FACULTY PROMOTION CALENDAR

ACTION TAKEN AND DEADLINE

All faculty with the intent to apply for promotion indicate their intent in writing to the departmental chair and the dean – November 1.

Faculty submit the required forms, documents, portfolio, and the names of possible external evaluators to the departmental Appointments and Promotions Committee – December 1.

All letters are requested by the departmental chair – December 15.

Departmental committee concludes work and provides their recommendation to the departmental chair and the dean, and, if affirmative, the documents are submitted to the medical school Advisory Committee on Appointments and Promotions – February 1.

The medical school Advisory Committee on Appointments and Promotions concludes work and transmits recommendations to the dean, who then forwards affirmative action to the president of RU – April 1.

The Board of Trustees of RU acts on promotion recommendations at the regularly scheduled meeting – June.
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Faculty Promotion

Preamble

1.0 Guiding Principles

1.1 Consistent with the policy of Rowan University, there will not be University, College, nor Department Committee allocations for faculty promotion.

1.2 Faculty members who satisfactorily meet the criteria and standards for promotion will be promoted in accordance with the timeline.

1.3 The Medical School will provide resources to assist faculty members in their professional development.

1.4 Promotion will be based upon demonstrated proficiency in teaching effectiveness, scholarly activity, clinical service (if applicable), contribution to the Medical School, Hospital, and University community, and contribution to the wider and professional community.

1.5 Standards for promotion to the ranks of assistant, associate and full professor will be clearly articulated and documented by the departments and approved by the Dean of the Medical School and the President of Rowan University. The standards should be rigorous yet attainable and empirically observable.

1.6 At the option of faculty, promotion from one professional rank to another may be guided by the professional development plans prepared by the individual faculty members and approved by their departments and the Dean.

1.7 All new faculty members will be advised of the standards and procedures for promotion and will be provided, electronically, the following documents:

   1.71 A statement of the mission of CMSRU
   1.72 A copy of the CMSRU Faculty Handbook
   1.73 A copy of the standards, criteria, and procedures for faculty promotion
   1.74 A list of the programs and opportunities available to faculty members to assist them in their continuing professional development

1.8 For purposes of promotion, evaluation of Teaching Effectiveness, Scholarly Activity, Contribution to the Medical School, Hospital, and University Community, and Contribution to the Wider and Professional Community are the responsibility of both the individual faculty member and the academic department.

2.0 Defining the Roles and Responsibilities of Faculty

   Teaching Effectiveness; Scholarly Activity; Contribution to the Medical School, Hospital, and University Community; Contribution to the Wider and Professional Community

2.1 Teaching Effectiveness

2.2 Scholarly Activity
2.21 Research is the pursuit of an active or continuing agenda of scientific inquiry whose purpose is to create new knowledge or integrate knowledge.

2.3 Contribution to the Medical School, Hospital, and the University Community

2.4 Contribution to the Wider and Professional Community

2.5 Balancing Faculty Responsibilities

2.51 All faculty are expected to engage in teaching effectiveness; scholarly activity; contribution to the Medical School, Hospital, and the University community; contribution to the wider and professional community; and clinical service (if applicable).

2.52 Individual faculty may engage in these expressions of scholarship in varying degrees and intensities within the following constraints:

2.521 Teaching is highly regarded by CMSRU and by Rowan University and will be given major consideration in promotion decisions.

2.522 The relative weight of Scholarly Activity in the promotion decision will be determined by designation of academic educator, clinician educator, academic investigator, or clinician investigator.

2.523 Contribution to the Medical School, the Hospital, and the University community and contribution to the wider and professional community shall not be given more consideration than scholarly activity.

2.53 While different manifestations of teaching effectiveness, scholarly activity, clinical service (if applicable), contribution to the Medical School, the Hospital, and the University community, and contribution to the wider and professional community may emanate from a single work or activity of a faculty member, identical work or activity of a faculty member should, for purposes of documentation for promotion, not be counted in more than one category.

3.0 Rationale and Definitions of Ranks

3.1 Rationale for Faculty Promotion

Promotion is the recognition of a measure of stature and a reward for accomplishments by faculty within both the discipline and the profession. Promotion, the conferral of a higher academic rank, is neither automatic nor the result of seniority. At each professional rank, there are required qualifications and expectations. A fully engaged member of the medical school community recognized for promotion is one who demonstrates teaching effectiveness, engages in scholarly activity, performs clinical service (if applicable) and actively participates in service to the community and the profession. For tenured faculty this means that in addition to meeting the contractual obligations to teach, faculty need to maintain scholarly research and be fully engaged by demonstrating a commitment to service to the medical school, the university and the
broader professional community with demonstrations of increasing leadership as the years of service increase.

3.2 Definitions of the Faculty Ranks at CMSRU and Specific Rank Criteria and Process

Faculty of all ranks contribute to the Cooper Medical School of Rowan University mission of medical education, research, patient care, and service to the community. To inspire ongoing excellence in the education, advising and mentoring of students, graduate students, residents, fellows and peers, to retain faculty, and to establish local, regional, national and international recognition and reputation, Cooper Medical School of Rowan University provides promotional opportunity for medical school faculty to achieve the level of excellence defined by the promotional criteria. In exceptional circumstances the promotion process for any rank may be accelerated. The Dean’s letter of appointment includes detailed performance expectations in the relevant domains.

The four appointment designations within CMSRU are Academic Investigator (AI), Clinician Investigator (CI), Clinician Educator (CE), and Academic Educator (AE). These designations refer to the major focus of faculty effort. The Academic Investigator dedicates the majority of their time as a faculty member in the area of independent and original investigation within the basic science realm. The Clinician Investigator participates in some aspects of clinical service (patient care) and most of their faculty effort is in research which may be basic, translational, or clinical. The Clinician Educator dedicates their faculty effort to clinical service and education of students, residents, and/or fellows. The Academic Educator is a basic scientist who dedicates the major portion of their faculty effort in the area of education.

Criteria for appointments and promotions are essentially identical except that candidates for new appointments are not required to present a teaching portfolio. Appointments will be handled on an ongoing basis.

GENERAL CRITERIA FOR ACADEMIC INVESTIGATORS AND CLINICIAN INVESTIGATORS

It is expected that faculty exhibit unequivocal excellence in one of the following categories as well as significant contributions in at least one of the other areas. It is expected that every member of the faculty will participate in the medical school’s educational and service missions. The following are examples of evidence in the different categories:

TEACHING

- External peer-reviewed grants for education;
- Leadership of peer-reviewed training grants (P.I.);
- Peer-reviewed publications and books in the field of education;
- Development of new teaching methods;
- Creation of new and novel teaching materials (e.g., CDs, Websites, manual skill aids);
- Leadership roles within and invited plenary presentations at national or international education meetings and societies;
- Outstanding student and resident teaching citations/awards;
• Editorship of scholarly journals;
• Development of new, accredited training programs;
• Program director activities;
• Mentorship of students, housestaff, and peers; and
• Contributions to University/Medical School/CUH GME teaching mission (e.g., curriculum and admissions committees, documented mentoring of students, trainees, and peers).

RESEARCH

• Record for obtaining peer-reviewed research grant support (beyond initial award or mentored award, i.e., RO1 or equivalent);
• Demonstration of intellectual role in team-based science achievements (e.g., collaborative grants and awards, intellectual role in cooperative and interinstitutional group trials);
• Expectation of continued research productivity;
• Meritorious publications in peer-reviewed journals with evidence of extramural recognition (e.g., peer citations, acknowledgement in letters of recommendation);
• Creation of novel core resources that support original research of other investigators locally or nationally (e.g., annotated biospecimen repositories, computer programs, analysis tools, cell culture libraries);
• Demonstration of role as a significant intellectual contributor to the meritorious work of others;
• Membership on scientific review boards (e.g., NIH study sections, VA Merit Review, the American Heart Association, ad hoc assignments);
• Membership in selective scientific societies;
• Leadership role within and invited plenary presentations at academic national or international meetings and societies;
• Editorship of scholarly journals;
• Major involvement in clinical trials (e.g., national and/or local principal investigator, contributor to the intellectual and scientific development of cooperative research programs and clinical trials, intellectual participation in research or clinical trial consortia); and
• Invited consultant and/or participant in research oversight committees (e.g., safety/data monitoring committees, FDA panels, site visit teams).

ACADEMIC CLINICAL PERFORMANCE

• Record of grant supported clinical service projects, patient care demonstration projects, and clinical, translational or other research (funding may come from peer-reviewed grants, but also from foundation, philanthropic, governmental, and or industry sources);
• Publication of peer-reviewed clinical research in a focused area;
• Development of innovative treatments, systems of healthcare delivery, or innovative operations/treatment approaches that are recognized beyond the institution (published);
• Development of peer acknowledged, novel disease focused multidisciplinary care programs;
• Membership in selective scholarly societies;
Leadership role in regional, national and/or international professional or scientific organizations;
Editorship of scholarly journals;
Invitations to speak at and chair academic national or international professional meetings;
Establishment of peer recognized clinical practice that achieves national and/or international recognition in a focused area of expertise; and
Demonstrable record of superior quality patient care in a focused area of expertise.

GENERAL CRITERIA FOR CLINICIAN EDUCATORS AND ACADEMIC EDUCATORS

It is expected that faculty exhibit excellence in one of the following categories and contribute significantly in at least one of the other areas. It is expected that every member of the faculty will participate in the medical school’s educational and service missions. The following are examples of evidence in the different categories:

TEACHING

- Leadership in student, resident, fellow and/or peer teaching programs;
- Distinguished participation in student, resident, fellow and/or peer teaching programs;
- Development of innovative teaching and educational materials and/or programs;
- Invited speaker at CME programs and Grand Rounds;
- Leadership of CME programs;
- Documented mentoring of students, residents, fellows, and/or peers;
- Outstanding student and resident teaching citations/awards; and
- Demonstrated effectiveness as a mentor of students, residents, fellows and/or peers.

SCHOLARLY ACTIVITY

- Participation as a (preferably funded) principal investigator or co-investigator in peer-reviewed, grant supported research;
- Meritorious publications in peer-reviewed journals;
- Participation as a principal investigator or co-investigator in investigator initiated or cooperative group, clinical, translational, or basic research;
- Development of innovative teaching and educational curriculum, materials or programs with significant local, regional, or national impact;
- Mentoring students, residents, fellows, and junior faculty in scholarly activity;
- Membership on local and regional scientific review boards;
- Membership in scientific societies;
- Leadership role in regional or national meetings and societies;
- Service as a peer-reviewer/editor for clinical and scientific journals; and
- Participation as a reviewer for granting agencies (including foundations and the NIH).

ACADEMIC CLINICAL PERFORMANCE
- Record of support for clinical service, demonstration projects, and clinical, translational or other research endeavors;
- Publication of peer-reviewed clinical, translational, or basic research;
- Development of innovative treatments, systems of healthcare delivery, or clinical programs;
- Membership in scholarly clinical societies;
- Leadership role in regional or national meetings and clinical societies;
- Participation in regional, national, or international professional meetings;
- Record of high quality patient care and establishment of a productive clinical practice in an academic setting;
- Establishment of a referral based clinical practice;
- Participation as a Board Examiner for recognized certification programs;
- Participation as a site visitor or consultant for academic and/or research entities; and
- Demonstrated effectiveness as a clinical mentor.

Full Academic Rank - Tenure/Tenure Track or Non-Tenure Track

Those members of the faculty who have agreed to abide by all rules and regulations of the University and whose time is available for the clinical, research, and instructional purposes in the University for the period of time designated as a regular work week are eligible for appointment to full academic rank. Faculty whose principal duties are involved with teaching and either clinical service, patient care, or research that is not sufficient to fulfill the requirements of the Tenure Track will be placed on the Non-Tenure Track. Such appointments are without tenure and do not constitute a probationary period for tenure.

Faculty who qualify as indicated in the previous statement but who receive fifty percent (50%) or more of the total compensation of a full-time member of the faculty, from sources other than the State appropriation to the University, may be appointed at full academic rank on the non-tenure track coterminous with the availability and receipt of outside funding for the position. Coterminous appointments are without tenure and do not constitute a probationary period for tenure.

Tenure/Tenure Track and Non-Tenure Track Titles/Criteria

3.21 Instructor of (Department)
- Completion of advanced graduate degree, or equivalent experience, or an accredited residency and/or fellowship;
- Board eligibility for those with clinical training; and
- Evidence of potential for effective teaching and/or substantial academic and/or clinical achievement and scholarly activity; full engagement as a member of the medical school community.

3.22 Assistant Professor of (Department)
- Board certification (as judged appropriate by the proposing department)
- Evidence of scholarly activity demonstrating potential for further advancement in academic rank (e.g., peer-reviewed publications, participation in programs of hypothesis driven research, clinical achievement in a focused specialty/sub-specialty); and
- Excellence in training, teaching, and advising of undergraduate, medical and graduate students, residents, clinical and postdoctoral research fellows, and
colleagues; as demonstrated through the teaching portfolio, student evaluations of teaching, peer evaluations of teaching, formal awards, peer review, local and regional invited lectures.

At the Assistant Professor level it is expected that faculty will meet all the criteria expected at the Instructor level and they will embark upon a program of focused clinical (if applicable), scientific, and/or educational, and/or administrative achievement while participating in broad clinical, educational, and administrative activities of the department and the medical school.

In addition to those academic criteria noted above, candidates for promotion to Assistant Professor rank will also be evaluated on:

- Established history of continued service and teaching;
- Major, consistent contributions to the education of students; and
- Evidence of professional development activities intended to maintain a sound understanding and skill in one’s specific discipline and to improve as a teacher; and, contributions to the wider community at the local, state, regional, and/or national levels.

Candidates for promotion to the Assistant Professor level must submit:

- No more than a three page summary outlining their accomplishments and summarizing the highlights of their Teaching Portfolio and Research;
- Mandatory letter of support/recommendation from the Departmental Chair or Division Head;
- A minimum of three letters of recommendation: One from within CMSRU, but outside of the candidate’s immediate department; and two from persons at a rank equal to or greater than that applying for, outside of CMSRU that can assess regional, national or international contributions within discipline;
- Evidence of scholarly activity;
- Up to three additional letters of support of choice by the candidate may be forwarded to the committee. If the candidate is an adjunct at another institution a letter of support may be included to meet this criterion;
- For candidates who are attempting Promotion mostly on “academic educator” or “clinician educator” criteria - a letter from their Departmental Chair is strongly advised outlining the reasons for support of the promotion; and
- A Portfolio evidencing teaching effectiveness.

3.23 Associate Professor of (Department)

At the Associate Professor level it is expected that faculty will meet all the criteria of the Assistant Professor level and provide:

- Documented excellence in education, including directorship or development of major courses and electives; sustained excellence in educating medical and graduate students, residents, clinical and postdoctoral research fellows, and colleagues; and mentorship of learning colleagues: as demonstrated through the teaching portfolio, student, resident, and fellow evaluations of
teaching, peer evaluations of teaching, formal awards, peer review, local and regional invited lectures.

- Scholarship, including publication, preferably as first or last or corresponding author, of original substantive work in peer-reviewed journals;
- Reputation, including leadership in local or regional scientific affairs; and
- Emerging regional/national/international reputation for scholarly activity and/or research accomplishments supported by letters from external referees.

Candidates should demonstrate at least five years (customary seven to ten years) of service at the Assistant Professor rank at CMSRU or Assistant or Associate Professor rank at an equivalent institution; completion of the appropriate terminal degree as recognized in the field of specialization from an accredited institution or equivalent (e.g., American Board of Medical Specialties (ABMS), Royal College); ABMS board certification in a medical or clinical discipline, if appropriate; evidence of a major commitment to teaching effectiveness; demonstrated excellence in clinical service, education, scholarly activity (peer reviewed research, publication, program development or other); reputation; and, full engagement in the Medical School community and professional organizations. In exceptional circumstances the promotion process may be accelerated.

To achieve promotion from Assistant Professor to Associate Professor, medical school faculty must demonstrate excellence in two of the rank specific domains of medical faculty development and satisfactory performance in the other required domain(s).

At the rank of Associate Professor, the Four Domains of Faculty Development are:

- Clinical Services (if applicable);
- Education – formal teaching, small-group leadership, and/or clinical teaching;
- Research/Scholarly Activity – reputation, scholarship and publications; and
- Service to the Medical School, the University, the community and professional or discipline-related organizations.

In addition to those academic criteria noted above, candidates for promotion to Associate Professor rank will also be evaluated on:

- Consistent practice of mentoring of students, residents and junior faculty;
- Established history of continued service and teaching (minimum five years at rank);
- Major, consistent contributions to the education of students; and
- Evidence of professional development activities intended to maintain a sound understanding and skill in one’s specific discipline and to improve as a teacher; and, contributions to the wider community at the local, state, regional, and/or national levels.

Candidates for promotion to the Associate Professor level must submit:
No more than a three page typewritten summary outlining their accomplishments and summarizing the highlights of their Teaching Portfolio and Research;

Mandatory letter of support/recommendation from the Departmental Chair;

A minimum of three letters of recommendation:
One from within CMSRU but outside of the candidate’s immediate department; and two from colleagues at a level equal to or greater than that applying for, outside of CMSRU that can assess national or international contributions within discipline;

A minimum of six publications (includes journal articles, chapters, and monographs, but not abstracts) where candidate is preferably first or last or corresponding author;

Up to three additional letters of support of choice by the candidate may be forwarded to the committee. If the candidate is an adjunct faculty member at another institution a letter of support may be included to meet this criterion; and

A portfolio evidencing teaching effectiveness.

3.24 Professor of (Department)

At the Professor level it is expected that faculty will meet all the criteria of the Associate Professor level and provide:

- Documented excellence in education, including directorship or development of major courses and electives; sustained excellence in training medical and graduate students, residents, clinical and postdoctoral research fellows, and colleagues; and mentorship of learning colleagues; as evidenced by recognition through the Teaching Scholars Program, demonstration through the teaching portfolio, student evaluations of teaching, peer evaluations of teaching, formal awards, peer review, local, regional, national, and international invited lectures;

- Documented excellence in research, including independent and original investigation recognized by peers and by external funding;

- Scholarship, including publication as first or last or corresponding author, of original substantive work in peer-reviewed journals; and

- Reputation, including national and international recognition for research contributions supported by letters from external referees, service on study sections, editorial boards, named lectureships, leadership in professional societies and governing boards.

Candidates for Professor must demonstrate: proficiency in teaching, research, professional competence; mentoring junior faculty, residents, medical school students; and service as a reviewer of peer’s publications. They must hold a PhD, MD, DO or equivalent terminal degree with successful completion of at least five years of service (customary seven to ten years) at the rank of Associate Professor at Cooper Medical School of Rowan University, or Associate Professor or Professor rank of equivalent service at an equivalent institution; and ABMS board certification in primary specialty in a medical or clinical discipline (if applicable).
In addition to the qualifications of an Associate Professor in the areas of teaching effectiveness, scholarly activity, service, mentoring and advising, and professional activity, the candidate for Professor must demonstrate sustained excellence in clinical patient care skills involving innovations (if appropriate), research, and/or programs that measure patient outcomes and are locally and/or regionally distinctive with the potential for national and international recognition and use; education involving training, teaching, and advising of medical and graduate students, residents, clinical and post doctoral fellows, and colleagues demonstrated by an increasing portfolio of accomplishments; leadership involving significant contributions in curriculum and course development, scholarly activity, and service to the school and the professional community; and, distinctive reputation evidenced by invited scholarly memberships, participation in major committees and programs, formal awards, and invited lectures. In exceptional circumstances the promotion process may be accelerated. National and/or international reputation for the candidate is required.

Scholarly activity must reflect grant funded and/or peer-reviewed research if in the investigator designation, and recent scholarly activity as evidenced by publications in the past five years.

To achieve promotion from Associate Professor to Professor, medical school faculty must demonstrate excellence in two of the rank specific domains of medical faculty development and satisfactory performance in the other required domains.

At the rank of Professor, the Four Domains of Faculty Development are:

- Clinical Services;
- Education – formal, small-group leadership and/or clinical teaching;
- Research/Scholarly Activity – reputation, scholarship and publications; and
- Service to the medical school, the hospital (if applicable) the University, the community and professional or discipline related organizations, and reputation.

In addition to those academic criteria noted above, candidates for promotion to the rank of Professor will also be evaluated on:

- Consistent practice of mentoring of students, residents and junior faculty;
- Established history of continued service and teaching (minimum five years at rank);
- Major, consistent contributions to the education of students;
- Evidence of professional development activities intended to maintain a sound understanding and skill in one’s specific discipline and to improve as a teacher; and
- Contributions to the wider community at the local, state, regional, national, and international levels.

Candidates for promotion to Professor level must submit:
• No more than a three page typewritten summary outlining their accomplishments and summarizing the highlights of their Teaching Portfolio and Research;
• Mandatory letter of support/recommendation from the Departmental Chair or Senior Associate Dean for Faculty Affairs if the candidate is a Departmental Chair;
• A minimum of three letters of recommendation:
  One from within CMSRU but outside of the candidate’s immediate department; and two from colleagues at a rank equal to that applying for, outside of CMSRU that can assess national or international contributions within discipline;
• A minimum of ten publications (includes peer-reviewed publications, book chapters, and monographs, but not abstracts) where candidate is first or last or corresponding author;
• One letter of the candidate’s choice from an individual who can vouch for the promotion most strongly;
• The Medical School Advisory Committee on Appointment and Promotions will select at least one additional reviewer with national/international reputation in the candidate’s field to review the faculty member’s candidacy for Professor;
• Up to three additional letters of support of choice by the candidate may be forwarded to the committee. If the candidate is an adjunct faculty member at another institution a letter of support may be included to meet this criterion; and
• A Portfolio evidencing teaching effectiveness.

3.3 Modified (Qualified) Academic Rank

Those members of the faculty whose professional services occupy a period of time less than that designated as a regular workweek and/or whose professional services are only partially conducted in facilities of the Medical School or its affiliates are eligible for appointment to modified (qualified) academic rank. Faculty participating primarily in programs involving patient care shall be designated with the modifier, Clinical. Such faculty who participate primarily in research and teaching shall be designated with the modifier, Adjunct. Faculty whose service is for a limited time may be appointed with the modifier, Visiting. Faculty whose service is discontinuous or intermittent may be appointed as Lecturers.

4.0 Procedures for Promotion

4.1 Candidates apply for promotion by:

• Submitting a letter of intent to the departmental chair and the Dean
• Submitting a summary of accomplishments, updated curriculum vitae, required forms, names of evaluators as required by rank, and teaching and/or research portfolios

4.2 The template for a teaching portfolio is as follows:
A Teaching Portfolio is an executive summary of the faculty member as an educator. The Teaching Portfolio should be concise and selective, but with sufficient description and documentation to provide a record of teaching activities and evidence of teaching effectiveness. For those faculty members whose teaching activities are scholarly in nature (as evidenced by peer-reviewed support for training programs and activities, scholarly publications concerning teaching and education, creation of innovative teaching materials that are disseminated and used regionally, nationally, and/or internationally, and leadership positions in professional education societies), a more detailed and extensive Teaching Portfolio may be helpful.

4.21 **Part one: Data Relevant to Teaching Activities**
List and describe teaching-related activities in as complete a context as possible, i.e. the names of courses or presentations, the level of involvement or frequency, the number and types of students, the teaching materials that may have been produced, or the role of the faculty member in other teaching-related activities (supervisor, advisor, mentor).

4.21.1 Teaching Activities
- Undergraduate
- Graduate
- Residents and Fellows
- Peers (mentoring)

4.21.2 Curriculum Development (list tangible educational materials created; (e.g. case development, lecture, assessment tools, OSCE, web materials, etc.)
- Courses
- Clerkships
- Residency Programs
- Fellowship Programs
- Education and teaching innovations
- CME
- Outreach

4.21.3 Mentoring/Advising

4.22 **Part two: Evidence of Teaching Effectiveness**
A brief description of objective measures of teaching effectiveness. The primary element of this category is a review of teaching effectiveness including a summary of the relevant, objective documentation. The information to be summarized may include representative portions of teaching evaluations, testimonials by students, peer reviews, and special contributions. Items that may be summarized in this section include:
- Course Materials
- Student and Resident Evaluations
- Peer Review
- Professional Recognition
- Participation in professional development

4.23 **Part three:** Include information concerning any additional teaching or educational activities that are especially noteworthy, creative, innovative, peer-reviewed, or indicative of recognition outside of the institution (e.g.,
publications, contributions to scholarly teaching societies, teaching awards and recognitions, invited lectures concerning teaching and education).

4.3 The Department

4.31 Responsibilities of the academic department in the promotion of faculty:
Academic departments must establish clearly stated standards and procedures for faculty promotion consistent with the general qualifications and expectations established at the medical school level. Academic departments must articulate and document their positions regarding the expected balance (or mix) among Teaching Effectiveness, Scholarship, Clinical Service (if appropriate), Contribution to the Medical School, Hospital, and the University Community, and Contribution to the Wider and Professional Community. It is understood that the balance (or mix) may differ from one individual to the next and may change for an individual at different points in his/her career.

4.32 DEPARTMENTAL EVALUATION/COMMITTEE

Departmental Appointments and Promotions Committee

The Departmental Chair shall make recommendations to the Dean regarding appointments, reappointments, promotions, and tenure (if applicable) following a review at a meeting of the departmental Appointments and Promotions committee. This committee shall be composed of Faculty members of the department. The minimum number of members on the committee shall be either three or 10% of the departmental faculty, whichever is greater. All shall be at the rank of professor or associate professor. The maximum number of members on the committee shall be ten. At least one-half of the members shall be elected by the departmental Faculty with the remainder appointed by the Chair. The Departmental Chair shall select the chair of the committee from among its members. If fewer than three (3) faculty within the department are qualified to serve on this committee, or if a department is relatively small, the departmental committee may be comprised of faculty from a group of departments to meet the minimum membership of three (3). A quorum shall be at least one-half of the members of the committee, plus the chair of the committee or a designated member appointed by the committee chair as the presiding official. Except for actions involving instructors, all actions noted above must be reviewed and voted on by this committee. Upon request of any member of the committee, the voting shall be conducted by secret ballot. In addition, the Chair shall obtain a mail ballot or electronic mail ballot of all faculty within the department at the rank of professor and associate professor regarding actions of this committee.

Prior to submitting a recommendation for appointment, promotion, or tenure to the Dean, the Chair of the department in which the faculty member holds or will hold their primary appointment must solicit evaluations regarding the qualifications of the prospective candidate. Letters of recommendation for candidates being proposed for appointment or promotion in the full-time faculty of CMSRU should be authored by recommenders who have first-hand knowledge of the professional and/or scholarly activities of the candidate. The recommenders should have had previous professional contact with the candidate.
The vote of this group is to be reported to the Advisory Committee on Appointments and Promotions of the Medical School along with the record of the vote of all faculty in the department at the rank of associate professor and professor.

4.33 New Faculty Orientation

In addition to the documents provided by the Medical School, academic departments shall provide to new faculty members appropriate department committee documents, including the process, standards, and criteria for promotion.

4.34 Promotion Folder Preparations. The department/division is responsible for covering the costs of all in-house expenses related to the preparation of the promotion materials/folder.

4.35 Departmental Appointments and Promotions Committee decisions

4.351 Favorable recommendation – The applicant will be so informed in writing. Thereupon, the Department Appointments and Promotions Committee will forward a written report to the Medical School Advisory Committee on Appointments and Promotions. At the request of the candidate, the committee will meet with the candidate to discuss the committee’s evaluation and decision.

The Department will ensure that the promotion folder, with the departmental report, is delivered electronically to the Administrative Assistant for Faculty Affairs for review by the Medical School Advisory Committee on Appointments and Promotions. The promotion folder may also include supplementary materials from the candidate.

4.352 Unfavorable recommendation – As a result of a negative vote on a candidate, the portfolio will be returned to the applicant with a written explanation of the decision, including how the candidate does not meet the criteria. At the request of the candidate, the committee will meet with the candidate to discuss the committee’s evaluation and decision. Candidates who have not received a positive recommendation from their departmental committees may:

4.3521 Withdraw their applications at this or any point in the promotion review process (applicants who elect to withdraw will have all application materials returned to them at the conclusion of the process); or

4.3522 Ask to have their materials forwarded to the Advisory Committee on Appointments and Promotions.

4.3523 The Departmental Committee will return the promotion folder to the candidate along with its written recommendation, which must be included in the folder. All members of the committee will sign and date the report. The committee’s recommendation...
must report the numerical vote. A dated minority report with reasons for any negative or abstaining votes must be included.

4.4 The Advisory Committee on Appointments and Promotions

The Advisory Committee on Appointments and Promotions shall have the responsibility of advising the Dean as to appointments, promotions, reappointments, leaves or academic awards including tenure (if applicable). The Dean shall obtain the advice of this Committee in these matters. Appointment to or promotion of the faculty to full academic rank above the rank of instructor must be reviewed by this Committee with no delegation of its responsibility. The Committee shall also review and make recommendations for the designations of adjunct, clinical, and emeritus faculty. A subcommittee of this committee shall address tenure. The Committee shall establish and periodically review written guidelines for the award of each academic rank with the approval of a majority of the membership of the Faculty. The Committee may, on its own initiative, make suggestions as to personnel matters to the Dean.

4.41 The Advisory Committee on Appointments and Promotions shall consist of 12 members. The Senior Associate Dean for Faculty Affairs shall serve ex-officio without vote. All members must be professors or associate professors. The term of office shall be three years, with staggered terms. No member shall serve more than two consecutive terms.

4.42 Meetings shall be convened by the Dean or by the Chair; and

4.43 All departmental actions presented to the Advisory Committee on Appointments and Promotions must include a report of the results of the deliberations.

4.5 Role of the Advisory Committee on Appointments and Promotions

The role of the Committee is to provide a thorough and substantive review of the qualifications of the applicant in the following manner:

4.51 Review the Departmental Promotion Committee’s recommendation and evaluate the applicant’s qualifications for promotion against the criteria and standards established for the rank in question;

4.52 Committee may conduct a personal interview with the applicant to discuss the portfolio that has been submitted; and

4.53 After carefully considering the applicant’s portfolio, the Committee will vote on the applicant’s request for promotion.

4.54 If the recommendation of the Committee is favorable, the Committee will inform the chair of the Departmental Committee and Department chair in writing and will forward a recommendation for promotion to the Dean, accompanied by a justification for the recommendation. This justification must include a written description highlighting the evidence and process used in this evaluation. The chair of the Committee will also forward one copy of the promotion folder, along with any supplemental materials provided by the candidate, to the Dean.
If the recommendation of the Committee is unfavorable, the chair of the Departmental Committee and Department chair will receive a written explanation of the committee’s recommendation. The committee’s recommendation to the Dean must report the numerical vote. A minority report with reasons for any negative or abstaining votes must be included. The report will be sent to the Dean.

**4.6 The Dean:**

4.61 Will review the Committee recommendations, rationales, and applicant’s promotion folder;

4.62 May meet with the applicant, at which time they will discuss the applicant’s portfolio;

4.63 Will conduct a thorough and substantive review of the applicant; and

4.64 Will forward his recommendation, with an accompanying justification, to the President of RU with copies to the candidate and to the Departmental and Medical School Committee chairs. The dean will be available to meet with the Committees to discuss his recommendation if requested to do so. At this stage, the applicant who receives a negative recommendation from the Dean may exercise the option to withdraw from further consideration or to appeal the negative recommendation by advancing the application to the Committee of Review. This committee is advisory only and shall make its recommendation to the Dean.

**4.7 The University Senate Promotion Committee will receive and retain for informational purposes the recommendations and report of the Dean.**

**5.0 Role of the President**

5.1 The role of the President is largely procedural; however, he/she remains empowered to conduct substantive reviews of the qualifications of the applicants should either decide to do so.

5.2 The President will consider the recommendations of the Dean and inform the candidates of his/her decisions. Once the President has informed the candidates of his/her recommendations, candidates or the chairs may request and will be granted a meeting with the President to discuss any divergent decisions.

**6.0 Action by the RU Board of Trustees**

The President will then forward affirmative decisions to the RU Board of Trustees for action at their June meeting.