

Medicine faculty:  
please consult School of  
Medicine resources



## **Office of Academic Affairs**

Willie Miller, Faculty Advancement and Leadership Development Fellow

Rachel Applegate, Assistant Vice Chancellor for Faculty Affairs

# **Promotion on Service or Balanced Case For Clinical Faculty**

# Agenda

1. Elements of all clinical cases
  - Campus, school, department guidelines: understanding, navigating
  - Dissemination/scholarship/binning
2. New Developments
  - Integrative DEI Case
  - Integrative Thematic Case
  - Balanced/Service Updates
3. Deciding among types of cases
  - Service as currently defined
  - Teaching
  - Balanced? Why? How?
4. Overview of process
  - Dossier documentation
  - Reviewers
5. Questions?



# Elements of all clinical cases

# Background--IU definitions:

## “Classification of Academic Appointments”

*Clinical Appointments.* The prefix “Clinical” is used for appointees whose primary duties are teaching students and residents/fellows and providing professional service in the clinical setting. Titles: Clinical Professor, Associate Clinical Professor, Assistant Clinical Professor; or Clinical Senior Lecturer and Clinical Lecturer.

## “Regulation of Clinical and Lecturer Appointments”

Use of clinical appointments. Clinical appointments are appropriate for those who work primarily in the clinical setting. Clinical faculty may be involved in research that derives from their primary assignment in clinical teaching and professional service; however, continued appointment and advancement in rank must be based on performance in teaching and service.... *Clinical faculty may contribute to the research efforts of a unit through their clinical work, but they are not expected to do individual research*



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# IUPUI Clinical Track

## P&T Guidelines

Rank	Area of Excellence	Satisfactory Performance	Excellence Standard
<b>Clinical Associate Professor</b>	Service	Teaching	Record of publicly disseminated and peer reviewed scholarship in area of excellence
<b>Clinical Professor</b>	Service	Teaching	Record of sustained, nationally and/or internationally disseminated and peer reviewed scholarship in area of excellence.

For the campus, reputation is not a consideration



# Therefore, at IUPUI we are:

## **Flexible:**

Defining 'clinical' faculty duties

## **Firm:**

All clinical ranks and all areas of excellence include an expectation of *peer-reviewed dissemination*.

## **Flexible:**

"Peer" can be professional OR academic

## **Newly flexible:**

Service defined as application of *professional expertise AND university citizenship*



# Campus, school, department guidelines

Don't be surprised NOT to see:

“Clinical” duties or attributes defined at the campus level

Clinical-track expectations defined in school or department P&T documents

Because **campus criteria** are very skeletal, **campus reviewers** depend heavily on **department and school** reviews.





# Peer-reviewed dissemination

Professional service that is the basis of advancement in rank or tenure must be clearly established as **academic work**. (PT guide)



Clinical Faculty A  
has GREAT IDEA



Benefits people  
Yay!

Clinical Faculty A:  
*satisfactory*

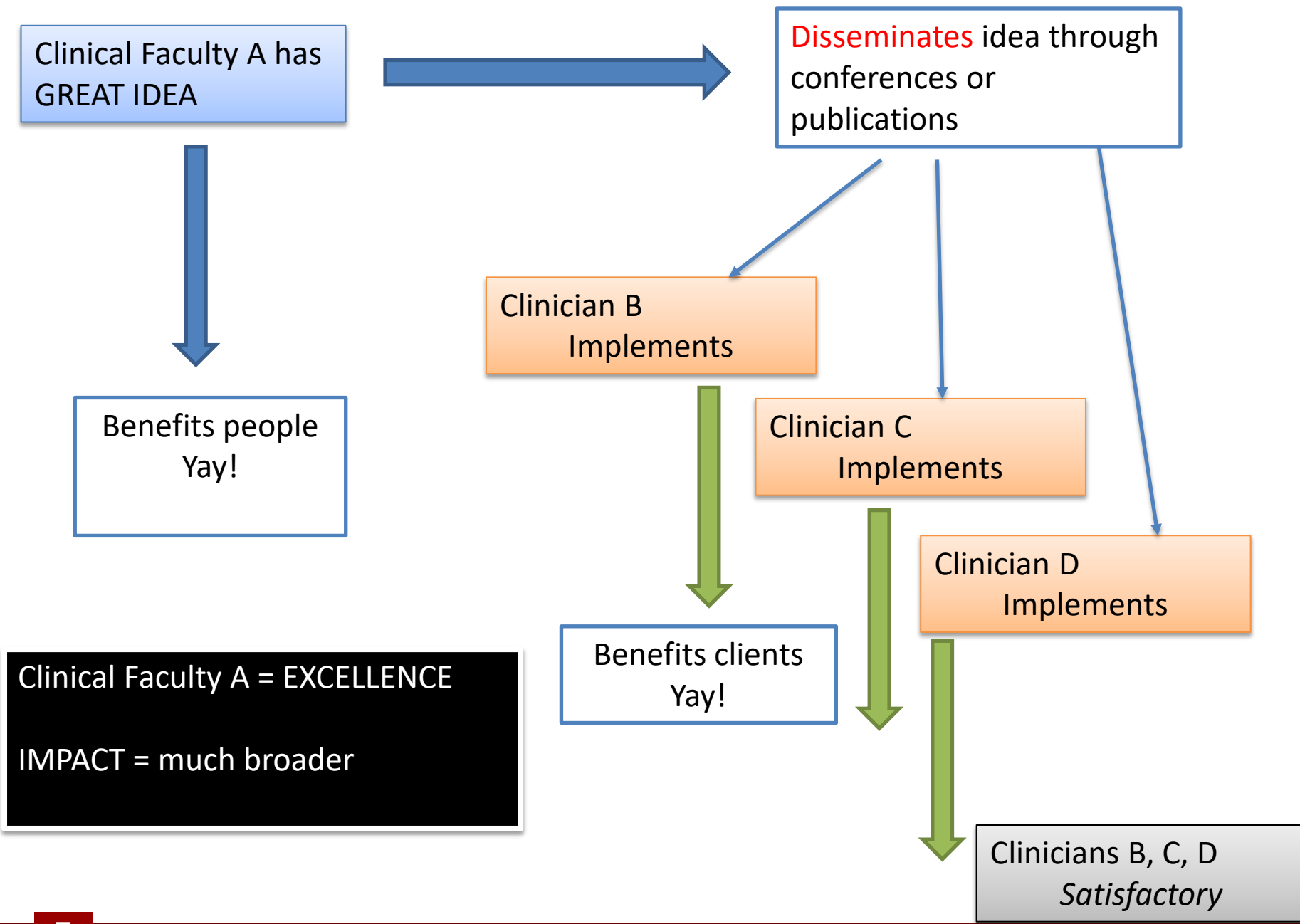
Clinical Faculty B hears  
about GREAT IDEA  
Implements



Benefits people  
Yay!

Clinical Faculty B:  
*satisfactory*

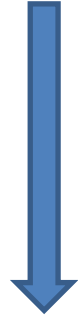




Clinical Faculty A has GREAT IDEA



Disseminates idea through conferences or publications



Benefits people Yay!

Clinician B Implements



Benefits clients Yay!

Clinician C Implements



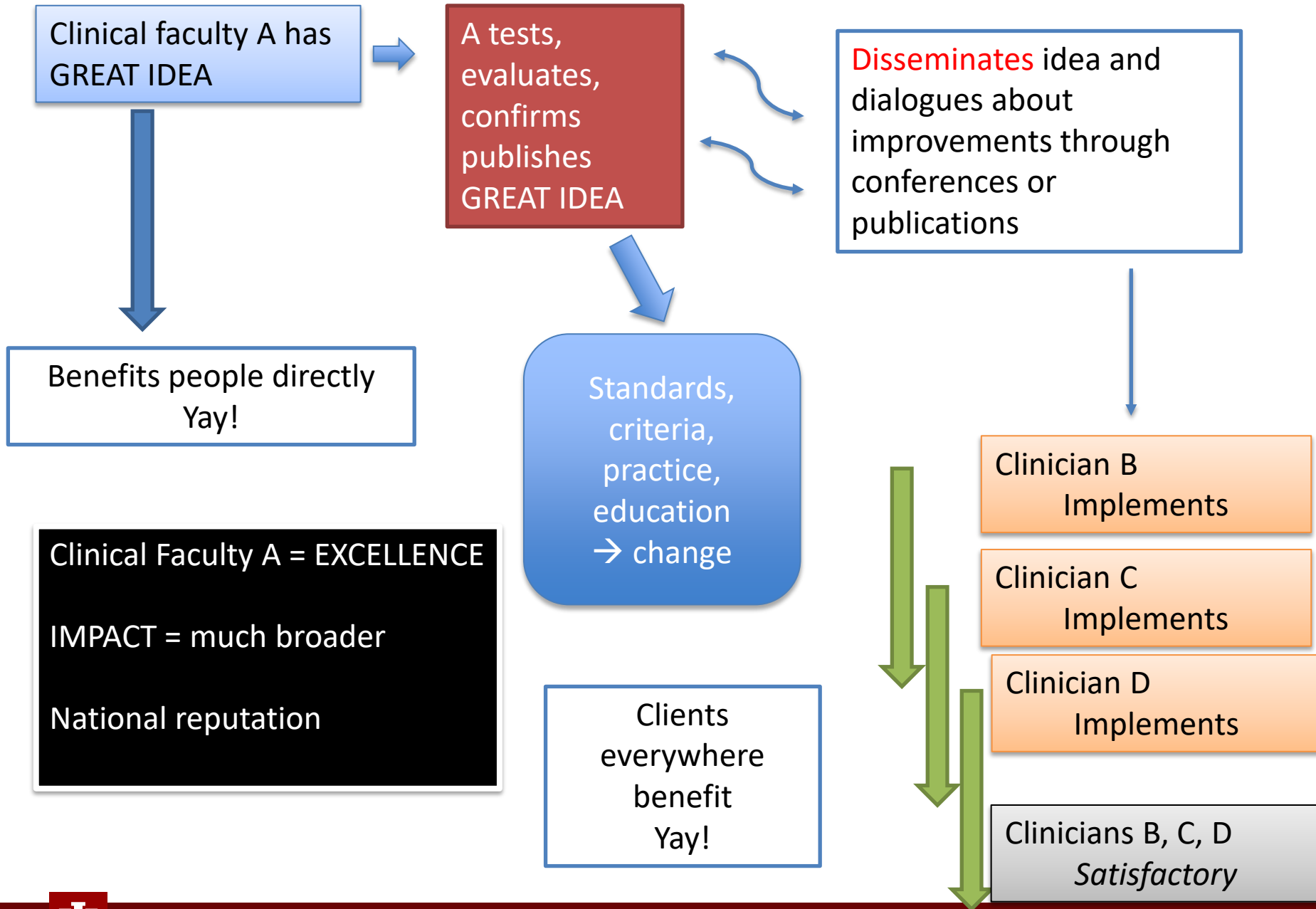
Clinician D Implements



Clinicians B, C, D Satisfactory

Clinical Faculty A = EXCELLENCE  
IMPACT = much broader





# Potential forms of dissemination and peer review

- Conferences (academic or professional): refereed, competitive
- Scientific or professional journals: refereed [or editorially reviewed]
- Standards, protocols, or guidelines: that go through feedback and review levels.
- Open-source software: that has a review mechanism

NOT:

- Your own blog postings
- Pre-print repositories with no filtering



# Scholarship, research, binning....

All forms of publication, dissemination, discovery **must** be characterized as “in service of” either teaching or service.

Your promotion case cannot be based on *research* items.

I study  
rocks

“The genesis of purple rocks”

~~I’m an expert *researcher* on rocks!~~

I use my expertise and insight into rocks and rock research in my teaching

I develop teams of students to do rock research.

Because of my rock expertise, local rock quarries accept my students as interns



# New Developments

# Balanced-Integrative DEI Case for Clinical

Approved spring 2022, available for fall 2022 cases **if the school/department is ready.**

Key elements:

- Diversity, equity, and inclusion philosophy, integrated with teaching philosophy
- Some dissemination related to DEI and activities (does not need to be labelled as ‘teaching’ or ‘service’)
- Integration throughout activities / accomplishments
- Local impact: demonstrated outcomes of activities (that is, not JUST dissemination, but making a difference for people)





# Balanced-Integrative Thematic Case for Clinical

Approved spring 2022, available for fall 2022 cases **if the school/department is ready.**

Key elements:

- The candidate articulates an overall organizing principle to their work, including if appropriate any specifically targeted aspect.
  - Themes based on campus values: Civic Engagement, Translational Research, Teaching: Honors College; Profiles of Learning for Undergraduate Success, RISE to the IUPUI
  - Themes tied to unit missions and goals
- The candidate must demonstrate satisfactory performance in both areas of responsibility: teaching and service



# Balanced/Service Case Updates

Approved spring 2022; schools and departments may not yet be ready. More likely for cases in fall 2023.

Key elements:

- Redefinition of acceptable 'service' to include administrative work.
  - “Work advancing a university, campus, or school unit’s teaching, research, or service missions. Administrative work primarily concerned with teaching may be presented as “service” or as “teaching” excellence.” p. 22
- Dissemination is required in the teaching area; dissemination is not required (but is acceptable as evidence) in the service area.



# Deciding among types of cases

# Clinical case types

1. Excellence in teaching

I. Integrative DEI

2. Excellence in service

II. Integrative balanced

3. Balanced case

*Established at the campus level*

*Not for IUSM*



# Deciding: What is most authentic? and What is easiest?

Points to consider:

- What **role** do you have in your unit? What do they value you for? What will they understand best?
- Can you point everything you do towards **teaching**? ←this is the most common non-medicine clinical case type
- Can you separate out **service**? Do you have a strong sense of definition for this?
- Do you have difficulty separating teaching-from-service?
- Do you struggle with where to put your scholarship?



# Choose a teaching case if *and only if*

You have strong performance in teaching

You can relate most of what you do to teaching

You have been consistent in analyzing student evaluations, securing peer evaluation of teaching, and collecting student learning outcomes data.

You have peer-reviewed dissemination that can be related to teaching

You must be satisfactory in service but that can be routine university citizenship



# Choose a service case if *and only if*

Your chair and dean understand what you mean by 'service.'

Service work must be related to the use of professional skill.

'Service' is not just administrative work. Running an academic program is not service as currently defined.

You have peer-reviewed dissemination that can be categorized as 'service'

You must be satisfactory in teaching--at least 2 peer reviews of teaching, student evals.



# Choose a balanced-binned case if *and only if*

You have some peer-reviewed dissemination that can be characterized as teaching, AND, some that can be characterized as service.

You feel that your responsibilities and accomplishments are relatively evenly distributed between service and teaching.

Your chair and dean agree about what counts as 'service.'





# Choose a balanced-integrative (DEI or Thematic) if *and only if*

You have dissemination (does not need to be labelled)

You have an integrating theme

You can point to direct impact



# Overview of process

# Promotion timing

- Five years in rank: extremely general and unofficial rule of thumb
- In some schools, promotion = long term appointment; in others, there is a separate process; in others, there is no long term appointment even if promoted.
- YOU need to let your chair know *in the fall before you intend to apply*.



# Dossier preparation

- You need to collect information, organize your material, and compose your candidate statement **before** you have access to e-dossier.
- Attend workshops, identify someone to help you edit, make drafts.
- Consider providing names of external reviewers to your chair.



# External reviewers

Responsibility of the chair, not you

You must identify collaborators (co-PIs, co-authors) for the last five years—they cannot be external reviewers.

Almost all external reviewers **MUST** be academics



# What about clients? Community partners?

It is appropriate and useful for you to include assessment and/or support from non-academics for whom, or with whom, you work.

*If **you** solicit the information, it goes into your dossier, just as you wish it. These will be **supportive** letters or materials—you will include only what supports your case.*

*Letters that simply say “thank you you were great”  
are not very important.*

*You may request that your **chair** solicit **assessments**. The request goes from them to the outside people and back without your intervention. This makes this more credible to reviewers.*



# Materials for external reviewers

CHECK WITH YOUR school!

Timing: summer before  
campus review

They always receive:

CV

Candidate statement

Then add:

Key material supporting your particular type of case



## What happens if... *there are negative votes?*

Any candidate for promotion can withdraw their case at any time.

Are the external letters the problem? All letters must be retained **for three years**, unless you change the area of excellence. At least three letters must be fresh.

A non-tenure candidate cannot formally insist on a re-vote. However, they can upload additional information or arguments, and request that the committees review the material.

Each voting level is *independent*. One level may vote 'no' and another 'yes.' *Chairs almost never vote 'no.'* *But their votes don't always win.*

*Final decisions are always in agreement with at least one committee level. If someone has majority negative votes at both the department and the school, they are unlikely to succeed that year.*







**Where are you in your  
decision-making?**

# Let's discuss....

- Why not teaching?
- What is your elevator speech?
- What is the most daunting aspect?



# Open discussion

Prompt one:

Why not teaching?





# Open discussion

Prompt two:

What is your elevator speech?



# Open discussion



Prompt three:

Most daunting aspect?





**IUPUI**

FULFILLING *the* PROMISE