

University of South Carolina School of Medicine Greenville

Appointment and Promotion Procedures and Criteria for Non-Tenure Track Clinical Sciences Unit Faculty

Approved by School of Medicine Greenville on 30Mar18

Based on the University of South Carolina Faculty Manual, Revised June 9, 2017

Approved by the University of South Carolina Office of the Provost on [???

University of South Carolina School of Medicine Greenville

Appointment and Promotion Procedures and Criteria For Non-Tenure Track Biomedical Sciences Unit Faculty

I. Preamble

The University of South Carolina School of Medicine (USCSOM) Greenville is a University-based, community-oriented, medical school whose mission is to “Improve the health of the people and diverse communities we serve by educating health professionals who will care compassionately, teach innovatively, and improve constantly”, with a vision to “Transform health care for the benefit of the people and communities we serve.” USCSOM Greenville received full accreditation from the Liaison Committee on Medical Education in February 2016, and graduated its first class of students in May 2016.

USCSOM Greenville is one within a group of new medical schools founded since 2000 that embrace a number of changes in curricular philosophy compared with traditional medical schools established 30 or more years ago. This curricular philosophy includes an integrated approach to the clinical and biomedical sciences, a heavier reliance on student-centered learning approaches that engage learners in experiential and reflective exercises, intentional use of Bloom’s taxonomy in developing learning objectives across the full range of learning levels, assessment methods that correlate tightly with learning objectives, and lighter utilization of traditional lecture-based didactic methods. These differences in curricular philosophy require Unit faculty to spend a significantly greater proportion of their effort on curriculum development and teaching, and require a higher degree of coordinated teamwork to integrate and deliver the curriculum. Thus the performance requirements for teaching activities within these Unit criteria are intended to reflect the distinctiveness of this program. Faculty candidates for promotion are encouraged to provide supporting evidence of teaching effectiveness from institutional data unique to the Greenville campus using measures that include student and peer feedback but also include additional evidence such as instruments that assess student learning and success of clinical integration of material. Teaching in the clinical setting takes many forms, and it is the intention of this Unit to recognize such teaching as fully as possible.

For all units in the University, research and scholarship are essential and highly valued elements in the life of the faculty member, and great emphasis is placed on recognizing and rewarding these achievements. The criteria for performance reflect high expectations for clinical practice with due consideration given to the time allocated for

scholarly and teaching activity, and the unique resources available to our campus faculty.

The establishment of the Health Sciences Center, an alliance between the Greenville Health System (GHS), the University of South Carolina, Clemson University, and Furman University in 2016, and the articulation of priorities helps to guide faculty in planning for research and other scholarly activity to optimize limited resources. Unit criteria will be reviewed and periodically revised by the Unit as necessary as the research infrastructure matures. Stringent criteria should be applied for teaching and curricular scholarship/research (e.g. Glassick criteria) that are on par with more traditional forms of research. Founding faculty, and those engaged in the first four years of the medical school (2011-12 through 2014-15) may show gaps in their scholarly record because of the intensity of efforts to develop and launch the medical school curriculum. Substantial contributions toward these ends (e.g. development of new modules, courses, residencies, fellowships, learning tracks, or clerkships and development of essential programs and procedures required to launch the new medical school and expand the clinical learning environment) may be recognized as significant scholarly and/or teaching achievements as specified in the Unit criteria, but must be clearly justified as such by the candidate. Faculty have the responsibility to articulate the significance of these activities in their personal statement in their promotion and/or tenure file.

The integrated curricular structure of USCSOM Greenville requires faculty to function as a team more than would be necessary were the curriculum to stand alone in a traditional disciplinary framework. Consequently, faculty should be rewarded within the Unit criteria for advancing teamwork as evidenced by participation in group activities of the faculty, mentoring activities, shared responsibility for teaching individual sessions, integration of curricular material, interfacing between biomedical sciences and clinical sciences faculty, development of research/scholarship clusters, participation in faculty development with other faculty, assessment activities and attending to citizenship activities (such as faculty meetings, joint review sessions, etc.). Likewise, there is a high value placed on teaching, innovation in teaching, student-centered learning, and the transition into active forms of learning with a movement away from passive teaching methodologies that have dominated medical curriculum in the past. Faculty should therefore be recognized/rewarded for engagement in curricular and faculty development activities that advance capacity for innovation for themselves and the faculty as a whole.

To evaluate faculty members in the School of Medicine, the appointment and promotion criteria for performance in teaching, scholarship/research, and service should be viewed as a means of encouraging and rewarding the pursuit of excellence as well as ensuring that faculty members meet performance expectations. Since all three sets of core activities are significant and necessary for the academic health of the school, they are each considered in promotion and appointment decisions. Those who evaluate faculty under these Unit criteria should take into consideration the faculty member's personal statement to determine the significance of each accomplishment given the prevailing

standards within the candidate's own discipline to ensure a fair and equitable application of these standards across the full spectrum of faculty within the Unit.

Academic rank is determined in large part by the faculty member's achievements and reputation as a scholar, performance in teaching, and contributions to the overall mission of the institution. Expectations for academic ranks are described in the University of South Carolina Faculty Manual (Columbia campus). In the event of conflicting standards or principles between this document and the Faculty Manual of the University of South Carolina, the Faculty Manual takes precedence.

The following procedures and criteria provide a structure for appointing, evaluating, and promoting faculty members in the USCSOM Greenville who occupy non-tenure track positions. Evaluation of performance should be based on both quantitative and qualitative estimates of activities relevant to the candidate's work.

II. Procedures

A. Committee Structure and Function

The Appointment and Promotion (A&P) Committee for this Unit is comprised of representatives from each clinical department and one tenured representative from the Biomedical Sciences Department appointed by the Dean based on the nomination of each departmental chair, with priority given to faculty at the rank of Professor. The Associate Dean for Administrative & Faculty Affairs serves ex officio (non-voting).

The committee will elect a chair for a two-year term in the spring semester of alternate academic years. The chair must hold the rank of clinical professor. In the second year of the two-year term the faculty must hold a reaffirming vote and report the results of the vote to the Provost.

B. Voting

Decisions of the Appointment and Promotion Committee of this Unit will be by majority vote of all members. A simple majority (greater than or equal to 50%) of the eligible committee members shall constitute a quorum, and must be present to convene a meeting at which official business may be conducted. Votes on candidates and other matters pertaining to the A&P Committee may be done in person or through various forms of communication as established by the Unit Chair. When voting for promotion to the rank of professor, or to consider changes to the Unit criteria, at least five faculty members at the rank of full professor must be actively serving on the committee. Tenured faculty must be included in the proceedings of the committee as required by the Provost. When fewer than five faculty members are eligible to vote for a candidate who is seeking promotion to the level of professor, the full professors, with guidance from the Associate Dean for Faculty Affairs will select members outside the Unit to achieve a total of five faculty members eligible to and able to vote. In such a situation the Unit faculty will submit a list of names of eligible members for appointment by the Dean, consistent with procedures developed for the tenure track. Similarly, for consideration of Unit criteria changes, professors from other Units in the University will be selected by the Unit's professors to reach the minimum number of five. Selection of all outside members for the Unit is subject to the approval of the Dean under advisement of the A&P membership committee.

Meetings at which candidates are considered for promotion are closed to everyone except those eligible to vote on the candidate. Meetings may by rule, motion, or invitation of the chair of the meeting, be opened to anyone the body wishes to be present at the meeting and/or be heard. Administrators attending the meeting should refrain from introducing material that is appropriate for consideration at another administrative level.

The Unit members shall apply the Unit's criteria and procedures to determine whether a candidate qualifies for promotion. Votes will be recorded as "YES", "NO", or "ABSTAIN" using a secret ballot system. Voting faculty are encouraged to submit ballots unsigned. However, ballots that are voluntarily signed by the voting faculty member shall not be disqualified. Written justification of all votes at the unit level shall be mandatory and shall state specifically how the candidate meets or does not meet the unit's criteria. Proxy voting is not permitted.

Those absent from the committee meeting may not vote except when provisions have been made for secure electronic voting for the whole committee. A faculty member on leave may vote only upon written notification to the department chairperson or dean of his or her desire to do so before beginning the leave of absence.

The Chair of the Appointment and Promotion Committee will ensure that faculty members have provided appropriate justification for their ballots. To ensure that all faculty in the Unit vote, and that all votes are justified, unsigned ballots may be placed into an unmarked envelope, and the unmarked envelope placed into an envelope that records the voting faculty member's name. A staff member from the Office of Faculty Affairs may then ensure that a vote has been received from every eligible faculty member, and that each vote includes a justification. This is to be done in a manner that preserves the spirit and practice of secret balloting. Alternatively, voting may be conducted via mail or secure electronic communications at the discretion of the Committee Chair provided that the requirement for secret balloting can be met.

Ballots will be returned to the Chair of the Appointment & Promotion Committee (or his/her designee), and forwarded to the Office of Faculty Affairs. Decisions will be by simple majority, counting only the justified "YES" and "NO" votes of all members. "ABSTAIN" votes and any unjustified ballots will not be counted toward the total in establishing that an appropriate majority has been attained. A positive majority vote is defined as at least half of the total votes being cast as "YES".

Faculty who are administrators or officers of the University, including department chairs, and the dean may not vote or make recommendations on a file in more than one capacity or at more than one level.

C. General Procedures & Qualifications

All School of Medicine procedures will be in conformity with the University-wide timetable for non-tenure track promotion considerations and will comply with the University of South Carolina procedures in the most current Columbia Campus Faculty Manual (presently, as revised on June 9, 2017).

All faculty members below the rank of professor are eligible to be considered for promotion each year. The chair of the Appointment and Promotion Committee, in

collaboration with the departmental Academic Vice Chair, is responsible for notification of the individual faculty members under consideration (with a copy to the Faculty Affairs Office). Potential candidates for promotion will be advised of their eligibility for promotion by the dean, department chair, or other appropriate administrator by the date included in the university promotion calendar on the provost's website. A faculty member who intends to apply for promotion in the next cycle must so inform the dean, department chair, or other appropriate administrator no later than 15 calendar days after the first notification. On the dates listed on the official calendar, each unit must provide the provost with a list of those faculty members who intend to apply for promotion.

D. The Promotion File

The faculty member desiring consideration must submit an updated file to the Unit chair by the stated deadline. It is the candidate's responsibility to provide compelling evidence that s/he has fulfilled all requirements of the Unit criteria for promotion. The candidate and the academic unit should follow University Committee on Tenure and Promotion (UCTP) guidelines for compiling files. The record of teaching, research, and service shall be thoroughly documented in the file. The Unit is responsible for (a) providing a synthesis of evaluations of the candidate's teaching performance where appropriate, (b) obtaining at least five evaluations of the candidate's research and scholarship from outside the University of South Carolina, (c) ensuring that the correct criteria are used, and (d) assembling the candidate's file in a manner consistent with UCTP guidelines.

The candidate's file should contain the following items when relevant to the Unit's criteria:

- A summary of teaching activity and evaluations of teaching performance, including peer and student evaluations;
- Distribution of % time in teaching, research & service;
- A list of publications, papers presented, grant proposals, etc.;
- A list of service activities, such as clinical responsibilities, work for college and university committees; student advisement, participation in professional societies, and relevant public service;
- Documentation of experience at the University of South Carolina;
- Description of relevant experience elsewhere;
- Description of participation in interdisciplinary education and research activities; and
- All external evaluations of a candidate's scholarly and other professional activities received by the unit
- In addition, the candidate should compose a Personal Statement that helps the reviewers of the file understand the candidate's perspective, the significance of the achievements, and explains any special circumstances relevant to the candidate's record.

E. Letters from Outside Reviewers.

Unit procedures for the evaluation of the research component of the file require that at least five evaluations of the candidate's research and scholarship be obtained from impartial scholars at peer or aspirant institutions within the field, outside the University of South Carolina. If a person can be shown to be one of the leading scholars in a particular field, that person may be used as an outside evaluator even if he or she is at an institution that is not peer or aspirant. Non-university specialists may be used as outside evaluators; however, the majority of evaluators normally must be persons with academic affiliations. Persons who have co-authored publications, collaborated on research, or have been colleagues or advisors of the applicant normally should be excluded from consideration as outside evaluators. All evaluators must be asked to disclose any relationship or interaction with the applicant that might conflict with rendering an objective evaluation of scholarly performance. The outside evaluators must be selected by the Unit except as provided below for jointly appointed faculty.

In the case of a joint appointment, each secondary unit must be given an opportunity to propose outside evaluators and to comment on evaluators proposed by the primary unit. Primary and secondary units should work together to obtain a suitable, representative group of evaluators. In any event, an evaluation must be solicited from at least one evaluator nominated or approved by each secondary unit. The unit should include in the file a summary of the professional qualifications of each outside evaluator or a copy of each evaluator's curriculum vita, along with a copy of a letter requesting the evaluation and informing the evaluator of the unit's relevant criteria for promotion.

Each evaluator should be provided with a letter requesting the evaluation and informing the evaluator of the Unit's relevant criteria for appointment or promotion, the candidate's vita and up to five representative publications selected by the candidate, and other materials evidencing the candidate's research or such portion of the candidate's research as the evaluator is being asked to evaluate. The evaluator will be asked to evaluate the quality of the research, including the quality of publication venues. Where appropriate, the evaluator will be asked to evaluate the quantity of the candidate's research and scholarship.

A summary of the professional qualifications of each outside evaluator or a copy of each evaluator's curriculum vita must be included in the file, along with a copy of the letter sent to the evaluator.

F. Evaluation of Teaching

University procedures for the evaluation of teaching require peer and student evaluations, conducted periodically throughout the faculty member's appointment at the University. A summary and evaluation of the faculty member's teaching, based on clearly specified criteria, must be included in the faculty member's promotion file. This summary should give context to student evaluations of the

faculty member's teaching by noting, e.g., whether evaluations of a particular class historically have been low; in a multi-section course, how the faculty member's evaluation scores compare with those in the other sections; or whether poor evaluation scores are correlated to a faculty member's strict grading standards. Additional information regarding teaching performance shall be considered in accordance with the specific provisions within these Unit criteria as outlined in the "Criteria for Achievement" sections below, and specific provisions are made for Research Track faculty who teach primarily or exclusively in the context of the research environment.

III. Qualifications & Requirements for Rank Appointments

A. Eligibility Criteria

- Earned doctoral or discipline terminal degree.
- Selection for or current USCSOM-Greenville non-tenure track faculty appointment within any of the clinical departments (Anesthesia, Medicine, Emergency Medicine, Family Medicine, Obstetrics & Gynecology, Orthopedic Surgery, Pathology, Pediatrics, Psychiatry, Radiology, or Surgery).
- For physicians and non-physician clinicians, board certification or satisfactory eligibility or equivalent experience base and clear licensure status (if applicable).

Faculty members are responsible to meet all elements of the criteria under which they are applying for promotion. If the candidate is eligible under more than one set of criteria, the candidate must designate which set of criteria they have elected. For promotion from Assistant Professor to Associate Professor, the candidate may choose either the promotional criteria in effect at the time of their initial hiring, or the most current promotion criteria at the time of their application for promotion. For promotion from Associate Professor to Professor, the faculty member shall be responsible for meeting Unit criteria and University standards in effect at the time of their application for promotion.

The general performance in the areas of teaching, scholarship/research, and service comprises the basis for evaluation for promotion.

The USCSOM Greenville Appointment and Promotion Committee requires that the percentage of effort assignments, among the three areas of teaching, scholarship/research, and service/administration be established by the candidate's departmental chair. A candidate's percentage of effort assignment is determined by averaging the percentage of effort assignments recorded in the candidate's Annual Faculty Evaluation for the years under consideration. It is recognized that

achievements in a given area may be limited by the effort assigned, i.e., by limits imposed by the candidate's job description. Nevertheless, all candidates must meet minimum standards stated in the Unit criteria, with higher expectations for candidates with relatively higher effort in any specific category.

Qualifications for appointment, as set forth in the University Faculty Manual (listed below) are not intended as justification for automatic promotion; conversely, justified exceptions may be made.

Criteria for all promotion and appointment decisions shall require a record of accomplishment indicative of continuing development of the faculty member in research, teaching, and service, and appropriate progress toward development of a national or international reputation in a field.

Assistant Professor. To be eligible for appointment at the rank of assistant professor, a faculty member normally is expected to hold the earned doctor's degree or its equivalent and must possess strong potential for development as a teacher and scholar. For disciplines that do not offer a doctoral degree, the terminal degree available in that field is required. For practicing physicians and other doctoral level clinicians who are eligible for clinical Board certification, certification by the appropriate certifying medical board (if applicable) is generally required. Board-eligible physicians who have completed or are actively participating in a specialty fellowship program are eligible for appointment at this rank.

Associate Professor. To be eligible for appointment at the rank of associate professor, a faculty member must have a record of excellence in either research or teaching accompanied by at least a good record in the other areas. Additionally, a candidate must show evidence of progress toward establishing a national or international reputation in a field. The faculty member normally is expected to hold the earned doctor's degree and must possess strong potential for further development as a teacher and scholar. For practicing physicians and other doctoral level clinicians, certification by the appropriate certifying medical specialty board (if applicable) is required.

Professor. To be eligible for appointment at the rank of professor, a faculty member must have a record of excellent performance in both teaching and research, or recognized professional contributions, and at least a record of good performance in service. The faculty member normally is expected to hold the earned doctor's degree and have at least nine years of effective, relevant experience. Additionally, the candidate must have evidence of a national or international reputation. For practicing physicians and other doctoral level clinicians, certification by the appropriate certifying medical specialty board (if applicable) is required.

The qualifications for appointment to these positions and positions bearing other titles, such as lecturer, clinical professor, or research professor, are specified in the University Policy ACAF 1.06 Unclassified Academic Titles and are subject to periodic change.

Clinical Versus Research Tracks

The modifiers, “Clinical” and “Research” preceding rank (Assistant Professor, Associate Professor, Professor) are used to delineate non-tenured appointments.

The title modifier “Clinical” is used here in the University context (as opposed to medical context), and is appropriate for any distribution of activities between teaching, research, and service as suits the need of the medical school under oversight of the Dean.

The Research modifier is also permitted for a wide range of distribution of activities between teaching, research, and service, but should be reserved for those whose primary contributions are in the research/scholarship domain. Most often, however, the Research modifier is associated with fixed-term contracts connected to temporary funding sources (e.g. research grants), and a relatively minor role (or no role) in conventional teaching. Specific provisions associated with Research Faculty are described in the Faculty Manual.

Research Faculty are eligible for appointment or promotion under the same criteria provided for Clinical Faculty if their assigned responsibilities includes 20% or more time allocated to teaching. In recognition of the limited opportunities for conventional teaching for the more traditional Research Faculty with less than 20% time assigned to teaching activities, specific criteria for the Research track are provided (below) to evaluate non-classroom oriented teaching activities.

Determination of rank must be re-established if any faculty member should move between Clinical and Research tracks.

Jointly Appointed Faculty

In situations in which a faculty member holds a joint appointment between this Unit and another Unit of the University, the criteria for granting promotion to the jointly appointed faculty member shall be those of the primary unit. For faculty members holding joint appointments, each secondary unit must be given an opportunity to propose outside evaluators and to comment on evaluators proposed by the primary unit. Primary and secondary units should work together to obtain a suitable and representative group of evaluators. An evaluation must be solicited from at least one evaluator nominated or approved by each secondary unit. Thus, when a jointly appointed faculty member's

primary unit is within the USCSOM Greenville the faculty member will follow the School's criteria for tenure and promotion. When a jointly appointed faculty member's secondary unit is USCSOM Greenville, the School's Appointment and Promotion Committee will work collaboratively with the primary unit to select a suitable and representative group of evaluators.

Any department or program that is the secondary unit for one or more faculty members with joint appointments must have in effect a written statement of procedures, which must be approved by the University Committee on Tenure and Promotion, and by which the views of all faculty eligible to participate in evaluation of the candidate will be solicited and provided for inclusion in the candidate's file. In cases in which the secondary unit does not achieve consensus regarding a file, the secondary unit may submit two letters for inclusion in the candidate's file: A majority and a minority report.

Any department that is the primary unit for one or more faculty members with joint appointments must include in its criteria processes for (1) involving each secondary department or program in the selection of outside evaluators; (2) making the candidate's file available to eligible faculty of each secondary unit; and (3) obtaining formal input from the eligible faculty of each secondary unit and placing it in the candidate's file at least five working days prior to the unit's vote on the application. Faculty who are members of both the primary and secondary unit can only vote in the primary unit.

A memorandum of understanding (MOU) must be in place for all faculty members holding joint appointments. The MOU should include (1) identification of the promoting unit; (2) teaching load and split of teaching load between the primary and secondary units; (3) formula and criteria for sharing indirect cost return (IDCR) among the units; (4) service responsibility load and split between the units; and 5) detailed procedures for addressing Faculty Manual requirements for involvement of the secondary unit or program in selecting outside evaluators, making the candidate's file available to eligible voting faculty of the secondary unit, and the collection and inclusion of input from faculty from the secondary unit into the candidate's file at least five working days prior to the date of any scheduled meeting to vote on the candidate's file. The MOU should include signatures of the jointly appointed faculty member, the unit heads of the primary and secondary units, the deans of the colleges in which the units reside, and the provost. The teaching load for a joint appointment should not be greater than for a faculty member of the same rank in the primary unit. The service load for a joint appointment should be comparable to normal service load of a faculty member of the same rank in the primary unit. The MOU should be included in the candidate's primary file.

B. File submission and handling

1. Promotion Procedures

The department chair will be notified of the University timetable for promotion each year. It is the responsibility of the department chair to notify all appropriate faculty of the timetable each year. Faculty must notify their department chair or dean in writing indicating whether or not they will request promotion each academic year.

Any faculty member desiring consideration for promotion must submit a completed file to the Unit Appointment & Promotion Committee by the deadline specified in the Provost's Non-Tenure Promotion Calendar for the appropriate academic year. The Unit A&P Committee will contact outside referees and obtain agreement to review files according to the Provost's Non-Tenure Promotion Calendar.

The candidate bears primary responsibility for preparation of the file on which the decision will be based. The candidate should see to it that appropriate materials have been prepared and submitted for all sections for which s/he is responsible. The faculty member shall include a sheet listing the materials s/he has included in the file. The Provost's Office also provides a list indicating the expected order of materials in Promotion files. Included in each file must be the original letter of appointment and in the case of a joint appointment, a copy of the Memorandum of Understanding (MOU). The candidate should consult the most current version of the UCTP Guide to Tenure and Promotion in preparing for file submission.

Both the candidate and the academic unit should assemble files that contain the following items if and when relevant to the criteria and to the candidate under consideration:

- a) Evaluations of teaching performance;
- b) A list of publications, papers presented, grant proposals, and the like;
- c) As appropriate, evidence of creativity or performance in the arts;
- d) A list of service activities such as clinical patient care, work on unit, college and university committees, student advisement, participation in professional societies, and relevant public service;

- e) Documentation of experience at the University of South Carolina;
- f) Description of relevant experience elsewhere;
- g) Description of participation in interdisciplinary education and research activities; and
- h) All external evaluations of a candidate's scholarly or creative achievements and other professional activities received by the units.

The chair of the Unit Appointment and Promotion Committee shall ensure that the file is correctly assembled and made available to the members of the Unit committee for evaluation prior to the discussion of the file.

Consideration of promotion requires that at least five evaluations of the candidate's scholarship and research be obtained from impartial scholars at peer or aspirant institutions within the field, outside the University of South Carolina.

The candidate may solicit additional letters of support, which will be filed in a separate section from that of the external referees' letters. Written letters from previous years are not automatically included in the file, however, they may be included if written permission from the author is obtained.

The chair of the Appointment and Promotion Committee will forward all recommendations to the Associate Dean for Faculty Affairs with supporting material for consideration by the Dean.

The Dean will review the file, add an assessment and recommendation, and forward the file to the Provost.

If the unit fails to give the candidate a favorable vote, the Unit's A&P chair (or if the chair is not privy to the unit proceedings, a designated senior faculty member who was) will notify the candidate promptly and shall, upon request by the candidate, without attributions, provide the candidate with a written synopsis of the discussion and an indication of the strength of the vote of the unit. Candidates dissatisfied with the unit's recommendation may send a written request to the chair of the Unit's promotion committee for the file to move forward, and should consult the Faculty Manual guidelines on grievance procedures. Only if the candidate files a written appeal in this manner will the file be forwarded to the next level of review; i.e., department chair or dean.

After the Unit has voted, only the following items may be added to the file:

- a. Unit faculty vote justifications, and statements from the department chair, dean, and provost accompanying the file to the next steps of the procedure.
- b. Material information arising as a consequence of actions taken prior to the unit vote, for example (a) letters from outside evaluators solicited before but received after the unit vote; (b) notifications of acceptance of manuscripts referred to in the file; (c) publication of books or articles which had been accepted prior to the unit vote; and (d) published reviews of a candidate's work which appear after the unit vote.
- c. Letters from faculty members in the Unit. Each faculty member, whether or not authorized to vote, may write to the department chair, and/or the dean and/or the provost. Each of these letters will become part of the file at the addressee's level. In the case of joint appointments, letters from the secondary units will also be included.
- d. If new information is received by the UCTP that may not be added to the file under the provisions described above, it shall not be considered by the UCTP in its deliberations regarding its recommendation.

Failure to recommend favorably at a particular time is without prejudice with respect to future consideration.

IV. Promotion Criteria

Evidence of progressively effective performance is required for advancement through faculty ranks. Members of the Appointment and Promotion Committee will be guided by the following criteria in making their recommendations.

Candidates for promotion should demonstrate a commitment to teamwork and active participation in faculty development activities consistent with the student-centered, integrated curricular model. Accomplishments in a faculty position at another educational institution may be considered in evaluating a candidate for promotion. However, work accomplished at University of South Carolina Greenville is to be weighted more heavily than work performed elsewhere, prior to joining the University faculty.

A. Assistant Professor to Associate Professor (Clinical or Research)

Promotion from the rank of Assistant Professor to the rank of Associate Professor should be requested only if individuals show strong potential that they will become

leading teachers, scholars/researchers, or clinicians. Promise should be substantiated by evidence. A candidate at the rank of Associate Professor must possess maturity of judgment, personal and professional integrity, highly motivated productivity, potential for leadership, and commitment to institutional and professional goals. The USC Columbia Faculty Manual (17Dec13) specifies that: *“Unit criteria for promotion to associate professor [and for tenure at the rank of associate professor] shall require, at a minimum, evidence of excellence in either research and/or creative activities or teaching, accompanied by a good record in the other areas, and evidence of progress toward establishing a national or international reputation in a field”.*

There is no absolute minimum time of service at USC School of Medicine Greenville for non-tenure track faculty to be considered for promotion to the rank of Associate Professor, however, a total length of service in academia of five years at the rank of Assistant Professor is generally considered to be the minimum.

B. Associate Professor to Professor (Clinical or Research)

Promotion from the rank of Associate Professor to the rank of Professor should be based upon promise fulfilled. A move to the rank of Professor should be accompanied by evidence of attainment of national or international stature in a field. Additionally, a candidate for promotion at the rank of Professor must demonstrate maturity of judgment, personal and professional integrity, leadership skills, administrative abilities, and commitment to institutional and professional goals. Promotion from the rank of Associate Professor to the rank of Professor generally requires, at a minimum, evidence of excellence in research and teaching, accompanied by a record in service that is at least good, and evidence of national or international stature in a field. It is generally expected that the candidate has a record of continuous scholarly activity. Exceptions should be noted and explained in the candidate’s personal statement.

There is no absolute minimum time of service at USC for faculty to be considered for promotion to the rank of Professor. However, a total length of service in academia of nine years at or above the rank of Assistant Professor is generally considered to be the minimum.

C. Criteria for Achievement

1. Scholarship (Clinical or Research Track)

Faculty members are expected to maintain a continuous record of peer-reviewed work that contributes to the knowledge base in the faculty member's respective discipline. Of major importance are peer-reviewed articles in high-quality journals, research grants or scholarly projects with external support, authored or edited books, book

chapters, monographs with recognized publishers, and disseminated and peer-reviewed curricular materials. However, we accept a broad view of scholarship in which diverse contributions may be counted as evidence to support scholarly achievements, and look to the Glassick Criteria as described by the American Association of Medical Colleges (AAMC 2013) for guidance on what should be recognized. Each of the 6 delineated attributes in Glassick (clear goals, adequate preparation, appropriate methods, significant results, effective presentation, and reflective critique) should be evident in scholarly works. [Reference: https://medicine.hofstra.edu/pdf/faculty/facdev/facdev_prodev_paradigmofscholarship.pdf] We recognize that not all scholarly work should be counted equally, and that several attributes help to differentiate the value of individual works in demonstrating scholarly productivity, including the extent to which each of the Glassick categories have been met, and the influence of the work on the practice of medicine, the delivery of health care and/or the scholarly reputation of the institution. Development of new curricular materials or methodologies may be considered as teaching activities or research/scholarship activities depending on their dissemination and the degree to which external peers are engaged in their review. Due to the diversity of the disciplines represented within the Unit, the distribution of scholarly activities is likewise expected to vary between different members of the faculty.

- a. **Outstanding:** There must be an exemplary record of campus leadership in research/scholarship and publications and/or disseminated scholarly work of merit and significance with the candidate ideally reflecting a mixture of roles including collaborative team member, principal collaborator and/or senior author. It is not possible to give a precise, quantitative criterion for the number of publications, since the scope and influence of the work must be weighed in each case. Work that is published in high impact journals or venues should be given more weight, as should collaborative clinical or curricular research that advance the institution's clinical, research and/or teaching missions. Peer-reviewed published curricular materials may be counted, and should be weighted in proportion to the effort required to produce the material as well as its relative impact, if known. Research grants awarded represent significant achievements as peer-reviewed scholarly activities. Consistent mentoring in research/scholarship of junior faculty within the USCSOM Greenville that results in demonstrable results is also evidence of an "outstanding" performance level.

In addition, the candidate's scholarship should have become recognized by three or more of the following: approval or funding of a competitive research grant with candidate as the principal investigator; editorship for a refereed professional or scientific journal; appointment to a study section, scientific task force, research advisory group for NIH or equivalent; participation in a national/international task force or committee to establish clinical practice standards; or a consistent record of invited scientific presentations at national or international meetings.

Documentation will include copies of publications, evidence of other peer recognition as described, record of grant funding achievements as recorded in the University Research Office USCeRA (or equivalent) system, and favorable review of the significance of the candidate's scholarship in outside letters of reference. Five or more outside referee letters should attest to the candidate's achievement of a state, regional or national reputation in some area in his or her field. Manuscripts that are in preparation or under review may not be counted unless they are accepted for publication after the candidate's file is submitted.

- b. **Excellent:** There must be evidence of campus leadership in research/scholarship and a very strong record of publications and/or disseminated scholarly work of merit and significance with the candidate reflecting a mixture of roles including collaborative team member, principal collaborator and/or senior author. It is not possible to give a precise, quantitative criterion for the number of publications, since the scope and influence of the work must be weighed in each case. Work that is published in high impact journals or venues should be given more weight, as should collaborative clinical or curricular research that advance the institution's clinical, research and/or teaching missions. Peer-reviewed published curricular materials may be counted, and should be weighted in proportion to the effort required to produce the material as well as its relative impact, if known. Research grants awarded represent significant achievements as peer-reviewed scholarly activities. Book reviews, letters to the editor, published or unpublished abstracts of presentations, and other non-peer reviewed materials represent lesser accomplishments but may be considered as supporting evidence in meeting this requirement.

In addition, the candidate's scholarship should have become recognized by one or more of the following: approval or funding of a competitive research grant with candidate as the principal investigator; editorship or editorial board membership for a refereed professional or scientific journal; regular reviewer for recognized peer-reviewed journals or of grant proposals for a study section of a competitive grant-awarding agency; appointment to a study section, scientific task force, participation in a national/international task force or committee to establish clinical practice standards; research advisory group for NIH or equivalent; or several refereed scientific presentations at national or international meetings.

Documentation will include copies of publications, evidence of other peer recognition as described, record of grant funding achievements as recorded in the University Research Office USCeRA (or equivalent) system, and favorable review of the significance of the candidate's scholarship in outside letters of reference. Manuscripts that are in preparation or under review may not be counted unless they are accepted for publication after the candidate's file is submitted. Successful mentoring of junior faculty within the USCSOM Greenville in research/scholarship that results in demonstrable results is also evidence of an "excellent" performance level. Outside letters should attest to the candidate's

achievement of a state, regional or national reputation in some area in his or her field.

- c. **Good:** There must be publications and/or disseminated scholarly work of merit and significance. The candidate must serve as senior author or principal collaborator for some manuscripts or peer-reviewed book chapters. It is not possible to give a precise, quantitative criterion for the number of publications, since the scope and influence of the work must be weighed in each case. Work that is published in high impact journals or venues should be given more weight, as should collaborative clinical or curricular research that advance the institution's clinical, research and/or teaching missions. Peer-reviewed published curricular materials may be counted, and should be weighted in proportion to the effort required to produce the material as well as its relative impact, if known. Research grants awarded represent significant achievements as peer-reviewed scholarly activities. Book reviews, letters to the editor, published or unpublished abstracts of presentations, and other non-peer reviewed materials represent lesser accomplishments but may be considered as supporting evidence in meeting this requirement.

Documentation will include copies of publications, evidence of other peer recognition as described, and favorable review of the significance of the candidate's scholarship in outside letters of reference. Manuscripts that are in preparation or under review may not be counted unless they are accepted for publication after the candidate's file is submitted.

- d. **Fair:** Peer-reviewed publications and/or disseminated scholarly work of merit and significance. It is not possible to give a precise, quantitative criterion for the number of publications, since the scope and influence of the work must be weighed in each case. Work that is published in high impact journals or venues should be given more weight, as should collaborative clinical or curricular research that advance the institution's clinical, research and/or teaching missions. Peer-reviewed published curricular materials may be counted, and should be weighted in proportion to the effort required to produce the material as well as its relative impact, if known. Research grants awarded represent significant achievements as peer-reviewed scholarly activities. Book reviews, letters to the editor, published or unpublished abstracts of presentations, papers submitted but not yet accepted, and other non-peer reviewed materials represent lesser accomplishments but may be considered as supporting evidence in meeting this requirement.

Documentation will include copies of published work and drafts of work that have been accepted by a journal or are in press. Manuscripts that are in preparation or under review may not be counted unless they are accepted for publication after the candidate's file is submitted.

2. Teaching

A. Clinical Track

The USCSOM Greenville places a priority on teaching. Teaching refers to all forms of medical instructional activities (undergraduate-, graduate-, or continuing-medical education) on and off campus, including teaching assigned modules, courses, clerkships and training programs; engaging in curricular and program development; development of learner-centered & active learning activities; establishment of effective methods of learner assessment; competency-based approaches in medical/healthcare education as well as teaching through research mentoring of students, fellows, postdocs and other learners engaged in research/scholarship training. Development of new curricular materials or methodologies may be considered as teaching activities or research/scholarship activities depending on their dissemination and the degree to which external peers are engaged in their review. Clinical teaching and supervision are recognized and valued for contributing to effective instruction in the Unit. Due to the diversity of the disciplines represented in this Unit, the type and distribution of teaching activities may vary considerably between different faculty members. Alternatives to the traditional classroom teaching model, such as contributions to the teaching lists in Appendix A, are encouraged and may be included in the clinician candidate's application or personal statement. Candidates are encouraged to present diverse teaching/education accomplishments in a portfolio to support the criteria outlined below.

It should be noted that teaching in the clinical setting may not be conducive to formal evaluation by students or peers using the Likert Scale (1 to 5). Furthermore, the teaching clinician may receive a limited number of student evaluations, making the assessment of the teaching quality inaccurate or impossible using a numerical scale.

- a. **Outstanding:** There must be recognition as a highly effective teacher of medical students, graduate students, residents, and/or fellows. Documentation may include an average rating greater than 4.4 on a 5-point Likert scale where higher numbers are associated with better performance (with allowance made for equivalent performance when available data are scaled differently) on student and peer evaluations as appropriate and other formal USCSOM Greenville metrics for teaching evaluation. The faculty member should document leadership and mentoring in teaching on the Greenville and affiliated campuses and demonstrate active participation and clear leadership in curricular integration, and teaching-related faculty development activities. Candidates should provide clear evidence of the use of active learning in the classroom, or innovation in teaching and assessment such as web content development. Clinicians whose teaching is primarily in the form of patient care may offer alternative forms of evidence of

performance that may be unique to their diverse learning environments. In this case, candidates should articulate the connection between advancement of learners in clinical practice settings where prevailing norms related to classroom teaching of university courses do not apply or do not fully capture the value added for assigned learners (e.g. clinical fellows, residents, interns, preceptor-students, etc.). Candidates should demonstrate national recognition for teaching and/or curricular accomplishments.

In addition, at least two of the following achievements will be documented: publication in a refereed journal on educational issues; multiple teaching awards from residents or medical students; peer teaching beyond the institution at regional, state, or national professional meetings (including CME/CPD); receipt of a career teacher grant or award, development of residency or fellowship, service as Chair or Vice Chair of Academics of a unit for at least 3 years, service as a Director of residency or fellowship for at least 3 years, serving as a medical student clerkship director for at least 5 years or serving as principal investigator for a training grant awarded to the candidate's department. Please refer to the teaching section in appendix A.

In addition to being effective teachers, USCSOMG expects each candidate to display genuine qualities of professionalism, ethical behavior, and leadership as servants to patients and other professionals in the delivery of their teaching.

- b. **Excellent:** There must be recognition as an effective teacher of medical students, graduate students, and/or residents. Documentation may include an average rating greater than 4.10 on a 5-point Likert scale where higher numbers are associated with better performance (with allowance made for equivalent performance when available data are scaled differently) on student and peer evaluations and other formal USCSOM Greenville metrics for teaching evaluation. The faculty member should document active participation and leadership in curricular integration and teaching-related faculty development activities. Candidates should provide evidence of the use of active learning in the classroom, or innovation in teaching and/or assessment such as web content development. Clinicians whose teaching is primarily in the form of patient care may offer alternative forms of evidence of performance that may be unique to their diverse learning environments. Candidates should demonstrate preliminary evidence of national recognition for teaching and/or curricular accomplishments.

In addition, publication in a refereed journal on educational issues; teaching awards from residents or medical students; peer (including CME/CPD) teaching beyond the institution at regional, state, or national professional meetings; development of clerkship or elective, service as a Director of a clerkship or elective rotation for at least 3 years, or receipt of a career teacher grant or award, or serving as principal investigator for a training grant awarded to the department will also be evidence of proficiency in this area. Please refer to the teaching section in appendix A.

In addition to being effective teachers, USCSOMG expects each candidate to display genuine qualities of professionalism, ethical behavior, and leadership as servants to patients and other professionals in the delivery of their teaching.

- c. Good:** There must be recognition as an effective teacher of medical students, graduate students, and/or residents. Documentation may include an average rating greater than 3.60 on a 5-point Likert scale where higher numbers are associated with better performance (with allowance made for equivalent performance when available data are scaled differently) on student and peer evaluations and other formal USCSOM Greenville metrics for teaching evaluation, with favorable letters from the clerkship and/or training director(s) as appropriate. The candidate should document active participation in teaching-related faculty development activities as a learner, or participation in curricular development or web content development or development of a clerkship or elective teaching session. Clinicians whose teaching is primarily in the form of patient care may offer alternative forms of evidence of performance that may be unique to their diverse learning environments. In this case, candidates should articulate the connection between advancement of learners in clinical practice settings where prevailing norms related to classroom teaching of university courses do not apply or do not fully capture the value added for assigned learners (e.g. clinical fellows, residents, interns, preceptor-students, etc.). Please refer to the teaching section in appendix A.

In addition to being effective teachers, USCSOMG expects each candidate to display genuine qualities of professionalism, ethical behavior, and leadership as servants to patients and other professionals in the delivery of their teaching.

- d. Fair:** There must be recognition as an effective teacher of medical students, graduate students, and/or residents. Documentation may include an average rating greater than 3.20 on a 5-point Likert scale where higher numbers are associated with better performance (with allowance made for equivalent performance when available data are scaled differently) on student and peer evaluations and other formal USCSOM Greenville metrics for teaching evaluation, with favorable letters from the module, clerkship and/or training director(s) as appropriate. The faculty member should document some participation in teaching-related faculty development activities as a learner. Clinicians whose teaching is primarily in the form of patient care may offer alternative forms of evidence of satisfactory performance (as above).

In addition to being effective teachers, USCSOMG expects each candidate to display genuine qualities of professionalism, ethical behavior, and leadership as servants to patients and other professionals in the delivery of their teaching.

B. Teaching [Research Track]

The USCSOM Greenville places a priority on teaching. Teaching refers to all forms of

medical instructional activities on and off campus, including teaching through research mentoring of students, fellows, postdocs, faculty, peers, and other learners engaged in research/scholarship training.

Research Track faculty whose assigned time distribution includes more than 20% of time in teaching should follow the guidelines provided for Clinical Track faculty found elsewhere in this document.

Research Track faculty who are on time-limited contracts tied to external funding that precludes significant job responsibilities directly to teaching, or other faculty whose assigned time distribution in teaching is less than or equal to 20%, the following criteria should be used in judging teaching performance. Candidates should articulate the connection between advancement of learners in research settings where prevailing norms related to classroom teaching of university courses do not apply or do not fully capture the value added for assigned learners.

a. **Outstanding:**

The faculty member should document leadership active and ongoing participation and clear leadership in teaching, mentoring or training a mixture of high-, medium- and low-level learners in the research environment (e.g. research fellows, clinical fellows, residents, postdocs, visiting faculty, junior faculty, or senior faculty).

In addition, at least two of the following achievements will be documented: publication in a refereed journal on research mentoring; awards from residents or medical students directly related to the mentoring relationship of the candidate; peer teaching beyond the institution at regional, state, or national professional meetings; serving as principal investigator for a training or mentoring grant focused on the development of researchers including junior faculty. Please refer to the teaching section in appendix A.

In addition to being effective teachers, USCSOMG expects each candidate to display genuine qualities of professionalism, ethical behavior, and leadership as servants to patients and other professionals in the delivery of their teaching.

b. **Excellent:** The faculty member should document active and ongoing participation and clear leadership in teaching, mentoring, or training high-level learners in the research environment (e.g. research fellows, clinical fellows, residents, postdocs, visiting faculty, junior faculty, or senior faculty).

In addition, one of the following: publication in a refereed journal on research mentoring; awards from residents or medical students directly related to the mentoring relationship of the candidate; peer teaching beyond the institution at regional, state, or national professional meetings; or serving as principal investigator for a training or mentoring grant focused on the development of researchers including junior faculty. Please refer to the teaching section in appendix A.

In addition to being effective teachers, USCSOMG expects each candidate to display genuine qualities of professionalism, ethical behavior, and leadership as servants to patients and other professionals in the delivery of their teaching.

- c. **Good:** The faculty member should document active participation in direct teaching or training of mid- to high-level learners in the research environment (e.g. residents, graduate students, research fellows, clinical fellows, postdocs, visiting faculty, junior faculty, or senior faculty). Please refer to the teaching section in appendix A.

In addition to being effective teachers, USCSOMG expects each candidate to display genuine qualities of professionalism, ethical behavior, and leadership as servants to patients and other professionals in the delivery of their teaching.

- d. **Fair:** The faculty member should activity in assisting in teaching or training of learners in the research environment (e.g. medical students, residents, graduate students, research fellows, clinical fellows, postdocs, visiting faculty, junior faculty, or senior faculty).

3. Service (Clinical or Research Track)

The faculty of the USCSOM Greenville recognizes a responsibility to provide service to the patients, medical school, hospital system, University, the community, and the profession. As an academic unit within the University, faculty members participate in a broad range of intellectual, social, and governance activities, and lend their professional expertise to advance their disciplines through work with outside organizations. In addition, faculty members extend their expertise to service activities that support their profession and their professional development, engaging in a broad range of professional and community service activities. Demonstrated excellence in clinical practice and commitment to the practice of medicine and delivery of health care by our clinician faculty represent high achievements in the category of service. Achievements in the category of service may also be counted as achievements in the areas research/scholarship and/or teaching to the extent that they meet the specified criteria in each of those two areas.

- a. **Outstanding:** Candidate will have served the department in a major administrative role (e.g., with oversight for a clinical, teaching, or research program that has multiple program elements, typically requiring supervision of the work of junior faculty or comparable personnel, or a similar major role or roles, continuing over several years, in a regional, state, or national professional organization). In addition, the candidate's administrative leadership will have received regional, state, or national recognition by peers.

The candidate will have demonstrated exemplary citizenship to the School of Medicine through effective leadership and service on committees (SOM, GHS, University).

Faculty can satisfy the basic service/patient care requirements for outstanding performance by having served effectively for a period of three or more years as Vice Chair or Chair of a department, Assistant or Associate Dean, or will demonstrate a mentoring role to other faculty in improving patient outcomes or quality measures.

Alternatively the faculty can develop a National reputation for clinical care and/or create a regional and/or national referral network within the healthcare system.

- b. **Excellent:** Candidate will demonstrate experience at the department level (or above) in a significant administrative role. In addition, the candidate's administrative leadership will have received regional, state, or national recognition by peers, or the candidate will have achieved regional, state, national or international prominence in some aspect of patient care.

The candidate will have demonstrated consistent citizenship to the School of Medicine through effective participation, leadership, and service on committees (SOM, GHS, University).

Faculty can satisfy the basic service/patient care requirements for excellent performance by having served effectively for a period of up to three years as Vice Chair or Chair of a department, Assistant or Associate Dean, or will demonstrate a leadership role in improving patient outcomes or quality measures.

Faculty demonstrates a high volume, high quality practice based on national volumes and quality metrics. Additionally, the faculty would be expected to hit several other patient care performance measures as outlined in the attached appendix in addition to the metric below for patient care.

- c. **Good:** Candidate will demonstrate a high level of effectiveness at the department level (or above) in carrying out assigned committee or administrative responsibilities. In addition, the candidate must demonstrate engagement with one or more local, regional, state or national professional organizations. The candidate will have demonstrated citizenship to the School of Medicine through effective participation and service on committees (SOM, GHS, University).

See the appendix for patient care suggested performance measures. Faculty demonstrates an average volume; average quality practice based on national

volumes and quality metrics, and be favorably recognized within the department and local area for patient care.

- d. **Fair:** Candidate will demonstrate effectiveness at the department level (or above) in carrying out assigned committee or administrative responsibilities. The candidate will have demonstrated citizenship to the School of Medicine through effective participation and service on committees (SOM, GHS, University).

The faculty will demonstrate the basic involvement with patient care as outlined by the Department and should be recognized within the department and hospital system for his/her clinical care.

V. Appendix A: Additional Suggested Sources for Documentation of Performance

[NOTE: This is not an exhaustive list of achievements that may be considered. Candidates may submit any evidence they believe satisfies the requirements of the Unit criteria. The order of this list is not intended to convey relative priorities, but is intended as an aid to organize materials. The burden falls to the faculty member to explain the significance of their own work and achievements in their Personal Statement]

1. Teaching

Contribution to:

A. Curriculum development

- Undergraduate medical education: give course number and type of activity
- Graduate medical education: describe curriculum, type of student, goals of program
- Postgraduate education: describe curriculum, type of student, goals of program
- Continuing medical education: describe curriculum, type of participants, goals of program
- Undergraduate, graduate, postgraduate, and continuing medical education
- Classroom lecture: give course number, number of contract hours, number of students
- Case conference: give frequency, number and type of participants, topic area
- Clinical teaching and supervision: give frequency, number of students, type of activity
- Research environment related teaching, mentoring and supervision of fellows, postdocs, visiting faculty, peer faculty, residents, medical students, graduate students, allied health students, or other learners: give frequency, number of students, type of activity
- Course coordination: give course number, number of contact hours, number of students
- Participation in training and educational curricula of affiliated hospitals of the School of Medicine and other schools and departments of the University of South Carolina
- Programs of affiliated and cooperative hospitals

- Other schools and departments of the University of South Carolina
- B. Evidence of teaching quality and quantity of teaching load
- Peer evaluations
 - Student evaluations
 - Student performance on objective tests (e.g., National Board Exams)
 - Evaluation by department chair
 - Evaluation by faculty of higher rank
 - Institutional metrics of performance in teaching and assessment
 - Teaching portfolio
- C. Development of teaching methods or aids
- Development of a clinical fellowship program
 - Development of a residency program
 - Development of a clinical clerkship
 - Design and delivery of an accredited Continuing Medical Education (CME) or Continuous Professional Development (CPD) activity
 - Clinical simulation events
 - Training activities using standardized/simulated patients/actors
 - Computer simulation
 - Audio-visual presentations
 - New media applications, presentations or tools
 - Medical illustrations
 - Patient education materials
 - Teaching materials
 - Models (anatomical, biochemical, etc.)
 - Other (weekend symposium, etc.)

2. Scholarship/Basic and Applied Research

- A. Publications (in assessing the level of achievement attained, reviewers should take into account the reputation and impact of journals, whether the work is refereed or not, and whether or not the work represents work that was invited based on the reputation of the faculty member)
- Refereed journal articles
 - Books
 - Book chapters
 - Clinical and case reports

- Invited reviews
 - Non-refereed journal articles
 - Peer-reviewed materials accepted for inclusion in MedEdPortal
- B. Presentations
- National or regional level peer training events for clinical practice
 - Invited talks at scientific and professional meetings
 - Non-invited talks
 - Seminars given
 - Sessions chaired at national or international meetings
- C. Grants
- Applications submitted, approved, and/or funded, and grant renewals
- D. Development and supervision of student research projects
- Medical student research projects
 - Resident research projects
 - Research projects for medical specialty fellows
 - Membership on dissertation committees, oral examination committees
- E. Attendance at and participation in professional and scientific meetings
- F. Evidence of the “scholarship of clinical practice” using objective criteria from published literature or Unit criteria from peer or peer-aspirant medical or health care institutions

3. Service

Service

- A. To students:
- Research advisement
 - Academic advisement
 - Student counseling
 - Career advisement
 - Advisor to student organizations

- Membership on student-faculty committees
 - Professional coaching of medical/clinical learners
- B. To the department:
- Course coordination
 - Committees and subcommittees (e.g., honors, practice plan, curriculum development, practice standards, quality improvement, patient safety, etc.)
 - Service as Departmental Chair, Vice Chair, Division Director, Quality/Safety Officer, or other administrative responsibilities
- C. To the school:
- Regular committees and subcommittees (e.g., admissions, library, curriculum, etc.)
 - Ad hoc committees (e.g., promotion and tenure criteria development, etc.)
 - Administrative responsibilities
 - Mentoring relationships
- D. To affiliated hospitals and institutions:
- Committees and subcommittees (e.g., quality assurance, medical staff, etc.)
 - Administrative responsibilities
- E. To the University of South Carolina, Health Sciences Center, and other collaborating universities and colleges:
- Committees and subcommittees
 - Faculty Senate
 - Faculty committees
 - Provost committees
 - Task forces
 - Administrative responsibilities
- F. To the profession:
- Presentations at professional meetings
 - Development of symposia, professional meetings, etc.
 - Chair at professional meetings
 - Professional organization/society officer
 - Service on ethics boards, boards of examiners

- Editorial board membership
- Professional organization/society memberships and activities
- Research and grant review panels
- Membership on accreditation committees
- Development of grants
- Professional Board testing (oral/written)
- National Board of Medical Examiners test writing and developmental activities

G. To the community:

1) Professional services

- Program development (e.g., programs for specific reference groups, such as the handicapped, etc.), patient education
- Support and assistance to existent community groups (e.g., burn victims, the blind, epileptics, etc.)
- Advisor to federal, state, and local decision-making groups (e.g., regarding health care to the indigent, crisis intervention, disaster preparedness, utilization of medical care, etc.)
- Consultations to hospitals, nursing homes, etc.
- Service as consultant to accrediting organizations, government regulating bodies, and other external reviewers. This may include site visits to other health care organizations for the purpose of review or accreditation.
- Service on committees of community partners
- Community or public service award by statewide, national or international organization/institution
- Service on the Board of Directors as volunteer for national service organization/institution or patient-focused non-profit organizations
- Other: Civic activities
 - Presentation to schools, civic groups and agencies
 - Membership on governing boards of voluntary agencies, schools, churches
 - Talks and participation in activities to schools, clubs

2) Patient Care

- Serving in a leadership capacity within the clinical setting (e.g. medical or clinic director)
- Participation in clinical services of the School of Medicine or affiliated institutions
- Publications in refereed journals on patient care
- Presentations at professional meetings on patient care
- Membership on regional or national task force or committee on patient care
- Grant for research on patient care
- Award for excellence in clinical services
- Reputation among peers as an excellent clinician
- Performance of patient care related activities that extend beyond routine management and is more defined by that of an academic physician
- Introduction of “cutting edge” tools in clinical management
- Participation in establishing and maintaining regional and national standards of care and management as evidenced by membership on a specialty board, residency review committees, regional or national commission or examination committees
- Successful participation in federal and industry-sponsored clinical trials
- Objectively measured achievements in quality and process improvements projects or programs that enhance efficiency, patient safety, and/or processes of care
- Development of new clinical programs that enhance the mission of the healthcare system

- Extramural consultation of a scientific and /or clinical nature with governmental agencies, industry and/or other academic institutions, which enhance the goals and functions of the healthcare system
- Establishing or teaching community based educational programs that improve the healthcare of the community
- Receiving internal funding for a community service-related teaching/knowledge development project.
- Demonstrating community engagement by providing consultative services to a community organization/group congruent with professional expertise.
- Providing direct-care services regularly to individuals/groups/communities utilizing professional knowledge/skills.
- Attracting regional and national referrals for clinical care
- Introducing/developing regional/national guidelines for patient care