Getting Promoted: Views from 10 Years + on ‘The Committee’

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“Say ... what's a mountain goat doing way up here in a cloud bank?”
Goals

- Review purpose of an academic appointment
- Describe the steps/levels
- Review the pathways
- Practical advice for those seeking promotion with scholarly teaching career
Purpose

- Reward
- Recognition
- Bar to reach in future
- Organize
Ranks

- Instructor (typically 1-2 years max after residency)
- Assistant Professor
- Associate Professor
- Professor
- Secondary/Volunteer Appointments
# University of Pittsburgh School of Medicine

## Pathways in the Tenure and Non-Tenure Tracks

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Serves as a preceptor of students or trainees in clinical skills within the University or another setting; provides clinical services to the health system. No University salary or benefits provided.

Primary employment outside an academic unit of the University. May participate in collaborative projects with the University setting. No University salary or benefits provided.

Temporary appointment, usually for not more than one academic year.

Primarily research activities; minimal to no teaching responsibilities; collaborative and/or supportive role in research projects.

Professor

Associate Professor

Assistant Professor

Instructor
Faculty **must** demonstrate continued **scholarly** contribution to the mission of the organization by sustained excellence in areas such as teaching, investigation, and other forms of scholarship.

Each faculty member **should** develop very early, in conjunction with his or her academic mentor(s), a portfolio of scholarly, teaching, and service activities, according to the talents and aspirations of the faculty member and the needs of the department and the School of Medicine.
Most commonly, scholarship is demonstrated through scientific investigation and/or scholarly teaching. Outstanding service – that creates research/educational opportunities – may suffice.

Teaching alone – like research alone - may be ample evidence of scholarship and must demonstrate sustained depth and commitment.

*Time in grade* is not a sufficient criterion for promotion.
Evidence of scholarship in investigation

Experimental
- Basic science research
- Clinical trials
- Population studies

Other Activities
- Case reports
- Scientific grants
- Scientific review panel service
- Membership on editorial boards
- Service on national committees or study sections
- Officer in scientific society
Evidence of clinical scholarship

Recognize expert (‘doctor’s doctor’)
High volume and quality
New therapies/techniques

Organize or direct Division/Section/Clinical Unit
  Allows training of others
  Allows research to occur
  Creates/takes to ‘new level’

Officer in medical society
Evidence of scholarship in teaching

Classroom teaching (with referent, especially outcomes) – individual and course
Bedside and bench top teaching (with referent)
Mentorship
Preparation of teaching materials
Invited speaker
Teaching awards
Consistent pattern of strong, favorable evaluations
Evidence of scholarship in teaching

Curriculum design
Textbook authorship
Preparation of teaching materials
Publication regarding educational activities
Consistent national panelist, officer in society
Teaching Portfolio

- Scholarly teaching harder to ‘share’
- Put together file/binder of 5+ years of:
  - Evaluations (individual, programs) – representative with some comparators
  - Curricula
  - Chapter/online links AND objective evaluations
  - Student progress (numbers going where..)
  - Big is good but no prize for too much!
Common Themes

- **Individual excellence**
- **Programmatic excellence**
- **Impact** of achievements
- **Less of one requires more of others**
Practical Guide

- Pick a path – early – as a GUIDE not fixed route/silo
- Create an achievement record
- Focus on two things:
  - Your **individual** achievements (papers, teaching scores, awards, …)
  - Your **programmatic** achievements (new thoughts/approaches, investigative teams, courses/curricula/texts, high level service,…)
- **USE THOSE WORDS IN YOUR SUBMISSION** (plus “IMPACT”, ‘SCHOLARLY’ and “EXCELLENCE”)
Practical Guide

- Communicate that record
  - CV
  - Executive Summary (2-3 pages that puts all in context – NOT rehash!)
  - Teaching Portfolio
  - Use the buzz words!
"Ha ha ha, Biff. Guess what? After we go to the drugstore and the post office, I'm going to the vet's to get tutored."
Examples of Objective Evidence of Scholarly Teaching Achievement for Associate Professor

Evidence of consistent, significant contributions to the School or department (usually greater than 5 years; evidenced by letters).

Contributions to the design, organization, and instruction of course or clinical programs.

Demonstration of ability to evaluate and counsel medical or graduate students.

Participation in postgraduate teaching courses. Contributions to chapters and books. Evidence of mentorship and serving in the preceptor role.
Examples of Scholarly Teaching Achievement for Professor

Continued *high level* contribution to School of Medicine or departmental educational goals (10 to 12 years).

**Leadership** role in educational mission (e.g., Program Director, design and implementation of educational programs of SOM-residency-CME).

Create textbooks and teaching materials.

Invited lectureships/panelists at major universities and leading scientific societies.

Teaching award(s).
Evidence of Scholarly Clinical Service

- Requested physician, compliments vs. complaints
- Known new care techniques, regional or national awards
- Patents, case series re: care
- *Growth of program that allows more training/research or improves quality* (not personal $$)
- Service positions – increasing role in hospital, organized medicine, oversight bodies
- NOT ‘good person who did what we asked’
What Happens Next

- **You send**: CV, Executive Summary, Portfolio, potential referees

- Your Dept Cmt reviews

- Chair/Vice Chair/Division Chief act on suggestion, provide cover letter

- Goes to SOM Committee

- Subcommittee assigned (3 folks at desired rank or higher NOT in your primary Dept) – prelim review
What Happens Next

- 6-10 Referees solicited (yours, theirs – email, letters) – they get SOM guidelines, your CV and Exec Summary

- When complete – goes back to Subcommittee who ‘votes’ or seeks info from Chair

- If yes vote – to monthly full Committee (about half Associate and half Professors). Only those at your desired rank or above, and not in your primary Dept, can vote.

- Full Cmt makes majority recommendation to SOM Executive Cmt and Dean
Final Actions

- Sometimes returned for more information/context
- SOM Executive Cmt does similar, and Dean makes final call
- Committees recommend, Dean and Provost promote
Key Points

- Pick a path EARLY—paths are not fixed or a silo, but a guide (Clinician; Clin/Educator; Clin/Investigator; Educator/Investigator)

- All along—and at time of preparing final packet—think of the 4 keys: **Individual** and **Programmatic excellence**, and **Impact**

- Ask for evaluation early on—by year 3

- Put things together that ease recognition
“Look out for number one, but don’t step in number two”

Rodney Dangerfield, Back to School
Examples of Objective Evidence of Investigative Achievement for Associate Professor

Quality scholarly publications.

**Most** successful candidates have at least 15 publications but number may range widely based upon significance, quality, and type of article (*first or senior author on over 1/3 of manuscripts*).

Independent *funding* and a research *theme* and goals

Authorship of reviews, chapters, and/or books

Review boards of scientific journals/member of grant panels.
Examples of Investigative Achievement for Professor

Continued scholarly publication (40 publications typically; first or senior author on over one-third of manuscripts)

Consistent record of funding (5 to 7 years).

Recognized by peers nationally and internationally (as evidenced by letters).

Recognizable objective of research, creation of new thought/approach/discipline, or leading a team.

Membership on editorial boards or study sections Leadership role in significant scientific organizations.
Clinical Portfolio

- Highlights the **individual** and **programmatic excellence**
- Clearly states **impact on scholarly mission** (training, research, or advancing care)
- Numbers of patients, patients/hr or week, RVU, etc...are not core
- Associate vs. Professor: Amount and growth
- Is not meant as ‘easier path’