PART 1. MEDICAL SCHOOL PREAMBLE

I. INTRODUCTORY STATEMENT

This document describes the specific criteria and standards which will be used to evaluate whether candidates from the Medical School meet the general criteria for tenure in Section 7.11 and for promotion to professor in Section 9.2 of the Board of Regents Policy: Faculty Tenure. All candidates for promotion and/or tenure in the Medical School are evaluated with the criteria and standards in this preamble. In addition, each department in the Medical School has its own 7.12 Statement (Part II of this document) that further delineates the criteria for promotion and/or tenure within that individual unit. For a complete perspective, the reader is advised to review Sections 7 and 9 in their entirety. Section 7.11 is printed in IV: Criteria for Tenure (see below); Section 9.2 is printed in V.C Promotion to Professor. This preamble contains Criteria and Standards pertaining to:

A. Appointment
B. Awarding of indefinite tenure
C. Promotion from Assistant Professor to Associate Professor and from Associate Professor to Professor
D. The process for the annual appraisal of probationary and tenured faculty

The criteria, standards, and procedures are applied without regard to race, religion, color, sex, national origin, handicap, age, veteran status or sexual orientation.

The Medical School issues annually to each department, for distribution and information to faculty members, a set of instructions, memoranda, and other documents, giving detailed information on the procedures to be followed in the preparation and consideration of each proposal for tenure and/or promotion in rank. The pertinent documents are identified as exhibits enclosed with a cover memorandum from the Dean.

The Medical School 7.12 and Departmental 7.12 Statements are reviewed and approved by the dean of the Medical School and the senior vice president for academic affairs and provost.

The relevant University documents regarding criteria for tenure and/or promotion and the procedures for implementing these criteria are:

- University of Minnesota Board of Regents Policy: Faculty Tenure
- Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure Track and Tenured Faculty

II. MISSION STATEMENT

Committed to innovation and diversity, the Medical School educates physicians, scientists, and health professionals; generates knowledge and treatments; and cares for patients and communities with compassion and respect.

The Medical School strongly encourages and values interdisciplinary work, including scholarship, public engagement, and teaching, as well as interprofessional collaboration in clinical sciences. Concordant with the
III. APPOINTMENT AND ANNUAL APPRAISALS OF PROBATIONARY FACULTY

A. APPOINTMENT

1. Assistant Professor

   In the Medical School the entry level rank for faculty is at the Assistant Professor level. The minimal, general criteria for initial appointment at this rank include:
   a. Possession of a terminal degree (MD or equivalent, or Ph.D.)
   b. Board eligibility or certification (if applicable - clinical specialties)
   c. Demonstrated ability in teaching
   d. Demonstrated involvement in high-quality research which has been accepted for publication or is published in peer-reviewed national or international journals
   e. Documentation of competence in the skills of communication, including effective communication in teaching students and in oral and written presentations of research

   Each department may add specialty-specific criteria for appointment, in their Departmental 7.12 Statement.

2. Associate Professor and Professor

   a. The criteria and standards for appointment at the rank of Associate Professor are those stated for awarding of tenure.
   b. The criteria and standards for appointment at the rank of Professor are those stated for promotion to this rank.

   In addition, for clinically active faculty, it is expected that for appointment at the rank of Associate Professor or Professor they will have achieved appropriate Board Certification in the specific field where they are practicing.

3. Secondary Appointments

   The appointment home for a faculty member is always in the primary department (the tenure home is the University of Minnesota). Joint and/or secondary appointment requests will be made by the secondary department with the support of the primary department in the form of a request letter(s) signed by both department heads, addressed to the Associate Dean for Faculty Affairs in the Medical School. In the case that the appointment being requested is at the Associate Professor or Professor level, the secondary department may conduct a faculty vote by written ballot, based on the proposed collaborative activity in the secondary department for the faculty member. The results of the vote should be reported at the time of the request for appointment.

B. ANNUAL APPRAISALS OF PROBATIONARY FACULTY

In fulfillment of Sections 7.11 and 7.12 and in accord with Section 7.2 of the Board of Regents Policy: Faculty Tenure; “the tenured faculty of each academic unit annually reviews the progress of each probationary faculty member toward satisfaction of the criteria for receiving tenure. The head of the unit prepares a written summary of that review and discusses the candidate’s progress with the candidate, giving a copy of the report to the candidate.”

All tenure-track faculty will undergo an annual review each academic year. An academic year is defined in Section 5.3 in the Board of Regents Policy: Faculty Tenure. Annual appraisals in the Medical School and its departments comply with the procedures described in Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty. Each department will outline the specific process and criteria for annual appraisals, but at the very least will include a review by the tenured faculty of the
department and an annual conference with the Department Head. These procedures are provided for by Sections 16.3, 7.4, and 7.61 of the Board of Regents Policy: Faculty Tenure.

The annual review of probationary faculty will be recorded on the University of Minnesota (UM) Form 12 and will reflect the faculty member’s performance relative to the 7.12 Statement. A record of the vote by the tenured faculty for continuation or recommendation for promotion and/or tenure will be included on the UM Form 12, if a vote was taken. (This vote on annual reviews is optional). Each department will determine, and so state in their departmental 7.12 Statement, whether or not such a vote will be taken. If such an annual vote is taken in any department, a 2/3 majority of eligible voting faculty is required for continuation of the probationary appointment. A motion for termination also requires a 2/3 majority of eligible voting faculty for action to be taken. A record of the vote, either for continuation or termination, must be included on the UM Form 12. If a faculty member has extended his or her probationary period according to Section 5.5 of the Board of Regents Policy: Faculty Tenure, this must be noted on the UM Form 12 during the annual review.

The department head will meet annually with each probationary faculty member to review his/her completed UM Form 12. The department head and faculty member will sign the completed President’s Form 12. The UM Form 12 is forwarded to the dean for review, comment, and signoff.

The UM Form 12 is then forwarded to the senior vice president for academic affairs and provost (SVPP) for review, comment, and signoff. A copy is kept in the SVPP Office. The signed UM Form 12 will be kept in the probationary faculty member’s tenure file and will become a part of the dossier.

For faculty members with joint and/or secondary appointments in another Medical School or University Department, annual reviews will be carried out according to the Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty. For a candidate who has an appointment in more than one unit, the candidate’s offer letter will specify how the candidate will be evaluated annually and at the time of the tenure and/or promotion decision, including which unit’s 7.12 statement will be used as the basis for evaluation and which unit’s votes of tenured faculty will be counted or reported for the second level of review in the Medical School. The primary unit will receive input from the secondary unit on performance of responsibilities specific to that unit prior to each annual review and decision on promotion and tenure.

IV. CRITERIA FOR TENURE
Section 7.11 of the Board of Regents Policy: Faculty Tenure states:

7.11 General Criteria. What the University of Minnesota seeks above all in its faculty members is intellectual distinction and academic integrity. The basis for awarding indefinite tenure to the candidates possessing these qualities is the determination that each has established and is likely to continue to develop a distinguished record of academic achievement that is the foundation for a national or international reputation or both [FN 2]. This determination is reached through a qualitative evaluation of the candidate’s record of scholarly research or other creative work, teaching, and service [FN 3]. The relative importance of these criteria may vary in different academic units, but each of the criteria must be considered in every decision [FN 4]. Demonstrated scholarly or other creative achievement and teaching effectiveness must be given primary emphasis; service alone cannot qualify the candidate for tenure. Interdisciplinary work, public engagement, international activities and initiatives, attention to questions of diversity, technology transfer, and other special kinds of professional activity by the candidate should be considered when applicable. The awarding of indefinite tenure presupposes that the candidate’s record shows strong promise of his or her achieving promotion to professor.
A recommendation for tenure is made when an eligible faculty member has fulfilled the General Criteria for tenure, as stated in Section 7.11, and the standards stated by the Medical School and the department. Candidates must be evaluated for tenure during their mandatory decision year at the latest. The mandatory decision year occurs during the sixth probationary year for tenure-track faculty in the basic science departments, and in the ninth year for tenure-track faculty in clinical departments.

When distinction in research has greater weight in the decision to award tenure, the candidate must also show, at a minimum, evidence of competence in teaching. When distinction in teaching has the greater weight in the decision to award tenure, the candidate must also show, at a minimum, evidence of competence in research. Distinction in research requires documented evidence of high-level, independent scholarly effort. Distinction in teaching requires documented evidence of innovation and effectiveness in teaching, which have attracted national recognition.

Probationary faculty can extend their maximum period of probationary service, by one year for each occurrence of circumstances as described in Section 5.5 of the Board of Regents Policy: Faculty Tenure. In the case of childbirth, adoption, or foster placement of a child, a probationary faculty member must notify the department head, the dean of the Medical School and the senior vice president for academic affairs and provost of this circumstance using University of Minnesota Form UM 1764 and the extension of the probationary period is automatic. In the case of caregiver responsibilities or personal illness or injury, the probationary faculty member must receive the approval of the senior vice president for academic affairs and provost using University of Minnesota Form UM 1765. No probationary period may be extended for more than three years. (See the Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty for more details.)

A. TEACHING
Distinction in teaching for the granting of tenure must include scholarly work in education. Evidence of the generation of new methods of pedagogy with national recognition by peers (AAMC, ACE) and impact on
educational programs nationally is required. Activities may occur in a variety of educational settings and formats, including: didactic presentations, lectures, seminars, conferences, tutorials, laboratories, case discussions, grand rounds, hospital and clinic rounds, patient care, surgical and other procedures, and continuing education. Competence in teaching requires participation in appropriate courses with satisfactory learner evaluations.

Assessment of distinction in teaching and advising students is based upon:
1. Innovative contributions to the field of medical education which have been adopted for use by other institutions and are recognized by peers as scholarly contributions.
2. Review of course(s) taught, directed, or developed; a list of students and degree candidates for whom the faculty member has served as academic adviser.
3. Evidence of teaching excellence at the undergraduate, graduate, and/or post-doctoral levels, evaluated by the written statements and/or compiled ratings of students.
4. Written statements by the Head of the Department, academic peers, and others familiar with the candidate's performance in teaching and educational scholarship.
5. Accumulation of above forms of evidence on teaching competence and excellence over a sustained period of time.

Assessment of competence in teaching is based upon:
1. Learner and/or peer evaluations.

B. RESEARCH/SCHOLARSHIP
Assessment of distinction in research is based upon the following:
1. A review of the candidate's scientific publications, particularly those in national or international peer-reviewed journals. Evidence is sought that the work is scholarly, creative, and of high quality and significance, whether focused on laboratory endeavors, clinical investigations, or analysis or synthesis of clinical observations and experience.
2. Independence of research accomplishments or significant contribution to interdisciplinary or collaborative research. Evidence of independence or significant contribution to interdisciplinary or collaborative research may include:
   a. Naming of the candidate as the first or senior author on multi-authored journal articles and/or documentation of major, substantial contributions by the candidate to the collaborative project and publication.
   b. Statements of peer evaluators on the creativity and significance of the candidate's contributions to a collaborative research project and/or to multi-authored publications.
   c. Identification of the candidate as the principal investigator or a major collaborator on peer-reviewed, funded research grants or contracts.
   d. Invitations/nominations to serve on study sections, national policy boards, editorial boards, etc.
3. External research funding from federal and other national granting agencies which sponsor programs in biomedical and other scientific research subject to peer review.
4. Significant original contributions based on clinical observations resulting in new therapies or techniques which impact the practice of medicine.

Assessment of competence in research is based upon:
1. Evidence of significant discipline-related publications, including reports of clinical investigations, identification through case reports of new syndromes or treatments, and descriptions of new techniques.
2. Participation in invited scientific and clinical symposia, meetings and lectures.
3. Letters from authorities in the candidate's clinical discipline assessing his/her contributions to the discipline.
C. CLINICAL SERVICE (if applicable)
Clinical Service expectations in decisions for tenure and promotion to Associate Professor include enjoying an excellent reputation inside and outside the Twin Cities area as an authority in a clinical specialty, as demonstrated by patient referrals from outside the area, invited visiting lectureships, and memberships in professional societies.

D. SERVICE
In the Medical School service contributions are an integral part of the academic unit. Such service can be used to demonstrate an additional area of strength for the recommendation of tenure. Examples of service contributions include:
1. Participation in discipline-specific regional and national organizations.
2. Service to the Department, School, or University on governance-related or policy making committees.
3. Service to the community, State, and public engagement.

V. CRITERIA AND STANDARDS FOR PROMOTION IN FACULTY RANK
A. ASSISTANT PROFESSOR
In the Medical School, the entry level rank for faculty is at the Assistant Professor level. It is therefore anticipated that there will be no promotions to this rank.

B. TO ASSOCIATE PROFESSOR
The general criteria and standards for promotion to the rank of Associate Professor are those stated for consideration of tenure (see IV above).

In addition, for clinically active faculty, it is expected that they will have achieved appropriate Board Certification in the specific field where they are practicing.

A recommendation for promotion to Associate Professor is made when an eligible faculty member has fulfilled the general criteria applicable to tenure, as stated in Section 7.11, and the specific criteria and standards for promotion to Associate Professor as stated by the Medical School and the Department. It is also an expectation of the University and the Medical School that all faculty promoted to associate professor with tenure are on a trajectory that will result in them achieving the rank of full Professor.

C. TO PROFESSOR
A recommendation for promotion to Professor is based on criteria set by the Medical School and the Department in accord with Section 9.2 of the Board of Regents Policy: Faculty Tenure

9.2 Criteria for Promotion to Professor. The basis for promotion to the rank of professor is the determination that each candidate has (1) demonstrated the intellectual distinction and academic integrity expected of all faculty members, (2) added substantially to an already distinguished record of academic achievement, and (3) established the national or international reputation (or both) ordinarily resulting from such distinction and achievement [FN 7]. This determination is reached through a qualitative evaluation of the candidate’s record of scholarly research or other creative work, teaching, and service [FN 8]. The relative importance of these criteria may vary in different academic units, but each of the criteria must be considered in every decision. Interdisciplinary work, public engagement, international activities and initiatives, attention to questions of diversity, technology transfer, and other special kinds of professional activity by the candidate should be considered when applicable. But the
primary emphasis must be on demonstrated scholarly or other creative achievement and on teaching effectiveness, and service alone cannot qualify the candidate for promotion.

[FN 7] "Academic achievement" includes teaching as well as scholarly research and other creative work. The definition and relative weight of the factors may vary with the mission of the individual campus. Not being promoted to the rank of professor will not in itself result in special post-tenure review of a tenured associate professor.

[FN 8] The persons responsible for this determination are the full professors in the unit who are eligible to vote. The outcome of the vote is either promotion to the rank of professor or continuation in rank as an associate professor. The procedures for voting are identical to those outlined in Section 7.4 for the granting of indefinite tenure, the nondisclosure of grounds for the decision (Section 7.5), and the review of recommendations (Section 7.6). In addition, a petition to the Judicial Committee for review of a recommendation of continuation in rank as an associate professor follows the procedures specified in Section 7.7 for decisions about promotion to associate professor and conferral of indefinite tenure.

Promotion to Professor is not based on time in rank, but on an increasing record of accomplishments. During the period as an Associate Professor, the candidate will have continued to develop his or her already distinguished record in teaching, research, and service and added substantially to the record that was the basis for the promotion to the rank of Associate Professor. The candidate must have achieved a national and international reputation in her or his area of expertise and be recognized as a leader and a mentor.

The proposal of a candidate for Professor will present evidence of additional significant academic, scientific, scholarly, and professional achievements such as:
1. The establishment of a training program for pre- and/or post-doctoral fellows in a specific discipline.
2. Election to prestigious scientific and/or professional organizations which recognize excellence and significant academic contributions.
3. Letters from authorities attesting to the candidate's acknowledged national or international reputation and recognition of leadership in his/her field; letters from prominent senior faculty members at other universities assessing the candidate's qualifications for promotion to the rank of Professor.
4. Nationally recognized leadership roles in the profession or the institution.
5. Evidence of effective mentoring of junior faculty, fellows, and M.D. and Ph.D. trainees.
6. Creating and sustaining a culture that fosters diversity.
7. Ongoing record of peer-reviewed publications.
8. Ongoing record of funding for research or scholarship (if applicable).
9. Ongoing excellence in clinical activity (if applicable).

VI. ANNUAL REVIEW OF TENURED FACULTY
In accordance with Section 7a of the Board of Regents Policy: Faculty Tenure and the Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty, each Medical School department will annually conduct a review of each tenured faculty member. The specific Departmental process for annual review and review criteria (i.e. the goals and expectations for continued performance by tenured faculty) will be described in the Departmental 7.12 Statement Part 2.

The Medical School procedures for annual review of tenured faculty are provided in Part 3 of the document (Annual Review of Tenured Faculty).

VII. VOTING PROCEDURES
A. Promotion and tenure decisions in the Medical School require a positive vote by two-thirds of all eligible voting faculty members on the question to recommend affirmatively for promotion and/or tenure.

B. Decisions to terminate the contract of a probationary faculty member also require a vote by two-thirds of all eligible voting faculty members in support of the motion to terminate the appointment.

C. Tenured faculty are eligible to vote on the awarding of tenure to probationary faculty. Tenured faculty holding appropriate rank are eligible to vote on recommendations for promotion of candidates.

VIII. PROCESS FOR UPDATING THIS 7.12 STATEMENT

The Medical School will review its 7.12 Statement Preamble at least every five years, or more frequently as needed. Revisions will be made by the Associate Dean for Faculty Affairs. The revisions will be presented to the Faculty Advisory Council. All Medical School tenured and tenure-track faculty will be invited to review and give input on the statement, and approval will be obtained through a majority vote of the tenured and tenure-track faculty, in conjunction with approval of their departmental criteria, with the approval date noted on the document.

History of Revisions (approved by vote of the Faculty):

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Revision: April 15, 1993
Revision: July 2, 2009
Revision Approved by Medical School Faculty: June 21, 2012
Approved by Senior Vice President for Academic Affairs and Provost: June 22, 2012
PART 2. DEPARTMENTAL ADDENDUM

I. INTRODUCTORY STATEMENT
This document describes the specific criteria and standards which will be used to evaluate whether faculty in the Department of Laboratory Medicine and Pathology, both in the basic and clinical sciences, meet the general criteria in Section 7.11 of the Board of Regents Policy: *Faculty Tenure*, as defined for this Department. It also provides the specific criteria and standards that will be used to evaluate Associate Professors for Promotion to Professor according to Section 9.2 of the Faculty Tenure policy.

This document contains the Department’s Criteria and Standards pertaining to:
A. Award of indefinite tenure
B. Promotion from Assistant Professor to Associate Professor and from Associate Professor to Professor
C. The departmental process for the annual appraisal of probationary and tenured faculty
D. The goals and expectations for the annual review of tenured faculty.

The criteria, standards and procedures are applied without regard to race, religion, color, gender, national origin, handicap, age, veteran status or sexual orientation.

II. MISSION, VISION AND GOALS
The mission of the Department of Laboratory Medicine and Pathology is to conduct innovative, high quality programs of biomedical research in laboratory medicine and pathology, to educate current and future physicians and scientists, to provide tertiary laboratory medicine and pathology services for University of Minnesota Physicians and to serve as a regional and national reference for pathologic diagnosis and for highly innovative, complex clinical laboratory testing. Scholarship concentrated in education and research in biomedical and clinical sciences and professional service in patient care activities/outreach are important elements to be considered for faculty members in the department with clinical care responsibilities.

III. APPOINTMENT AND ANNUAL APPRAISALS OF PROBATIONARY FACULTY

A. APPOINTMENT OF PROBATIONARY FACULTY

Tenured and tenure-track appointments require pre-approval by the Dean of the Medical School to initiate a search. Faculty hired with tenure are subject to approval by the Senior Vice-President for Academic Affairs and Provost of the University of Minnesota. For appointment as Assistant Professor, candidates are expected to possess a doctoral degree (e.g., M.D., Ph.D., or equivalent). In addition, candidates must provide documentation of:

a. Expertise in a subspecialty area in laboratory medicine or pathology; this may be documented by fellowships, work experience in the field and/or publications in the field of expertise.

b. Show documented evidence of involvement in research projects with grant history and/or discipline-related publications.

c. Competence and growth in communication skills, including effective didactic lectures, oral and written presentations of research, and/or written grant proposals.

d. This rank may also be accorded to a person who has completed only the educational program characteristic of this discipline, when that person gives evidence of superior potential for professional growth and productivity.
B. ANNUAL APPRAISALS OF PROBATIONARY FACULTY

1. Process
   The overall process for Annual Review of Probationary Faculty in the Department of Laboratory Medicine and Pathology is in compliance with Section 7.2 of the Board of Regents Policy: Faculty Tenure and the Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty. The annual review process includes the following components:

   - In early winter a preliminary letter is sent to all probationary faculty to announce the review process.
   - Upon receipt of the letter the probationary faculty completes the following:
     - A cover letter addressing the following questions:
       - Do you feel your progress toward tenure has been satisfactory?
       - What do you feel are your major accomplishments?
       - Have any circumstances hindered your ability to achieve the progress you expected or that have influenced the perception of your progress to others?
     - A tenure-track dossier that summarizes the faculty member’s activities during the past year.
     - Faculty mentor(s), (typically two), are appointed to advise faculty at the Assistant Professor rank. Mentors will submit letters summarizing their appraisal of the probationary faculty member to the Junior Faculty Review Committee for consideration.
   - The tenured members of the Junior Faculty Review Committee are assigned probationary faculty to review. The committee meets with the probationary faculty members in early spring. A summary of the meetings are sent to the department head for review.
   - A tenured faculty meeting is held in spring to review the progress of each probationary faculty member.
   - Final summaries are prepared after the faculty meeting on the University of Minnesota (UM) Form 12 (Annual Appraisal Form).
   - The Head of the department meets with each probationary faculty member to review the summaries and sign the University of Minnesota (UM) Form 12 (Annual Appraisal Form). This process is completed before the end of the semester.
   - University of Minnesota (UM) Form 12s (Annual Appraisal Form) are then sent to the Dean’s office then to the Senior Vice President for Academic Affairs and Provost for review and approval.

2. Criteria
   The criteria for satisfactory performance to be used for the annual review in the Department of Laboratory Medicine and Pathology are the same as the appropriate criteria for rank, as defined in this 7.12 Statement.

IV. CRITERIA FOR TENURE
   Indefinite tenure is awarded when faculty members have demonstrated that their work will continue to contribute to the Mission of the Medical School and Department for the entirety of their academic career. Award of indefinite tenure presupposes that that the candidate’s record shows a very strong promise of his or her achieving promotion to the rank of Professor.

   There should be a demonstrated productivity and distinction in research, sustained scholarly productivity, and effectiveness in teaching. When distinction in research is more heavily weighted in the decision for
tenure, the candidate must also show, at a minimum, evidence of effectiveness in teaching, as defined in this document.

To be awarded indefinite tenure, a faculty member will be expected to have:
- Documentation of continued independent and sustained external support as principal investigator or a co-investigator making significant contribution to interdisciplinary or collaborative research for faculty whose primary focus is on basic research.
- Documentation as a substantial collaborator making a unique contribution to externally funded grants for faculty whose primary focus is on patient-care.
- Outstanding discipline-related patient care activities contribute significantly to the research, teaching and service missions of the institution.
- National reputation as a scholar. Examples include but are not limited to: peer-reviewed publications, invited participation in national meetings, leading national meetings or components of them, sitting on national panels, or boards, et al.

Clinical practice, professional service and administration (Department, Medical School, Academic Health Center and University institutional service) will be taken into account but cannot serve as the sole basis for the awarding of tenure. Expectations in the primary area of research or clinically related scholarship will be adjusted proportionately to account for assigned duties in these other areas of professional activity.

The Department of Laboratory Medicine and Pathology subscribes to the criteria and standards for tenure of faculty at the University of Minnesota Medical School, as described in Part 1. Medical School Preamble, with the following department-specific criteria:

**NOTE:** Accomplishments and criteria delineated in this document are not evaluated by numbers (i.e., number of individual criteria fulfilled for each rank, or number of accomplishments within individual criteria, such as publications or courses taught. Rather, criteria and accomplishments are evaluated based on their value as academic accomplishments of the faculty and the goals and mission of the department and the institution. The determination for granting of tenure is reached through a qualitative (not quantitative) evaluation of the candidate’s record of scholarly research or other creative work.

### A. TEACHING

**Teaching effectiveness**—Evidence of teaching effectiveness at the professional, undergraduate, graduate, and/or post-doctoral levels as demonstrated by the written statements and/or compiled evaluations by both students and peers regarding:

a) Review of course(s) taught, directed, or developed; a list of students and degree candidates for whom the faculty member has served as academic and/or research advisor.

b) Written statements by the Head of the department, course directors, academic peers, and others familiar with the candidate’s performance in teaching.

Accumulation of the above forms of evidence on teaching competence and excellence over a sustained period of time.
Promotion with an emphasis on distinction in teaching requires documented evidence of innovation and effectiveness in teaching which has attracted national recognition, evidence of scholarly publications in this area and national recognition to the scholarship of pedagogy.

Distinction in teaching for the granting of tenure must include sustained scholarly work in education appearing in peer-reviewed high quality publications. Receipt of multiple grants over a period of time for those teaching efforts from national agencies or foundations. Evidence of the generation of new methods of pedagogy with national recognition by peers (USCAP, CAP, ASCP, subspecialty pathology organizations); documentation of significant impact on educational programs nationally is required.

Examples of contributions to education include, but are not limited to the following:
   a. Developing a new course, new experiential education program, new lab exercises or experiences, or revising an existing course.
   b. Receiving an educational development grant or directing an experimental education program.
   c. Publishing a review article of an educational nature in a professional journal.
   d. Participating as an invited contributor in a national symposium or workshop on an aspect of science health care education.
   e. Publishing an article on subjects relating to education in science or health care.
   f. Developing and presenting a continuing education program.
   g. Receiving a recognized teaching award.
   h. Developing or adapting a course for delivery using technology enhanced learning.
   i. Developing a certificate program or other form of advanced professional education.
   j. Undertaking responsibility for a residency or fellowship rotation.
   k. Mentoring junior faculty.
   l. Guidance and mentoring of graduate students.
   m. Training, advising and mentoring postdoctoral fellows, residents and medical students in basic, translational or clinical research.

Documentation of Teaching Activity:

Accumulation of evidence on teaching competence and distinction over a sustained period of time should be documented. Examples include but are not limited to:

- Reviews of course(s) taught, directed, modified or developed, curriculum development
- Compiled students’ evaluations of courses (all provided evaluations, not a selection), written statements by the Head of the Department, academic peers, and others familiar with the candidate's performance in teaching.
- List of students and degree candidates for whom the faculty member has served as academic adviser, presentation by trainees of research at national and international meetings, participation of trainees in peer-reviewed publications
- Publication of reviews, chapters, and books
- Participation in programs to improve teaching skills
- Documented by parameters such as trainees’ performance-based evaluations.

B. RESEARCH / SCHOLARSHIP
For conferral of tenure candidates must have demonstrated independence in research and scholarship through independent or significant interdisciplinary and collaborative activities and must be capable of
directing and conducting research of high quality. Research and scholarship may be basic, translational or clinically applied.

Research/Scholarship in the Department of Laboratory Medicine and Pathology include, but are not limited to:

1. External support should be documented by external research funding through competitive grants. Sustained external peer reviewed grant support from national agencies (such as National Institutes of Health, Center for Disease Control and Prevention, Health Services and Services Administration, American Cancer Society, Robert Wood Johnson Foundation, Rockefeller Foundation, Department of Defense, etc.) is required for faculty with a primary focus on research. This could be as a principal investigator or co-investigator making significant contribution to interdisciplinary or collaborative research. Significant funding must be in place at the time of a tenure decision.

2. Documentation of significant research publications. Faculty must specify role in these publications.

3. Faculty members with clinical responsibilities must exhibit excellence as diagnosticians. Pathologists must be active in the intellectual development of the field. Significant original contributions based on clinicopathologic observations that result in new diagnostic strategies, or techniques that provide new prognostic or therapeutic information which impact clinical utility and the practice of medicine. This may include:
   a. New test development, method development, method comparison
   b. New approaches and techniques for the identification of diagnostic, prognostic and therapeutic markers of disease, identification and characterization of new disease entities, improvement in the classification of diseases, and new observations at microscopic, biochemical, genetic or molecular levels that contribute to our understanding of pathologic processes
   c. The development or utilization of new approaches and techniques for the improvement of teaching graduate and post-graduate students

4. Development and dissemination of new technology or scientific procedures resulting in innovative products, patents, practices, and ideas of significance and value to society.

5. Development of scholarship and leadership of important clinical programs through which the hospital and the Medical School acquire local, national and international prestige in academic pathology.

6. Collaborative research is valued and should also be considered in the overall evaluation of scholarly productivity. Significance of research and medical expertise in collaborative research must reflect the fact that participation of the candidate is critical in the acquisition of new knowledge and the candidate must have contributed significantly to the intellectual value of the publication. A key role in collaborative research must reflect on the specific area of expertise of the faculty member. This should be documented by participation as Co-PI or Co-I in previous grants supporting such area and by publications resulting from such research. Co-authorship to acknowledge contribution of the candidate as part of clinical care professional service or to acknowledge contribution of techniques, reagents or material provided by the candidate is not regarded as intellectual contribution to the publication and is not acceptable.

Evidence of independence or significant contribution to collaborative research may include:

   a. Naming of the candidate as the first or senior author on multi-authored journal articles and/or documentation of major, substantial contributions by the candidate to the collaborative project and publication. In multi-authored articles, the contribution of the candidate must be specifically described.
b. Statements of peer evaluators on the creativity and significance of the candidate's contributions to a collaborative research project and/or to multi-authored publications.

c. Identification of the candidate as the principal investigator or a major collaborator on peer-reviewed, funded research grants or contracts.

7. Invitations/nominations to serve on study sections, national policy boards, editorial boards, and service on major national committees that influence the practice of pathology.

8. National reputation/recognition in basic research, translational or clinically applied area, depending on the faculty member’s area of expertise.

9. Participation in invited scientific and clinical symposia, meetings and lectures.

10. Letters from authorities in the candidate's discipline assessing his/her contributions to the field.

C. CLINICAL ACTIVITY

Excellence and innovation in clinical activity is expected from faculty with patient-care responsibilities. This may be demonstrated by significant accomplishments (commensurate with fraction of clinical time), and supported by evidence described below. Clinical activity alone is not a criterion for tenure; faculty with clinical responsibilities must excel in scholarly productivity, research and/or teaching as highlighted above.

Examples of a scholarly approach to clinical activity include:

a. Introduction of new clinical services, approaches, or techniques

b. Establishment or implementation of a novel clinical technique that has demonstrated improved or more efficient patient care.

c. Promulgation of novel approach to outside institutions.

d. Advancement of a subspecialty or particular facet of patient care in the candidate’s field of expertise.

e. Promotion of clinical trials or translational techniques that advance the frontier of care.

Evidence of excellence or significant accomplishment in clinical activity might include:

a. National expertise in a well-defined area of laboratory medicine and pathology

b. Statement by the candidate describing his/her clinical activities, what makes their service unique/outstanding, and how they have followed a scholarly approach.

c. CME written materials and publications that support a scholarly approach to patient care.

D. SERVICE

"Service" may be professional or institutional. Professional, discipline-related service, based on one's academic expertise, is that provided to the profession or to the local (University of Minnesota), state, national or international community (public service). Assessment of significant discipline-related service contributions is based upon criteria that include, but are not limited to the following: professional achievements, collaboration, leadership roles and reputation for excellence in discipline-specific regional and national organizations. Peer practitioners should evaluate the practice competence of the candidate.

Institutional service may be administrative, committee, and related contributions to the Department, Medical School, Academic Health Center, or the University.

All faculty members are expected to engage in service activities, but only modest institutional service is expected of probationary faculty. Institutional service is not to be considered as replacement for teaching, research and scholarly activities, or professional service. Evidence of the strength and quality of these activities should be provided by the individual faculty member and by qualified peers or colleagues with first-hand knowledge and experience related to such activity as part of the annual review of activities.
Public engagement is not in itself a criterion for promotion or tenure decisions; rather, it should be regarded as an approach or focus of professional efforts.

Public engagement may include:

a. Clear academic and community change goals.
b. Adequate preparation on content area and grounding in community.
c. Appropriate methods: Scientific rigor and community engagement.
d. Significant results: Impact on the field and the community.
e. Effective presentation/dissemination to academic and community audiences.
f. Reflective critique: Lessons learned to improve the scholarship and community engagement.
g. Leadership and personal contribution.
h. Consistently ethical behavior: Socially responsible conduct of research.

Public engagement may include scholarly products such as peer-reviewed publications, national peer recognition, dissemination and broad impact on the community. It may also involve additional forms of documentation, each of which is also evaluated for originality, independence, coherence, impact and collaborative skills, e.g.:

a. Description of teaching programs that address needs of the pathology/research community and take advantage of individual skills of members in the community.
b. Description of teaching programs that address aspects of public health issues in the community and involve elements of the community, such as staff members at the Science Museum of Minnesota or schools in the community, including details about the process and collaborative partnerships.
c. Description of research projects that are headed by faculty members of our department, but involve elements of the community, such as teachers, other professionals and students. Describe participation of collaborators and benefits to the state.
d. Products such as videos, web-sites, CD-ROMs or educational manuals.
e. Popular media with information on types of media, populations reached, circulation, influence, and citations.
f. Summary of public influence such as involvement in policy development, policy changes, new laws or changes in agency practices. Examples include activities in the Minnesota Tumor Registry, State Department of Health in relation to activities in infectious diseases, epidemiology or bioterrorism, etc. and similar activities at a national level.
g. Multiple, complementary products integrating teaching, research and service, e.g., a package containing a refereed journal article, community education materials and facilitation tools and media stories – all emerging from one collaborative project.
h. Summary of involvement of community stakeholders as collaborators and co-creators of projects.
i. Evidence of the candidate’s stature and reputation may be documented by participation as advisor or consultant to state agencies and other local health or scientific organizations.

Additional documentation such as this for public engagement may be different than for traditional disciplinary scholarship, but evaluation of these products is not held to lower standards than traditional disciplinary activities. Determining whether certain products (such as on-line media or CD-ROMs) meet these evaluation criteria may require efforts by tenured faculty to determine the standards of quality in unfamiliar areas and to locate peer reviewers who can evaluate these products by the best contemporary standards.

V. CRITERIA AND STANDARDS FOR PROMOTION IN FACULTY RANK

Promotion decisions in the Department of Laboratory Medicine and Pathology require a positive vote by two-thirds of all faculty members eligible to vote on the question to affirmatively recommend for promotion. Eligible members include tenured faculty at the proposed rank and above voting for promotion; and faculty with tenure voting for tenure.
DEPARTMENT OF LABORATORY MEDICINE AND PATHOLOGY

If a faculty member has a joint appointment in another department and is being considered for promotion, the Department of Laboratory Medicine and Pathology will follow the processes described in the Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty. A letter from the Chair of that department should support the promotion in his/her department.

A. ASSISTANT PROFESSOR
   Not applicable in the Medical School (entry level rank is Assistant Professor)

B. TO ASSOCIATE PROFESSOR

   The criteria and standards for promotion to the rank of Associate Professor in the Department of Laboratory Medicine and Pathology are those stated for consideration of tenure (see IV above). A recommendation for promotion to Associate Professor is made when an eligible faculty member has fulfilled the general criteria applicable to tenure.

C. TO PROFESSOR

   Section 9.2 of the Board of Regents Policy: Faculty Tenure describes University-wide criteria for promotion to the rank of full Professor. The Promotion and Tenure Committee of the department will review all tenured Associate Professors every four years regarding their progress toward promotion to the rank of Professor. A summary of this review will be provided to the faculty member and to the Chair of the department.

   The basis for promotion to the rank of Professor is the determination that each candidate has:
   1. Demonstrated the intellectual distinction and academic integrity expected from all faculty members
   2. Added substantially to an already distinguished record of academic achievement
   3. Established the national or international reputation ordinarily resulting from such distinction or achievement. This determination is reached through a qualitative evaluation of the candidate’s record of scholarly research or other creative work, teaching and service.

   Primary emphasis must be on demonstrated scholarly or other creative achievement and on teaching effectiveness; service alone can not qualify the candidate for promotion.

   A recommendation for promotion to Professor is based on criteria set by the Medical School and the department in accord with Section 9.2 of the Board of Regents Policy: Faculty Tenure. The proposal of a candidate for Professor will also present evidence of effective mentoring of junior faculty and attention to fostering a culture which enhances diversity. Continued adherence to the standards on which promotion to Associate Professor was based, with respect to performance and accomplishments in teaching, research and service is expected, and should be documented in the Annual Performance Reviews. In addition to sustained contributions and publications outlined below, faculty must have demonstrated continual outstanding productivity, contribution to the academic growth of the department and the institution, leadership and independence. Additional evidence of scholarship include but is not limited to the following for this rank:

   1. The establishment of a training program for pre- and/or post-doctoral Fellows in a specific discipline, such as a specialty fellowship.
   2. Leadership role in prestigious scientific and/or professional organizations which regulate and improve the practice of pathology and academic pathology (e.g., American Board of Pathology, United States-Canadian Academy of Pathology, College of American Pathologists, American
Leadership role in institutional service is not criterion for promotion.

3. Letters from national or international authorities attesting to the candidate's acknowledged national or international reputation and recognition of leadership in his/her field; letters from prominent, senior faculty members at other universities assessing the candidate's qualifications for promotion to the rank of Professor.

4. Nationally or internationally recognized leadership roles in the profession or the institution. Examples include but are not limited to:
   a. Faculty must be a national or international authority in the field.
   b. Leadership positions in subspecialty societies, editorships of major journals.
   c. Direction of courses, workshops or symposia at national or international meetings.

5. The candidate’s performance must be graded truly outstanding in teaching; significance and originality must be documented.

6. A greater contribution in the area of professional and institutional service is expected of candidates for the rank of Professor than expected for the award of tenure.

7. The candidate must document role and effectiveness as mentor of junior faculty.

8. Creating and sustaining a culture that fosters diversity

VI. ANNUAL REVIEW OF TENURED FACULTY

It is an expectation that after the granting of tenure, the faculty member’s level and quality of productivity will continue; while the focus of scholarly activities may change, academic productivity should be maintained. All faculty members are expected to contribute to the intellectual environment of the Department of Laboratory Medicine and Pathology as well as the greater University community.

The Department of Laboratory Medicine and Pathology utilizes the process for Post-Tenure Review defined by Part 3. Annual Review of Tenured Faculty. The faculty member will be reviewed on the basis of the quality of efforts in research, teaching, and service that comprise the triad of faculty functions. All faculty members are expected to contribute to each of these components. It is recognized that faculty members have different strengths; substantial contributions in one component may balance other elements of the triad. All tenured faculty members are expected to foster the development of Assistant Professors. Full Professors in addition are expected to foster the continued development of Associate Professors.

The purpose of the annual review is to ensure continuation of high caliber performance following granting of tenure. Thus, the aim of the review is proactive and positive – it seeks to improve faculty member’s performance and to identify potential weaknesses. If weaknesses are apparent, the goal is to constructively develop a plan in collaboration with the faculty member to identify support needed, possible redistribution of efforts and to enhance the faculty member’s effectiveness towards the mission of the department and the institution.

The review will focus on whether the faculty member continues to meet the goals and expectations for tenured faculty members as outlined in this 7.12 Statement.

This process is also in compliance with the University Policy Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty. During the spring of each academic year all department heads will schedule an annual review conference with each tenured faculty member. This
responsibility may be delegated to Division Chiefs, Departmental Review Committee, Center Directors or other designee. All reviews must receive final approval from the Department Head. Prior to this conference the individual faculty member will provide the requisite information, as well as an updated Curriculum Vitae, following the department’s annual review reporting format.

The annual review must take into account the goals and expectations of the unit for the performance of tenured faculty in the areas of research, teaching, and service. The performance of tenured faculty is rated as “outstanding,” “satisfactory” or “unsatisfactory” for each of the categories to which the tenured faculty dedicates professional efforts.

The annual review must include:
1. Accomplishments over the previous year in relation to goals set for that year.
2. Percentage of efforts in each domain, to be updated annually.
3. Agreed upon goals for the upcoming year.
4. Plans for subsequent years.
5. Specific recognition of outstanding accomplishments.
6. Specific steps that need to be taken by the department, if any, to achieve personal professional goals to support department/and institutional mission.

The annual review documentation must include detailed accomplishments in each domain:

A. TEACHING
Consistent with its mission, a goal of the department is to provide excellent professional, graduate and postgraduate education. Parameters used to assess effectiveness in teaching may include evaluations of lectures and laboratory practices proctored, by medical student’s evaluations of teaching by residents, fellows and exit evaluations by graduate students.

For satisfactory performance tenured faculty should report at least two accomplishments within one or more of the following areas:
1. Teaching courses as assigned by the Department Head to meet department and collegiate curricular needs
2. Advise and mentor undergraduate and graduate students, medical students, residents and fellows, and postdoctoral fellows.
3. Instructional design that leads to new course products or update of instructional media to reflect changes in our specialty
4. Evidence of active participation on graduate student committees, etc.
5. Local or national recognition for teaching activities

B. RESEARCH/SCHOLARSHIP
Consistent with its mission, a goal of the department is to maintain an active program of nationally and internationally recognized scholarly activity. Faculty should provide evidence that they are maintaining a consistent program of scholarly activity and conducting research of high quality.

For satisfactory performance tenured non-clinical research faculty must report at the minimum accomplishments in #1 and #2. Tenured clinical faculty (with at least a .5 clinical FTE (cFTE) must report accomplishments in at least two of the five areas listed below:
1. Primary or senior author in peer-reviewed journals
2. Sustained funding from external agencies and evidence of submission of proposals for funding for faculty with a primary emphasis on research as either principal investigator or co-investigator making significant contribution to interdisciplinary or collaborative research
3. Significant collaborative efforts with other researchers
4. Organization or active participation in scholarly conferences at the national or international level
5. Continued training of undergraduate and graduate students, medical students, residents and fellows, postdoctoral fellows, and sub-specialty fellows in basic or clinical research
6. Publications of book chapters or patents

C. SERVICE
Institutional and professional service must also be considered along with teaching and scholarly activities. However, professional and institutional service does not replace scholarly productivity. The relevance of service (professional and institutional) activities to the mission of the Department, the Medical School, the Academic Health Center and the University should be assessed. Evidence of the strength and quality of service activities should be provided by the individual faculty member as part of the annual review of activities.

For satisfactory performance tenured faculty must report at least two substantial accomplishments in this area. This can include but is not limited to:

1. Service on standing Medical School or AHC committees e.g. the Admissions Committee
2. Serving as an officer, on the board of directors, or committees on a national professional organizations.
3. Participating in national grant review councils.
4. Providing clinical care.

Unsatisfactory performance is defined as a failure to meet the satisfactory performance requirements within the criteria listed for each domain (Teaching, Research and Service).

Following the annual review conference, the Department Head or designee will complete the Medical School Annual review Form, summarizing the conference and stating the agree-upon goals for the upcoming year. The Medical School Annual Review Form must be signed by the faculty member, the evaluator (if applicable), and the Department Head.

For faculty members who have met the goals and expectations for tenured faculty for the department according to the department 7.12 statement, the signed Medical School Annual review form is sent to the office of the Associate Dean for Faculty Affairs, who signs on behalf of the Dean. The review form will be handled confidentially by the Dean and the Associate Dean and will assist them in supporting recommendations for promotion, special recognition, or salary adjustment.

For faculty members whose performance is below expectations for the department, as specified in the department 7.12 statement, the case is referred to a committee of elected, tenured faculty members in the department. If that committee concurs with the judgment of the Department Head, then both the committee and the Department Head formulate a detailed written Faculty Improvement Plan for the faculty member. The letter from the Department Head and the elected committee must identify the ending date for the period of performance improvement, which can be no less than one year from the date of the letter, and must request that the faculty member provide a report at that time describing his or her progress toward meeting the goals and expectations of the department.

The Department Head and the committee should make reasonable efforts to meet with the faculty member to discuss the plan for meeting the goals and expectations of the unit. The faculty member may request modification of the plan from the Department Head and the committee, but may not at
this stage file a complaint with the Senate Judicial Committee.

At the end of the time period specified for performance improvement, the faculty member under review must provide a report describing his or her progress toward meeting the goals and expectations of the department. The department head and elected committee of tenured faculty will then review the progress that the faculty member has made regarding the recommendations as specified in the report from the faculty member.

The process above may be repeated for a second year if the faculty member has failed to complete the initial plan.

VII. VOTING PROCEDURES

A. VOTE

1. A vote will be taken for decisions to recommend a candidate for promotion and/or tenure. Such a vote will require a 2/3 majority for the motion to pass.

2. A vote will be taken for all decisions to terminate the contract of a probationary faculty member. Such a vote will require a 2/3 majority for the motion to pass.

VIII. PROCESS FOR UPDATING 7.12 STATEMENT

The Department of Laboratory Medicine and Pathology will review its 7.12 Statement every five years, or more frequently as needed. Revisions will be made by the Department of Laboratory Medicine and Pathology’s Promotions and Tenure Committee. All departmental tenured and tenure-track faculty will be invited to review and give input on the statement. Approval will be obtained through a majority vote by the Department of Laboratory Medicine and Pathology faculty, with the approval date noted on the document.

History:
Voted on by secret ballot and approved by the Laboratory Medicine and Pathology Faculty: March 27, 2013
Approved by the Senior Vice President for Academic Affairs and Provost: March 28, 2013
PART 3. ANNUAL REVIEW OF TENURED FACULTY

A. ANNUAL REVIEW

All tenured faculty must undergo an annual review each year. This process is key in allowing the faculty member and the department to assess individual progress. It also helps to protect the faculty member, the department, and the School, in case of any misunderstanding or conflict that may arise. For any questions about this process, please call the Office of Faculty Affairs and/or the Vice Provost for Faculty and Academic Affairs.

1. During the spring of each academic year, all department heads will schedule an annual review conference with each tenured faculty member. This responsibility may be delegated to Division Chiefs, Departmental Review Committee, Center Directors or other designee. All reviews must receive final approval and signature from the Department Head.

2. Prior to this conference the individual faculty member will provide the requisite information, as well as an updated curriculum vitae, following the department’s annual review reporting format.

3. Annual reviews may be carried out in the format preferred by each department but must, at a minimum, be compliant with the rules detailed in the Board of Regents Policy: Faculty Tenure, Section 7a, and the Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty.

4. The annual review documentation should include:
   a. Accomplishments of the previous year, particularly in relation to goals set for the year.
   b. Detailed accomplishments in each domain relevant to the faculty member (as applicable: teaching, research and/or scholarship, service, and clinical activity (if applicable)):
      i. Evaluation of quality and quantity of teaching, attitude towards learners, knowledge of subject matter, and specific contributions to continuing education.
      ii. Evaluation of research and/or scholarly activity including current projects, grants applied for or funded, publications, and papers presented or submitted.
      iii. Evaluation of service.
      iv. Evaluation of clinical activity (when applicable), including volume of patients served, breadth of referrals, incorporation of patient care into teaching program, activity in local and national professional organizations.
   c. Percentage of effort in each domain, to be updated annually.
   d. Agreed upon goals for the upcoming year.
   e. Plans for subsequent years with specific recognition of outstanding accomplishments and plans to maintain high performance level.

5. The Annual Review conference should emphasize frank discussion concerning the faculty member’s past and present performance in given areas of responsibility, noting progress in achieving previously established goals and objectives. In particular, it is important to frame the evaluation in the context of the proposed distribution of responsibilities in the four domains of Teaching, Research/Scholarship, Service, and Clinical Activity (if applicable). If the faculty member is working towards promotion, the Department Head and the faculty member should ensure that year-by-year progress, consistent with the Departmental 7.12 Statement, has been appropriate to date and specific goals for the coming year should be agreed upon.

Pursuant to the Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure Track and Tenured Faculty, each department’s tenured faculty shall review their tenured associate professors at a
minimum of every four years regarding their progress toward achieving the rank of professor. This review is based upon the criteria for promotion to professor in the department 7.12 statement. This four-year progress review can be part of the annual review process.

6. Following the Annual Review conference, the Department Head or designee will complete the Medical School Annual Review Form, summarizing the conference and stating the agreed upon goals for the upcoming year. The Medical School Annual Review Form must be signed by the faculty member, the evaluator (if applicable), and the Department Head.

7. For faculty members who have met the goals and expectations for tenured faculty for the department, according to the department 7.12 statement, the signed Medical School Annual Review Form is sent to office of Associate Dean for Faculty Affairs who signs on behalf of the Dean. The review form will be handled confidentially by the Dean and the Associate Dean and will assist them in supporting recommendations for promotion, special recognition, or salary adjustments.

8. If the department head or designee finds that the tenured faculty member’s performance is below that of the goals and expectations of the department as specified in the 7.12 statement, then the case is referred to a committee of elected, tenured faculty members in the department. If that committee concurs with the judgment of the department head, then both the department head and the committee formulate a detailed written Faculty Improvement Plan for the faculty member. The letter from the department head and the elected committee must identify the ending date for the period of performance improvement and must request that the faculty member provide a report at that time describing his or her progress towards meeting the goals and expectations of the department.

The department head and the committee chair should make reasonable efforts to meet with the faculty member to discuss the plan for meeting the goals and expectations of the unit. The faculty member may request modification of the plan from the department head and the committee but may not at this stage file a complaint with the Senate Judicial Committee.

At the end of the time period specified for performance improvement, the faculty member under review must provide a report describing his or her progress toward meeting the goals and expectations of the department. The department head and the elected committee of tenured faculty will then review the progress that the faculty member has made regarding the recommendations as specified in the report from the faculty member.

This process above may be repeated for a second year if the faculty member has failed to complete the initial plan.

**B. SPECIAL PEER REVIEW**

1. **Initiation**
   
   In compliance with Section 7a.3 of the Board of Regents Policy: Faculty Tenure, a Special Peer Review may be requested by the department head and the departmental review committee of elected, tenured faculty members following the unsuccessful completion of a Faculty Improvement Plan as described in Section A.8 above.

2. The Medical School Dean will be notified and asked to initiate a Special Review. The Dean must first review the file independently to determine that the faculty member falls below the department’s goals and expectations and has not successfully completed the Faculty Improvement Plan. S/he determines that
special peer review is warranted.

3. The Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty describe details of the process for the special peer review. Some of these are highlighted below but the reader is referred to the Procedures and the Faculty Tenure policy for a complete perspective. All of the steps in the Procedures and subsection 7a.3 of the Faculty Tenure policy must be followed even if they are not described in this document.

4. Review Panel
   A Special Review Panel composed of tenured members at the same rank or above the rank of the faculty member under review:
   i. Members are elected independently for each Special Review, by the tenured faculty of the department.
   ii. Members (5) include:
       1. 1 member appointed by the faculty member being reviewed.
       2. 4 members elected from a slate of candidates nominated by department head and the tenured faculty.
   iii. Members may be in the department or outside, if appropriate – case by case. If the faculty member has a secondary appointment in another department, that department should be represented on the committee.
   iv. Members should not be the same as any previous review committee for that faculty member

5. Special Review materials include:
   a. Department head and previous Review Committee statement(s) requesting Special Review.
   b. Annual review with goals and effort distribution (at least 5 years if available).
   c. Previous recommendations for faculty development and outcomes (Performance Improvement Plans).
   d. Personal statement by the faculty member.
   e. Current annotated curriculum vitae.
   f. Teaching evaluations.
   g. Reprints.
   h. Supporting documentation, including, but not limited to, letters of acceptance for articles in press, and acknowledgement by journal or funding agency of manuscript or proposal receipt.
   i. Any other relevant documentation.

6. Review Criteria and Methodology
   a. The main focuses of the Special Review are the area(s) of deficiency identified in previous review(s).
   b. Due process procedures, as defined in University documents, will be applied to address disagreements at different levels of the review and to offer protection for academic freedom.
   c. Faculty members undergoing review may examine any material in their file at any time in the review process.
   d. Faculty member’s performance will be evaluated as either:
       i. Satisfactory: meeting department and/or Medical School goals and expectations for tenured faculty members.
       ii. Unsatisfactory: not meeting department and/or Medical School goals and expectations for tenured faculty members.
   e. The actions that the Panel may recommend, listed in section 7a.3 of the Board of Regents Policy: Faculty Tenure, include:
i. Terminate review if the Panel finds that the faculty member's performance meets the goals and expectations of the department.

ii. Alter allocation of effort if the Panel determines that the faculty member's strengths are not being fully utilized: it might suggest that the allocation of effort between teaching, research, and service be altered so as to maximize the faculty member's contributions to the University.

iii. Suggested improvements: if the faculty member's performance is likely to be improved by specific steps, and that process can adequately be monitored by further regular Annual Reviews, the Panel may suggest that those steps be taken and remit the case to the Annual Review process.

iv. Salary reduction if the faculty member's performance has declined in such a way as no longer to warrant the base salary that is attached to the position, the Panel may recommend a reduction in base salary of up to 10% (see Board of Regents Policy: Tenure Faculty for complete details).

v. Dismissal: if the faculty member's performance has fallen below the standard of the Board of Regents Policy: Faculty Tenure Section 10.21(a), "sustained refusal or failure to perform reasonably assigned duties adequately," the Panel can recommend the commencement of proceedings for termination of appointment, or involuntary leave of absence (see details below).

vi. The Panel may also recommend a combination of these measures.

f. The recommendations of the Panel will be implemented by the Department, the Dean’s Office or other administrative body, as appropriate, depending on the specific recommendation.

History of Revisions (approved by vote of the Faculty):

Original Document: Date unknown
Approved by Medical School Faculty: June 21, 2012
Approved by Senior Vice President for Academic Affairs and Provost: June 22, 2012