Teaching Scholars

Describe the impact of these activities on your professional development

o Regional/National/International Recognition

Describe participation in regional, national or international meetings or committees: workshops, seminars, oral or written board examiner, reviewer of other training programs or training grants

o Teaching and Education-related Honors and Awards

o Long-Term Goals

"Reflection-in-Action" including future projects, new teaching methods to be learned, ideas to be investigated, plans for publication and dissemination.

An individual faculty member may not have materials to support all of the categories of teaching listed above. The teaching portfolio is evaluated by internal reviewers. At the option of the department it may also be sent to outside reviewers for evaluation similar to the way publications are evaluated by outside reviewers at times of promotion.

C. Clinical Care

Faculty who provide clinical professional services as part of their expected academic responsibilities must have peer clinical evaluations as a component of academic advancement. The weight given to the quantity and quality of clinical service should be aligned with the time spent in clinical activities. Peer clinical performance evaluations should be conducted on a regular basis using a structured format. The evaluation should focus on two main areas: (1) medical knowledge, problem- solving skills, management of complex patients, psychomotor skills, and overall clinical skills; and, (2) humanistic qualities, responsibility, compassion, and management of the psychosocial aspects of illness.

Peer clinical evaluations should be obtained from a combination of other faculty and residents who work with the individual in the same clinical setting. At least some of the faculty should be outside of the individual's specific area of expertise and no more than one-half of the evaluations should come from residents. Peer evaluators should be chosen by the faculty member and the department chair (or division head).

At the time of the appointment of a clinician-teacher, guidelines should be established for the evaluation of the quality of clinical care and clinical productivity. Peer ratings may serve as a measure of the individual's clinical excellence and other measures (e.g., outcome measures) may be employed as appropriate. Examples of methods to assess clinical productivity include the number and types of patients seen, clinical revenues, half days of clinical practice, work RVUs, and types of service provided. Specific guidelines should be individualized for each clinician-teacher and should be developed by the department chair, division head, and service chief.

D. Administrative Service

Effective administration of teaching, research, and clinical programs is crucial to departmental success. Administrative work is a distinct and important activity that should be evaluated at the time of promotion, along with teaching, clinical care, and scholarship activities, though it is not a substitute for teaching and/or scholarship. Those involved in the evaluation should include the individual's supervisor as well as his/her peers, supervisors and users of the service which he/she administers.

The administrative responsibilities of faculty members vary tremendously, from individuals who have no administrative responsibilities to those whose jobs are mainly administrative. These activities can include administration of a research unit, a clinical unit, or a teaching program. The basis for evaluation will be performance against prospectively set annual expectations and goals. These expectations and goals should be jointly set by the faculty

member and the person(s) to whom the faculty member reports for these administrative activities.

The evaluation of administrative responsibilities should include a statement by the faculty member of the FTE devoted to the specific administrative responsibilities. It should specifically outline the different roles and responsibilities and whether these were assigned or whether the individual volunteered for these roles.

The administrative responsibilities should be separated into the following categories:

- Hospital

- Department (e.g., section head, clinic director) School of Medicine, University

- Other local

- Regional

- National

- International

Documentation should include annual expectations and goals and measures of performance in achieving these goals. Measurements for administrative activities may include some or all of the following:

- Financial performance: Meets pre-determined budget targets for revenue and expenses

- Operational performance for clinical programs: Total patient volumes, wait times, patient satisfaction scores, complaints, referral provider satisfaction, staff satisfaction, and other QI indicators.

- Workforce management: Recruitment and retention efforts, turnover rate among faculty, fellowship recruitment.

- New program development: Specific deliverables such as completed planning, implementation, re-assessment following implementation.

- Ongoing program oversight: Collaborative programmatic maintenance and improvement of existing programs. Collaborative timely review/revision of existing and creation of related policies and procedures. Establish review priorities.

- Leadership: Individual programs, and hospital/University committees

- Role in new initiatives: Initiation, planning, and support of new initiatives

- Support and implementation of specific goals and initiatives.

E. Professionalism

UW Medicine values professionalism among its members in carrying out UW Medicine's academic activities of teaching, scholarship, and professional service. Professionalism includes demonstrating honesty, integrity, integrity, respect, compassion, accountability, and a commitment to altruism in all our work interactions and responsibilities. It is the policy and expectation of UW Medicine that UW Medicine faculty, staff, trainees, and students will conduct themselves in a professional manner in all of their interactions with patients, members of the public and the University community, and each other. See UW Medicine Policy on Professional Conduct.

Professional conduct is a requirement for promotion, and evaluation for promotion will include professional conduct as a factor. Because professionalism is expected in all areas of a faculty member's performance, problems of deficiencies in professionalism may be seen as limiting a faculty member's ability to be successful in teaching, research, and professional service.

Professionalism may be addressed during the regular conferences between the faculty member and his/her department chair or division head (adapted from Am J Surgery 191:701-705, 2006) and topics may include, for example:

- Demonstrates respect toward all others both in direct interactions and in indirect references

- Aware of own limitations; seeks and accepts constructive feedback

- Answers questions directly and respectfully

- Tactfully offers assistance and support for team members

- Inspires trust in patients, colleagues, coworkers, and subordinates

- Listens well and responds appropriately

F. Professional Recognition (e.g., "National Recognition")

Professional recognition outside of one's department and the School of Medicine is considered in the evaluation of promotion at all levels. The University of Washington requires "National Recognition" for advancement to the rank of Professor. Departments

should define how such recognition will be determined and valued at each level of advancement. The expected types of external recognition should reflect the profile of the faculty member's efforts devoted to their academic activities. Examples of how a faculty member might be recognized outside of the University include:

- Awards or prizes

- Serving on national advisory boards or study sections

- Membership in scholarly organizations, especially elected societies

- Serving on editorial boards

- Providing peer reviews for scholarly journals

- Presenting at scholarly meetings and conferences

- Invitation to give state-of-the-art lectures or reviews at national or international meetings

- Visiting professorships

- Organizing international, national or regional meetings

Preparation of Promotion Dossiers

The deadlines for departments to submit completed promotion dossiers to the Dean's office are September 1st for mandatory and November 1st for non-mandatory promotions. Faculty should work with their department chair and/or division head to prepare their promotion packet in a timely manner. Each department should provide faculty with a list of components (checklist) for the promotion dossier at the time of appointment and again well in advance of consideration for promotion. The checklist should be used as a reference, as appropriate, at regular conferences between faculty members and their chairs or divisions heads.

The School of Medicine requires:

- Current curriculum vitae in UW School of Medicine format. An asterisk should identify five of the candidate's most significant scholarly contributions

- Electronic copies of the faculty member's five most significant scholarly contributions

- Teaching evaluations- including peer evaluations (as part of the teaching portfolio) - one hard copy, one electronic copy

- Peer clinical competence evaluations- (for faculty who provide clinical professional services) – one hard copy, one electronic copy

- Candidate's self-assessment of teaching, clinical, research and administrative activities

- Written summaries provided to the candidate during the departmental promotion process as well as responses from the candidate

- Letters of Evaluation:

    o A minimum of six letters of recommendation.
    o Of the six letters, at least three external, non-UW referees of whom at least two are not present or past colleagues, teachers, students, friends, mentors, or collaborators (worked with or co-authored papers).
    o The remaining three letters can come from UW faculty; one must be from within the department. It is preferred that these letters come from senior faculty.

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The external referees should be senior faculty at institutions comparable to ours who are experts in their field and are qualified to review the candidate's contributions. Letters from former UW faculty are welcome but will not necessarily be considered as external letters. All evaluations are to be submitted unless the reviewer has indicated he/she is unfamiliar with the candidate and is unable to evaluate.

The candidate (and if appropriate the candidate's division head) should be consulted regarding the individuals from whom internal and external letters of evaluation will be requested. The department chair or departmental promotion committee will then select individuals to write letters, which will be solicited in writing by the chair or the chair's designee. A completed University of Washington School of Medicine (UW SoM) External Referee Form should accompany each outside (non-UW) request for a letter of evaluation.

- A completed UW SoM External Referee Form for each outside, non-UW referee

- Letter from the division head to the department chair-if appropriate

- Letter from the department chair to the Dean

- Letter of concurrence from chairs of the secondary department for candidates with joint or adjunct appointment(s); a vote from the second department is also required for joint appointments.

- An example letter of solicitation from the chair to referee writing letters of recommendation

- A copy of the departmental criteria for promotion