POLICY:

Date of Faculty Approval: August 18, 2010

Department of Pharmacy Practice
School of Pharmacy
The University of Kansas

Title: Clinical Track Promotion Policy and Procedures

Promotion Guidelines
for Clinical Track Faculty
Department of Pharmacy Practice

Introduction to the Guidelines

The processes for appointment and awarding of promotion must be fair and appropriate if the University of Kansas School of Pharmacy is to encourage and recognize faculty excellence. The Department’s Promotion Policy must be followed to ensure protection of faculty rights and protection of the University of Kansas. Promotion in rank for clinical-track faculty is made on the basis of meritorious performance and follows the same procedures as promotion of faculty members, including review by the University Committee on Promotion and Tenure. The criteria for promotion include (1) clinical education, (2) clinical practice, (3) service, and (4) scholarship. Promotion should relate directly to expectations articulated in the written position description. Nothing in this document will nor should be considered to supersede the University of Kansas Policy on Promotion and Tenure or the School of Pharmacy Policy on Promotion and Tenure.

The Promotion process includes feedback to candidates per the University guidelines, with an opportunity for candidates to respond to questions and issues brought up during the Promotion process. University guidelines also exist to appeal Promotion decisions.
Promotion
Promotions among the ranks of the Clinical Track Faculty are handled through the promotion process applied to clinical track faculty promotions. Criteria for promotion should be consistent with the expectations for promotion in clinical track faculty rank with recognition that promotion should relate directly to expectations articulated in the written position description.

A probationary period of six years applies to Instructor and Assistant Clinical Track Faculty unless the staff member achieves promotion to the Associate rank within the six-year period. Unlike tenure-track faculty, Clinical Track Faculty are not required to go through a mandatory promotion review during their sixth year of KU employment. However, the performance of all state-funded Clinical Track Faculty, Instructor and Assistant ranks should be evaluated carefully and thoroughly during the six-year probationary period, with special emphasis on the third and sixth-year review. Appointment to a seventh year of consecutive full-time service will normally mean that the probationary period has been completed satisfactorily and the position will be terminated only for adequate cause, including budget constraints.

Departmental Responsibilities for Promotion of Clinical Track Faculty

Three main activities are required of the Department:

(1) Advising faculty on Promotion
(2) Initiating the Promotion process on behalf of a faculty member by notifying the School of Pharmacy Executive Committee
(3) Evaluating and making a recommendation from the Department and external reviews and forwarding the complete dossier to the School of Pharmacy Executive Committee.

By the end of the first semester after appointment, the Department Chair will

(1) Give the new faculty member a copy or direct them to the University Of Kansas School Of Pharmacy Faculty Bylaws
(2) Direct the new faculty to The University of Kansas Handbook for Faculty and Other Unclassified Staff, and article VI of the Faculty Senate Rules & Regulations, which contain the University policies and procedures for Promotion
(3) Assign a mentor/advisor for the new faculty

The Department Chair will meet with the Clinical Track Faculty regarding Promotion yearly during their annual review. It is ultimately the responsibility of the individual faculty member under review to provide evidence of his or her progress toward promotion.

For promotion or appointment to the rank of Assistant Clinical Professor, a faculty member should possess a terminal degree and show promise in his or her discipline. Promotion from Instructor to Assistant Clinical Professor requires attainment of a minimum performance in the four categories: clinical education, clinical practice, scholarship and service as articulated in the written position description.

Each recommendation for promotion shall be considered by the candidate’s department. Members of the clinical faculty and tenured faculty in the candidate’s department shall meet and
discuss fully each recommendation for promotion except that members shall not vote on recommendations for promotion to a higher rank than the one they hold.

**Contributions for Promotion**

The role of the clinical track faculty is primarily in the areas of clinical education (didactic and experiential), clinical practice, and service. Therefore clinical track faculty have less of an emphasis in scholarship and research. Both the teaching and patient care activities must fulfill the needs of the School and Department first, and secondly the individual needs or desires of the specific clinical track faculty member.

I. **Contributions to Clinical Education**

*The Standard*

Clinical Education is considered a primary duty of the clinical track faculty. Clinical track faculty will instruct a variety of students; including but not limited to: pharmacy students, medical students, nursing students, pharmacy residents, medical residents, pharmacists, physicians, nurses, health system administrators and the public. The Department of Pharmacy Practice promotes excellence in clinical education that draws upon the faculty member’s depth and breadth of knowledge, skills, and experience. Teaching excellence can be documented with respect to quality, quantity, impact, innovation and outcomes of the students.

*Documentation*

Evidence of clinical education may include, but is not limited to, some combination of the sources listed below. In joint endeavors, the evidence should specify the extent of each person’s contributions.

- Completion of teaching enrichment programs
- Continuing education
- Coordination of courses
- Courses (didactic, laboratory and/or clerkship courses) and number of hours taught to professional and graduate students
- Development of innovative and effective teaching methods
- Development of new courses or substantial modification of existing courses
- Evidence of impact on students and faculty
- Honors or special recognitions for teaching accomplishments
- Invitations from other departments in the university to participate in teaching programs
- Peer teaching evaluations
- Professional lectures (e.g. community groups, in-services)
- Student evaluations and student accomplishments
- Training and advising pharmacy students, residents, graduate students and other health care students
- Visiting professorship
II. Contributions to Clinical Practice

The Standard

Clinical Practice includes both direct patient-centered activity (e.g., primary care, patient counseling, etc.) and indirect patient-centered activity (e.g., drug information, practice management/administration, lifelong learning, etc.). Clinical Track faculty members are diverse in terms of areas of expertise and training and their clinical practice should relate directly to expectations articulated in their written position description.

Objective evaluation of clinical practice is difficult, but essential. Evaluation by other health care providers and peer recognition may provide insight into the quality of care. Clinical skills may be assessed by using many types of surrogate measures. The evaluation processes are likely to include a combination of clinical and administrative measures.

Documentation

Potential sources of documentation of clinical practice excellence may include, but are not limited to:

- Best practices recognitions
- Certification and re-certification by specialty boards.
- Completion of additional academic course work which directly impacts clinical practice
- Completion of practice development programs (e.g., traineeships).
- Designation as a ‘fellow’ or other similar practice achievement recognition.
- Development of innovative clinical practice models that expand the pharmacist’s role and improve patient care.
- Direct assessment of practice management by systems administrators, managers and clinic directors.
- Documentation of patient care activities
- General recognition of clinical practice performance by faculty not in direct collaboration.
- Grants or contracts, requested and received, to support clinical practice expansion or enrichment.
- In-services/presentations provided to health care workers at clinical practice site
- Opinions of referring pharmacists, physicians and nurses.
- Participation in clinical practice-site committees (e.g. Quality Assurance committee, Pharmacy and Therapeutics Committee)
- Patient case loads
- Practice consultant to pharmacy and non-pharmacy based organizations.
- Practice related publications and presentations (e.g. platform or poster presentations)
- Written observations from nurses, physicians, medical students or collaborating pharmacy practice faculty documenting specific practice initiatives and outcomes.
III. Contributions to Academic, Professional, and Public Service

The Standard

Service activity may be defined as any activity that draws upon the clinical faculty member’s professional expertise and scholarship to address a service need in the academic or public community.

Academic service is oriented to the needs of the Pharmacy Practice Department, the School of Pharmacy, the University of Kansas, and the profession. All Clinical Track faculty members, regardless of rank and academic appointment, have general academic service responsibilities.

Public service activities are oriented to the general public and professional policy needs of society at large. Clinical track faculty have continuing contact with citizens and professional organizations in practice and research arenas. The clinical track faculty members work with local, State, National, and International leaders, providing for educational needs assessment, program development, training, consultation, and technical assistance.

Documentation

Potential sources of documentation of service contributions may include, but are not limited to:

- Additional service to a clinical practice (other than what is recorded in section II of this document), which provides direct or indirect patient care,
- Advisement of students/residents or participation in student organizations.
- Consistent participation and leadership (e.g. committee chair) in Department, School and University committees.
- Consistent participation in Department meetings and activities.
- Consultations to State, Federal, and Private Agencies.
- Development and/or chairing of meetings or symposia.
- Election to offices, committee activities and important services to professional associations and organizations.
- Evidence of community outreach (e.g. brown bag, health screenings, health fairs)
- Evidence of non-credit teaching activities (e.g. in-services)
- Guest lecturer in course(s) outside of the pharmacy practice department
- Honors, awards, and special recognition for service activities.
- Participation and leadership in State, National and International committees.
- Participation as a peer reviewer or providing editorial activities for journals or professional societies.
- Participation in community activities, that enhance community understanding of the profession, University and School functions.
- Participation in Departmental mentoring programs.
- Participation or development in Department, School or University sponsored continuing education programs.
- Presentation of special lectures which provide service to University, Community, State or Nation.
- Representation of the Department and School at community events and social activities.
- Serving in an administrative capacity within the school of pharmacy.
IV. Contributions to Scholarly Activity

Standard

Scholarly activity is desirable of the Clinical Track Faculty; however, this is generally not their primary focus. The amount of scholarship performed for promotion should relate directly to expectations articulated in their written position description. Because of their important and time-consuming teaching and professional obligations, Clinical Track Faculty may publish in different forms (peer and non-peer review). Moreover, the scholarly activity is more likely to be collaborative in nature and in the role of a co-investigator or secondary author.

Documentation

Evidence of original research or other creative scholarly activities include, but is not limited to, the sources listed below. In joint endeavors, the evidence should specify the extent of each person’s contribution.

- Book chapters published
- Book publications
- Generation of scholarly products or practices adopted outside of the University
- Grants submitted and grants obtained (may include clinical education or practice focus)
- Honors and awards for scholarly activity, research or other creative activities
- Journal Publications
  - Full papers refereed (e.g. original research, review articles)
  - Short papers refereed (e.g. case reports, letters to the editors)
  - Non-refereed (e.g. continuing education, monographs, newsletter)
- Multi-media material published
- Presentation of poster and oral abstracts at professional meetings.
- Presentation of scholarship at local, state, and national level
- Scholarly publications related to service
- Software program development