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| **APPENDIX 1**  **PROMOTION CRITERIA MATRIX**  **Updated July, 2016**  NOTE: The following is intended to present examples of various levels of accomplishment in the areas of teaching, research, clinical activity, scholarship and service. It is not exclusionary, but is intended to assist faculty, department chairs and promotion committees in matching candidates’ accomplishments to the promotion criteria. Moreover, areas frequently overlap in practice, although they are presented as distinct entities here. It should also be noted that the matrix specifies just two categories, meritorious and excellent. Professors will need to achieve excellence by a number of criteria. Associate professors will have met fewer of these criteria or in not as great depth. The promotion process, and this matrix, are meant to describe and reward continued professional growth and achievement. | |
| **TEACHING** | |
| **Meritorious** | **Excellent** |
| Active participation in teaching activities of the department, school, campus or university, including two or more of the following: presenting a series of lectures covering one or more topics; coordinating a course; acting as a primary instructor in a course; advising or mentoring students, residents or faculty; attending on an inpatient or outpatient service; organizing or facilitating a seminar series, journal clubs or laboratory exercises; participating as a teacher in continuing education activities. | Regularly assumes greater than average share of teaching duties –in classroom, laboratory, clinical or community settings. |
| Consistently receives outstanding teaching evaluations or teaching awards. |
| Recognition as an outstanding and influential role model for students, fellows, residents or other trainees. |
| Meritorious teaching evaluations from students and peers. | Record of successful mentorship of students, residents, fellows or other faculty, as measured by: letters of support from mentees; publications, presentations, grants, awards or other evidence of mentees’ academic success; evidence that mentees have pursued outstanding careers. |
| Development or redevelopment of teaching materials for students, continuing education courses or other faculty training. |
| Invitations to present Grand Rounds or seminars here and at other institutions; invitations to present courses outside of primary department. | Development of mentoring programs that focus on career development or academic promotion of students, residents, fellows or faculty. |
| Self-improvement activities (for example, participation in workshops or courses that are designed to improve teaching or mentoring effectiveness). | Development of innovative teaching methods, such as educational, websites, simulations, videotapes, packaged courses or workshops, etc. |
| Participation as a mentor on a training grant. | Successful leadership of local, regional or national continuing education courses. |

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| **TEACHING (continued)** | |
| **Meritorious** | **Excellent** |
|  | Consistent participation in national educational activities (for example, residency review committees, programs sponsored by professional organizations, re-certification courses or workshops). |
| Invitations to be a visiting professor at other institutions. |
| Development of innovative courses, high-quality syllabi, novel lectures, problem-based learning cases, laboratory exercises or other instructional materials. |
| Demonstration of educational leadership (for example, by serving as a course, fellowship or training program director or assistant dean). |
| Evidence of teaching scholarship (for example, research, grants, publications or national presentations that focus on understanding the best methods, or outcomes, of teaching). |
| Completion of advanced faculty development programs that result in a certificate or degree in education, with evidence that the faculty member has applied these new skills or knowledge to improve his or her teaching or pedagogy. |

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| **CLINICAL ACTIVITY** | |
| **Meritorious** | **Excellent** |
| Active and effective participation in clinical activities of the academic unit. | Regularly assumes greater than average share of clinical duties, as measured by patient care or procedure logs, RVUs, clinical billing statistics or other measures of clinical effort. |
| Board certification. |
| Demonstration of clinical skills that are highly effective (e.g., mastery of important clinical techniques, high degree of patient satisfaction, evidence of high quality and efficient patient care). | Continuing, significant participation for an extended period of time in clinical activities that are highly effective. |
| Support from peers at the site of practice. | Development of new techniques, therapies, clinical guidelines, patient care practices or health care delivery systems that have improved the health of patients or populations. |
| Invitations to speak on clinical topics on campus, or participation on institutional clinical care committees. |
| Active participation in activities that promote health care quality and patient safety. | Creative, active participation in the evaluation of the effectiveness of care (quality, outcomes, patient safety, utilization, access, cost). |
| Completion of self-improvement activities (for example, participation in workshops or continuing medical education activities that are designed to improve knowledge or clinical skills). | Recognition for excellence in clinical activity at the local, regional, national or international level through letters of reference, honors, awards, institutional evaluations, invitations to speak, requests to write reviews, etc. |
|  | Demonstration of effective leadership at the site of clinical practice – e.g., director of a clinical service, head of a division, chair of a department, head of an interdisciplinary team that creates and manages a clinical pathway and outcomes evaluation, medical staff president. |
| Assumption of a substantive leadership role at the regional level – e.g., chairing committees, or serving as officer of local or statewide professional organizations. |
| Assumption of a substantive leadership role at the national or international level - e.g., chairing national symposia and meetings, chairing committees or serving as officer of national professional organizations, journal editor. |
| Leadership of structured activities that promote quality of care and patient safety and that advance the science and practice of health care quality improvement. |

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| **CLINICAL ACTIVITY (continued)** | |
|  | **Excellent** |
| Participation in significant self-assessment activities and audits of one’s own practice that have led to improvements in quality, efficiency or outcomes of care. |
| Significant involvement in health care advocacy, community service or other activities that shape public policy on health care or that address health disparities. |
| Evidence of health care-related scholarship (for example, grants, publications, authoritative review articles, national presentations, innovations or other activities that advance the science and practice of health care quality improvement.) |

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| **RESEARCH** | |
| **Meritorious** | **Excellent** |
| Authorship of papers in peer-reviewed journals that demonstrate the ability to generate and test hypotheses and represent a significant contribution to the published literature. | A consistent level of peer-reviewed or other funding for research awarded in a competitive manner over a sustained period of time. |
| Co-investigator status on grants. | Demonstrated evidence of originality as an investigator. |
| A principal and sustained role in the management of a research program with external funding. | Demonstration of significant independent intellectual contributions to successful research programs. |
| Development of patents for discoveries. | Principal investigator status on competitive peer-reviewed research grants (for example: R03 or R21 awards or mentored K08 or K23 awards from NIH or private foundations for associate professors; R01, P01 or other independent awards for professors). |
| Presentations at national meetings; invited research seminars at this and other institutions; service as an ad hoc member on study sections. |
|  | Development of a significant number of patents. |
| An ongoing, peer-reviewed publication record with first- or senior-author publications. |
| A national or international reputation, as evidenced by: external letters of reference; invitations to present at national or international meetings; invitations to write reviews or chapters, or to provide unique expertise as a collaborator on a research project; visiting professorships; service on as a regular member on study sections; organization of national meetings; service as a national consultant or on editorial boards of journals. |

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| **SERVICE** | |
| **Meritorious** | **Excellent** |
| Service on committees or task forces within the program, division, department, school, campus or university. | Regularly assumes greater than average share of administrative responsibilities, including service to the School, University, professional discipline or community. |
| Service to local, state, national or international organizations through education, consultation or other roles. | Appointment to leadership positions within the institution, such as: chair of a committee; faculty officer; program director; course or curriculum director; academic clinical coordinator; or membership on major decision-making School of Medicine or Anschutz Medical Campus committees. |
|  | Service as an officer or committee chair in clinical, educational, scientific or nonprofit organizations. |
|  | Significant involvement in health care advocacy, community service or outreach, community-based participatory research programs, or other activities that shape public policy on health care or that address health disparities. |
|  | Leadership of activities or programs that address challenges in education, such as workforce diversity, training of scientists, assessment of competencies or learning outcomes, mentorship, professionalism or educational technology. |
| Service as an article reviewer for clinical, educational or scientific journals. | Service as a member of a scientific study section, or service as an editor or editorial board member of a professional or scientific journal. |
| Appointment to leadership positions dealing with scientific, health care or educational issues at the local, state, regional, national or international levels. |
| Service awards from the University or from a local, national, or international organization (civic, scientific or professional). |

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| **SCHOLARSHIP** | |
| This section of the Promotion Matrix presents examples of the scholarship of discovery, teaching, integration and application. The Matrix specifies only two categories (“meritorious” and “excellent”). The line between “meritorious” and “excellent” scholarship may not be easy to define; however, excellence in scholarship generally signifies a higher level of accomplishment and implies that the work meets one or more of the following tests: R*ecognition:* the work is recognized as excellent by peers; *Impact and importance:* it has contributed to an improved understanding of the discipline; *Coherence:* the publications, innovative curricula or other scholarly products represent a coherent body of work; and *Creative Leadership:* There is evidence of creativity and leadership by the faculty member.  There may be considerable overlap between scholarship and other areas of faculty accomplishment (teaching, clinical activity and service). However, as defined in the *Rules*, “the products of all scholarship must be in a format that can be evaluated, which would normally mean a written format, but could include web-based or electronic formats.” | |
| **SCHOLARSHIP OF DISCOVERY**  **The “scholarship of discovery” refers to traditional, hypothesis-driven research that results in the generation of new knowledge. Successful “discovery scholarship” usually results in peer-reviewed scientific publications.** | |
| **Meritorious** | **Excellent** |
| Serves as a collaborator in a basic science, clinical, translational or other research program. | Designs and directs a basic science, clinical, translational or other research program and plays a major role in writing up the results. |
| Authorship or co-authorship of papers in peer-reviewed journals that demonstrate the ability to generate and test hypotheses and represent a significant contribution to the published literature. | Has an ongoing record of first- or senior-author publications in peer-reviewed journals that: a) represent significant contributions to the published literature; b) demonstrate the ability to generate and test hypotheses; and c) demonstrate originality and independence as an investigator or represent significant independent intellectual contributions to successful research programs. |
| Co-investigator status on grants | A consistent level of peer-reviewed or other funding for research awarded in a competitive manner over a sustained period of time. |
| A principal and sustained role in the management of a research program with external funding. | Principal investigator status on competitive peer-reviewed research grants (for example: R03 or R21 awards or mentored K08 or K23 awards from NIH or private foundations for associate professors; R01, P01 or other independent awards for professors). |
|  | Development of a significant number of patents. |
| Service as an ad hoc reviewer or member of an editorial board for a medical or scientific journal. | Service as an editor or section editor for a medical or scientific journal (Include a written summary of the faculty member’s activities and contributions to the success of the journal). |
|  | Service as a regular member on scientific study sections. |
| Facilitates the research programs of the SOM through substantive contributions to COMIRB (or the COMIRB Scientific Advisory Committee-SARC), which must include: regular attendance at meetings over at least a three-year period; active and effective participation in discussions; review and presentations of protocols to the committee; and a demonstrated understanding of key topics (e.g. informed consent, risk assessment, protection of vulnerable populations, adverse event reporting or waivers of informed consent). Additional aspects of COMIRB service that may be considered evidence of meritorious scholarship may include: mentoring of new COMIRB members in the elements of proper review and presentation of protocols; active participation in COMIRB “education days;” training of SOM clinical investigators in techniques of protocol writing; and serving as a positive spokesperson for COMIRB service. A supporting letter from the Director of COMIRB is required. |  |
| **SCHOLARSHIP OF APPLICATION**  **The “scholarship of application” includes activities that build bridges between theory and practice or that apply knowledge to practical problems. Examples include development of new medical treatment modalities, clinical care pathways, or other activities that address community health care needs, that shape public policy on health care or that that promote quality of care and patient safety and advance the science and practice of health care quality improvement.** | |
| Active participation in activities that promote health care quality, cost-efficiency, access or patient safety within the institution (Provide documentation of interventions and outcomes) | Leadership of projects that have improved the quality of care, cost-efficiency, access, or patient safety locally, nationally or internationally (Provides documentation of interventions and outcomes). |
| Co-authorship of articles, policy reports or other publications related to clinical or health services topics. | A record of multiple publications related to clinical or health services topics, which may include clinical trials, investigative reports, case studies, policy reports or other publications that have advanced the science and practice of health care quality improvement. |
|  | Articles, white papers or other products of scholarship that focus on health care advocacy, community service or other activities that shape public policy on health care or that address health disparities. |
|  | Other evidence of clinical scholarship (for example, research, authoritative review articles, grants, contributions to clinical information systems, publications or national presentations) that promote health care quality or patient safety or that advance the science and practice of health care quality improvement. |
|  | Development of new techniques, therapies, clinical guidelines, patient care practices or health care delivery systems that have improved the health of patients or populations. |
| **SCHOLARSHIP OF INTEGRATION**  **The “scholarship of integration” (horizontal scholarship) includes creative synthesis or analyses that define “connections across disciplines” or bring new insights to bear on original research. The scholarship of integration seeks to interpret, analyze and draw together the results of the original research. Review articles and book chapters are examples of the scholarship of integration.** | |
| Co-authorship of articles integrating knowledge in a field and assessing overall value of discoveries in relationship patient care, teaching or other areas. | Consistent record of senior-author review or other scholarly products; these reviews or other integrative works represent a major body of scholarship that provides a demonstrable national or international reputation. |
| Publication of review articles, book chapters, case series or other reports that integrate knowledge and put new discoveries into perspective. |  |
| **SCHOLARSHIP OF TEACHING**  **The “scholarship of teaching” focuses on the development of new teaching methods, assessments of learning outcomes and preparation and dissemination of highly effective curricula or other instructional materials.** | |
| Improvement or expansion of an existing course or curriculum. | Development of innovative courses, high-quality syllabi, novel lectures, problem-based learning cases, laboratory exercises or other instructional materials. |
|  | Development of innovative teaching methods, such as educational websites, simulations, videotapes, packaged courses or workshops, etc. |
|  | A strong record of first- or senior-author publications in health professions education. |
|  | Other evidence of teaching scholarship (for example, research, grants or national presentations that focus on understanding the best methods, or outcomes, of teaching). |
| Facilitates the educational programs of the SOM through ongoing and substantive contributions to the Student Admissions Committee, Participation must include submission of end-of-year reports reflecting on knowledge and insights gained from admissions committee meetings and applicant interviews or discussion of applicant recruitment, measures of applicant readiness, premed advising, pipeline activities, class diversity or other relevant challenges and topics. A supporting letter from the Associate Dean for Admissions is required. |  |