

RULES OF THE SCHOOL OF MEDICINE

July 1, 2025



School of Medicine

UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS

RULES OF THE SCHOOL OF MEDICINE
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PREAMBLE

The *Rules of the School of Medicine* are designed to enable the faculty and administration to work together to achieve the goals of the School of Medicine. These Rules do not constitute a contract with the University of Colorado or the SOM, either expressed or implied. Nothing in these Rules should be read or construed to alter, amend, supersede or eliminate any provision or rule of the governing laws of the Regents of the University of Colorado. These Rules may be amended at any time, in accordance with SOM and University policies and procedures.

The powers and duties of the faculty are defined in relationship to the administration and the Board of Regents in the Laws of the Regents and in the University of Colorado Faculty Senate Constitution.¹ According to these documents, “It is a guiding principle of the shared governance recognized by the Board of Regents that the faculty and the administration shall collaborate in major decisions affecting the academic welfare of the university. The nature of that collaboration, shared as appropriate with students and staff, varies according to the nature of the decisions in question.” As required by [Regent Law](#), tenured and tenure-track faculty, with appropriate participation by instructional, research, and clinical faculty, have the principal responsibility for decisions concerning pedagogy, curriculum, research, scholarly and creative work, academic ethics, and recommendations on the selection and evaluation of faculty. The development of general academic policies shall be a collaborative effort between the faculty and administration. The administration takes the lead in matters of internal operations and external relations of the university. Additionally, “the faculty shall collaborate with the campus and system administrations in making recommendations or decisions on faculty personnel issues, administrative leadership and resource allocation.”

The Liaison Committee for Medical Education (LCME), the accrediting body for the MD program for the School of Medicine, also outlines several important principles governing curriculum development and oversight.² According to the LCME, “There must be a faculty committee that oversees the medical program as a whole and has responsibility for the overall design, management, integration, evaluation, and enhancement of a coherent and coordinated medical curriculum.” Further, the faculty must “define the competencies to be achieved by its medical students through medical education program objectives and ensure that the medical curriculum provides content of sufficient breadth and depth to prepare medical students for entry into any residency program and for the subsequent contemporary practice of medicine. The faculty of a medical school, through the faculty committee responsible for the medical curriculum, ensures that it uses formally adopted program objectives to guide the selection of curriculum content, and to review and revise the curriculum.”

The Executive Faculty of the SOM has the responsibility and authority to develop the faculty governance structure within the SOM. Accordingly, the SOM Executive Faculty established the *Rules of the School of Medicine*, which specifically creates the Faculty Senate and outlines the roles, policies and operating procedures for this faculty governance body.

SCHOOL OF MEDICINE MISSION STATEMENT

The mission of the University of Colorado School of Medicine is to provide Colorado, the nation and the world with programs of excellence in:

¹ The principles of shared governance are outlined in the Laws of the Regents ([Article 5](#)). The principles of shared governance are also outlined in Articles I, III and IV of the University of Colorado [Faculty Senate Constitution](#).

² <https://lcme.org/publications/>. Liaison Committee on Medical education. Functions and Structure of a Medical School. Standards for Accreditation of Medical education Programs leading to the MD Degree. Standards and Elements Effective July 1, 2024. Published March 2023.

Education – through the design, implementation and evaluation of educational programs for medical students, allied health students, graduate students, residents and fellows, practicing health professionals and the public at large;

Research – through the development of new knowledge in the basic and clinical sciences, as well as in public and community health, health policy and health sciences education;

Clinical care – through state-of-the-art clinical programs which reflect the unique educational and scholarly environment of the University, as well as the needs of the patients and communities it serves; and

Community collaborations – by forming partnerships with the broader community, learning from the experiences of community members and sharing the School's expertise and knowledge, in order to promote healthier and more resilient communities, address the social, environmental and economic drivers of health, and advocate for health.

CULTIVATING EXCELLENCE THROUGH INCLUSION AND RESPECT

The SOM values people from a wide range of backgrounds and experiences, all of which contribute to and enhance the scholarly, clinical care, and learning environments. Working with community partners, the SOM will strive to promote excellence and quality in healthcare, improve health outcomes, and reduce preventable gaps in care access and delivery within the communities we serve. Therefore, the SOM will seek to recruit and support qualified students, residents, fellows, faculty, staff, and administrators who bring a variety of perspectives and experiences. The SOM will also develop and implement programs designed to promote the academic advancement and success of all students, residents and faculty through mentorship, sponsorship and professional development initiatives; foster healthy communities by encouraging respect for different perspectives and experiences; ensure accountability in maintaining an environment of professionalism and civility; and support scholarly work focused on improving health outcomes. The SOM's programs will also include efforts to address economic and environmental factors that impact health.

The SOM will work with school, campus, and community partners to achieve the goals outlined above. In addition, the SOM will work to promote a school and campus culture that values inclusiveness, respect, justice, and open communication.

PROFESSIONALISM MISSION STATEMENT

A climate of respect, civility and cooperation among students, residents, fellows, faculty, administrators, and staff is essential to achieving excellence in research, education, clinical care, and university and community service. Therefore, the SOM places a high priority on professionalism. Under the umbrella of professionalism lies an extended set of responsibilities including civil and courteous behavior and respect for all members of the SOM community, including students, residents, fellows, supporting staff and colleagues. Professionalism also includes open and honest communication, respectful dissent, support for the School's missions, and active and timely participation in education, mentoring and service activities.

In all interactions with patients and their families, faculty members are expected to demonstrate the core attitudes and behaviors that reflect the traditions of the profession of medicine and society's trust. These include compassion, respect for patients' privacy and dignity, altruism in patient care and in the pursuit and application of knowledge, empathy, accountability, punctuality, sensitivity and responsiveness to patients' backgrounds and individual characteristics, and responsiveness to society's needs. In all educational, research and clinical care settings, faculty members will welcome and respect all individuals and their diverse experiences, in accordance with institutional values and applicable laws. Faculty members are also expected to exhibit the characteristics of good academic and institutional citizenship by contributing to the

teaching, service and administrative activities of their department and the School. Faculty members are expected to maintain a high level of scientific or clinical competence, as judged by their peers, and to demonstrate a dedication to life-long learning. Faculty members are expected to critically analyze, and avoid, activities that suggest a conflict of interest with their role as a clinician, scientist, or educator. Faculty members must also adhere to the highest standards of academic honesty and integrity. For example, truthfulness, completeness, and accuracy are essential elements in medical and scientific writings, in representations of effort, and in medical record documentation.

Although these qualities and behaviors may be more difficult to evaluate than research, scholarship, teaching and other traditional measures of academic performance, they are critical to the missions of the School of Medicine and will be considered during annual performance, promotion, tenure and post-tenure reviews.

ARTICLE I. ORGANIZATION

A. Departments, Divisions and Centers

1. Departments and Divisions

- A. A list of the departments, divisions and centers of the School of Medicine shall be maintained by the Office for Faculty Affairs and shall be made available to all faculty, administrators, students and staff.
- B. Formation, renaming or dissolution of Centers, Divisions and Departments and transfer of Divisions and Centers:

When an administrative unit of the SOM requests official recognition as a center, division or department, a committee to consider the request shall be formed in the following manner: the Dean and Faculty Officers shall appoint a committee of seven members (Professors and Associate Professors) with five members from basic science or clinical science departments (one per department) if creation of a basic science or a clinical science unit, respectively, is being considered. The recommendation of this committee, accompanied by recommendations from the Dean, shall be brought to the Executive Committee and then the Faculty Senate for action. Approval by both bodies is required before forwarding the proposals to the Chancellor, President or Board of Regents, as required by University policies

The following will be considered by the involved bodies in their deliberations:

- a. The department or division will usually have a separate residency or fellowship training program (recognized nationally) if a clinical department or an established graduate degree program (recognized nationally) if a basic science department.
- b. A national precedent for center, division or departmental status for the involved scientific or clinical area will have been established or a need for a new area can be clearly justified.
- c. The establishment of the new center, department or division can be shown to benefit the involved department(s) and the SOM.

2. Formation or Dissolution of Centers, Divisions and Departments and Transfer of Division

Formation or dissolution of a center, department or division, or transfer of a division or center may be initiated by the Dean, the involved unit, or a petition signed by at least ten members of the Executive Faculty. Subsequent procedures will be followed as noted for the formation of a new center, division, or department.

Petitions to rename an existing department, division or center shall be reviewed following the procedures described in this section.

3. Department Organization

A. Department Chair

Each department shall have a chair who serves as the administrative and academic leader of the department and represents the department at Executive Committee meetings. The responsibilities of the chair are described in [Campus Administrative Policy 1020](#). The chair is “responsible for providing leadership toward the achievement of the highest possible level of excellence in the clinical, teaching, scholarly, and service and leadership activities of the department.” The chair is expected to serve as a role model for professionalism and to create a climate of respect, civility, mutual accountability, collaboration, and compassion within the department. The chair is

expected to articulate the goals of the department, both within and outside the department, to articulate the department's actions or requests in pursuit of these aims, and to maintain a climate that is collegial, that respects individuals, that promotes and celebrates differences, that treats faculty, staff and learners fairly and that supports creativity and innovation.

The chair has the explicit responsibility to communicate effectively with faculty, and to review faculty performance regularly in all applicable areas, including teaching, scholarship, clinical practice, service and professionalism. Chairs must also ensure that faculty members are aware of the criteria prescribed for appointment, reappointment, promotion, tenure and post-tenure review and to make appraisals and recommendations in accordance with the procedures and principles stated in department, SOM, and campus policies and in accordance with the procedures and principles stated in [Administrative Policy Statement 1022](#) and [Campus Administrative Policy 1049A](#).

For all full-time (≥ 0.5 FTE) faculty members, including those employed by affiliated institutions, department chairs must ensure that: adequate mentoring and career development programs are in place for all faculty at ranks other than Professor; faculty performance reviews are conducted regularly in accordance with the procedures and principles stated in the [Laws of the Regents](#) and [Administrative Policy Statement 5008](#); faculty members are made aware of career development resources available through the [Offices for the Faculty Experience](#), and the [Colorado Clinical and Translational Sciences Institute](#) (CCTSI); all assistant professors undergo a comprehensive early career review during their third or fourth year in rank, in accordance with University policies; and that all associate professors receive ongoing mentoring and comprehensive performance reviews and develop a plan for promotion to full professor or continued academic success. Each department is expected to support the career development and recognition of faculty at all academic ranks and in all tracks.

The chair is “expected to seek the advice of departmental faculty colleagues in a systematic way, to provide for the conduct of departmental affairs in an orderly manner through department meetings and the appointment of appropriate committees, and to keep department members informed of [their] actions in a timely manner.” Further, “the chair should be receptive to questions, complaints, grievances and suggestions from members of the department, both academic personnel and staff, and from students [and other trainees].” Refer to [Campus Administrative Policy 1020](#) for further details.

B. Meetings and Reports

Each department and division shall have regularly scheduled faculty meetings. Department chairs shall ensure that faculty at the affiliated institutions can participate in these departmental meetings and on other important committees and task forces that address the educational, clinical, service, and research programs of the department. At least annually, each department chair shall submit a report to the Dean and the department faculty, summarizing the department's activities, accomplishments and challenges.

C. Departmental Reviews

Each department may undergo periodic review of its activities according to a schedule established by the Dean. The departmental review may include a comprehensive or focused self-study and an external review conducted by one or more nationally recognized academicians in the discipline. The review shall be conducted in accordance with existing SOM and campus program review policies and procedures. The Dean shall solicit input from departmental faculty during departmental reviews.

D. Departmental Evaluation Committee

Each department shall form an evaluation committee composed of Associate and full Professors in the department, which shall meet regularly to review and make recommendations to the chair regarding promotion and awards of tenure for faculty in that department. Guidelines are outlined in Article II.H.1.

B. Faculty

1. General Faculty of the School of Medicine

The general faculty of the SOM shall consist of the Dean, the Senior Associate, Associate and Assistant Deans, and all Professors, Associate Professors, Assistant Professors, Senior Instructors, Instructors, Senior Research Scientists, and Research Scientists, whether in the Tenured and Tenure-Eligible, Clinical Practice, or Research Professor Tracks, or who have appointments as Adjoint Faculty (see Appendix 2). The President of the University and the Chancellor of the Anschutz Medical Campus shall be ex officio, non-voting members of the general faculty of the SOM.

2. Executive Faculty of the School of Medicine

The Executive Faculty shall consist of the Chancellor of the Anschutz Medical Campus (as an ex officio, non-voting member), the Dean, the Senior Associate, Associate and Assistant Deans, and all members of the General Faculty whose appointments are fifty percent or more and who hold titles in the Tenured and Tenure-Eligible, Research Professor, or Clinical Practice tracks.

Each member of the faculty who is appointed by the SOM shall have a signed letter of offer which specifies the type and terms of their appointment, and which includes appropriate details about the salary, benefits (if any), privileges and responsibilities associated with the position. SOM faculty, except those employed by Denver Health and Hospital Authority (DHHA) or National Jewish Health (NJH), must also sign a University of Colorado Medicine (CU Medicine) Member Practice Agreement, which provides that “all income for professional, clinical, consulting, advisory or similar services earned ... while serving as an academic or clinical faculty member in a University-sponsored program,” shall be assigned to CU Medicine, with certain exceptions defined in the CU Medicine contract or by the SOM. SOM faculty members are expected to follow the rules and policies of the University, School, and CU Medicine, as well as the rules and policies of the hospitals where they provide patient care or other services, including policies pertaining to speakers’ bureaus, consulting, and disclosing and managing conflicts of interest. Faculty members earning income from pharmaceutical or other industry payers must understand their obligations under the federal Sunshine Act, which includes review and verification of payments paid to them. The University and CU Medicine reserve the right to review Sunshine Act data and to audit faculty members’ compliance with CU Medicine assignment-of-income policies.

3. Faculty Senate

The Faculty Senate is responsible for the educational, clinical, scholarly and certain designated administrative decisions in the SOM, with the exception of faculty personnel actions, student promotions and honors, and student and faculty disciplinary actions. The Faculty Senate will vote and make recommendations to the Dean or Executive Committee with respect to those designated areas of responsibility specified above.

The members of the Faculty Senate shall be elected from members of the Executive Faculty. Senators shall serve for a term of two years. Each department of the School shall elect one member for every forty faculty members holding the rank of Instructor, Research Scientist or above with a primary appointment in that department, regardless of affiliated

institution or academic track. Each department shall be entitled to elect at least one member to the Faculty Senate, and at least one quarter of the Senate shall be composed of representatives from the basic science departments. Representation will be capped at a maximum of seven senators per department. All members of the Executive Faculty at all affiliated institutions are eligible for election. Members are eligible for re-election. Department chairs, division and section heads and Senior Associate, Associate and Assistant Deans are not eligible for election. However, the Associate Dean of Health Opportunities and Professional Experiences shall serve as a voting member of the Faculty Senate. Additionally, one member of the faculty based at each of the approved medical school branch campuses shall serve as a voting member of the Faculty Senate. The Senior Associate Deans of the SOM are invited to attend all meetings of the Faculty Senate as non-voting members.

One student from each medical class, the President of the Medical Student Council, one graduate student, one student each from the Physical Therapy and Physician Assistant programs, and one representative of the Housestaff Association may attend the Faculty Senate and Executive Faculty meetings as non-voting members.

In May of each even-numbered year, the Office for Faculty Affairs will notify each department chair of the new census and reapportionment for the department. Prior to July 31 of that year, each department will hold its election for members of the Senate, and the results of the election will be transmitted to the Office for Faculty Affairs. Each department shall determine its own election procedures, ensuring that all members of the Executive Faculty are able to participate fully in this election. The Office for Faculty Affairs will maintain a list of each department's census and Senate representation.

4. Faculty Officers

The Faculty Officers of the SOM shall consist of the Faculty Senate leadership (President, President-Elect, Past-President and Secretary, each elected by the Executive Faculty). The President shall serve a one-year term and shall be succeeded by the President-Elect. The position of President shall alternate between a member of the faculty from the basic science departments and a member of the faculty from the clinical departments. After serving a one-year term the President shall serve one year as Past-President. The President shall not be eligible for re-election until two years after the end of their term as Past-President.

The Secretary shall be responsible for recording the minutes of Faculty Senate meetings. The Secretary shall serve a one-year term. The Secretary shall not be eligible for re-election to the same position until two years have passed following their retirement from this position.

Each year and prior to May 1st, the Office for Faculty Affairs shall solicit written or electronic nominations from the Executive Faculty for the positions of President-Elect and Secretary. Candidates must be nominated by two or more Executive Faculty members and must agree to serve in that position for the designated time to be placed on a written or electronic ballot. All candidates shall provide a brief "Statement of Vision" which will be provided to the Executive Faculty along with the ballot.

When there are three or more candidates for an office, "approval voting" shall be employed. Under this mechanism, votes are not restricted to voting for just one candidate. Instead, each voter can vote for, or "approve of," as many candidates as the voter wishes. The single candidate with the most total "approval votes" wins the election. Elections will be completed by the end of June and the terms shall run from July 1 to June 30. The Office for Faculty Affairs shall supervise the election.

Annually, the Faculty Officers are responsible for providing a list of 3 candidates from the Faculty Senate to fill the faculty at-large position on the CU Medicine Board of Directors. Officers shall review the annual reports of standing committees specified below

and refer any issues cited by the committee chairs for discussion within the Senate. The officers shall meet monthly with the Dean of the SOM or their designee to discuss outstanding faculty issues and to set agendas for Senate meetings.

All members of the Executive Faculty holding the rank of Assistant Professor or higher shall be eligible for these offices except for members of the administration of the SOM or the Anschutz Medical Campus, department chairs, and section and division heads.

The Faculty Officers (President, President-Elect, Past-President and Secretary) shall serve as voting members of the Faculty Senate. The Faculty Officers shall also serve as voting members of the Executive Committee, except that the Faculty Officers shall not vote on personnel issues discussed in Executive Session. The Faculty Officers shall: prepare the agenda of the Faculty Senate meetings in consultation with the Dean or the Dean's designee; recommend to the Dean the appointment of, or the election of, ad hoc or other committees as needed; and be empowered to bring to the Executive Faculty all matters they deem important. The President of the SOM Faculty shall preside at the Executive Faculty and Faculty Senate meetings. If the President is unable to preside at meetings or meet other responsibilities, the President-Elect, Past-President or Secretary shall substitute. Any Faculty Officer may be removed by a majority vote of the Senate.

In case of the temporary absence or illness of the President, their duties shall be carried out by the President-Elect. The President-Elect shall become President on July 1, or upon retirement or permanent inability of the President to serve (the latter to be determined by a majority vote of a quorum of the Faculty Senate). In the latter instance, the President-Elect shall complete the remaining term of the President and then shall serve their own full term.

The President will be a standing member of the campus-wide Faculty Assembly. Other SOM representatives will be elected by the Faculty Senate from within the members of the Executive Faculty, whether or not they are Senators.

5. Meetings and Ballots

The Faculty Senate shall normally meet once a month, except during July and August. The exact time of each of these regular meetings shall be determined by the Faculty Officers and a notice of the meeting and its agenda, proposed motions, and related material shall be distributed in a timely manner to each member of the Senate. The schedule of meetings for the year shall be distributed a year in advance. The agenda for each meeting shall be distributed in a manner to inform all faculty of the meeting. Faculty Senate meetings will be open to all members of the Executive Faculty. However, the Senate may go into executive session if sensitive personnel issues are to be discussed.

The Executive Faculty shall meet at least once each year at a time designated by the Dean. The annual meeting shall include the Dean's State of the School Address. Additional meetings of the Executive Faculty may be called by the Dean or the President of the SOM Faculty.

Special meetings of the Senate or Executive Faculty may be called by the Dean, the President of the SOM Faculty, or by a request in writing from ten members of that body.

In case of a procedural question, the latest edition of Robert's Rules, or its equivalent, shall be followed during all meetings of the Faculty Senate and the Executive Faculty. The Secretary will be the custodian of Robert's Rules of Order.

A quorum for meetings of the Faculty Senate shall consist of those who are present at the time and place of a meeting announced at least one week in advance. Minutes of each meeting of the Faculty Senate and of the Executive Faculty, edited only to delete personnel and other matters inappropriate for publication, shall be posted and made available to the Executive Faculty. Repeated absences of a Senator from scheduled meetings shall be cause for replacement of that Senator. The Faculty Officers shall be empowered to recall a

Senator who has had repeated absences and to oversee the election of a new Senator from that department.

Only elected Senators who are present at a meeting may vote on matters that are before the Senate. Proxy voting is not allowed. However, votes by the Faculty Senate may also be conducted by mail or electronic ballot, if so authorized by a majority of those present at a Senate meeting at which the issue is discussed. The ballot will be distributed to all members of the Senate with a summary of the discussion of the question.

In the case of a proposed change to the Rules of the School of Medicine, a mail or electronic ballot will be distributed to the Executive Faculty with an account of the discussion of the question. A reply from 250 or more members of the Executive Faculty shall be considered a quorum, and the affirmative vote of two-thirds of those voting is needed to change the Rules of the School of Medicine. Also refer to Article VII.

C. Executive and Administrative Officers

The Chancellor of the Anschutz Medical Campus shall be an ex-officio, non-voting member of the General Faculty, the Executive Faculty, and the Faculty Senate.

The Dean shall be the academic and administrative head of the SOM and shall represent the School on the Chancellor's Executive Committee. The Dean shall be responsible for the enforcement of admissions policies and the general effectiveness of the School.

The Dean shall enforce rules and regulations and shall have the power to act in minor cases of discipline and to refer major cases to the Executive Committee. The Dean shall confer with the chairs of departments and, when appropriate, with department faculty members about departmental needs and salaries and shall allocate space in the best interests of the School. The Dean shall make regular reports to the Chancellor, the Executive Committee and the Faculty Senate. The Dean shall be an ex-officio, non-voting member of all standing committees. In consultation with the Faculty Officers, the Dean shall appoint all committees designated in the Rules unless the method of appointment or selection has been otherwise specified in these Rules, or in the case of special committees authorized by action of the Faculty Senate.

The Chancellor of the Anschutz Medical Campus will review the academic and administrative performance of the Dean on a regular basis.

The Senior Associate, Associate and Assistant Deans shall be appointed by the Dean to assist the Dean in the performance of their duties. In the absence or disability of the Dean, the Senior Associate Dean for Clinical Affairs, or in their absence, another Senior Associate Dean or Associate Dean of the School of Medicine designated by the Chancellor, shall serve as acting administrative head of the School.

D. Executive Committee

The Executive Committee shall consist of the Chancellor of the Anschutz Medical Campus and the Dean of the School of Medicine (both as ex-officio, non-voting members), the Faculty Officers (President, President-Elect, Past-President and Secretary of the SOM Faculty) and the chairs of all departments. The Faculty Officers shall serve as voting members of the Executive Committee, except that they shall not vote on personnel issues discussed in Executive Session. The Dean may appoint additional center or program directors to serve as non-voting members of the Executive Committee. The Associate Deans for the Colorado Springs and Fort Collins Branch Campuses, the Associate Dean of Health Opportunities and Professional Experiences, the chief executive officers of the Denver Health and Hospital Authority, the Denver Veterans Administration Medical Center, Children's Hospital Colorado, the University of Colorado Hospital, and National Jewish Health, or their designees, shall also serve as non-voting members. The Senior Associate Deans of the School of Medicine are invited to attend all meetings of the Executive Committee as non-voting members.

The Dean shall serve as the Chair of the Executive Committee. The Committee shall meet regularly during the academic year. Minutes of each meeting, edited to delete only matters decided in executive session and other matters inappropriate for publication, shall be posted on a web site available to the Executive Faculty. Special meetings may be called at any time by the Dean, or by written request of five voting members. Such special meetings may have either the Dean or the Acting Dean as the presiding officer. All regular meetings shall be called by the Dean, or in the case of their absence or disability, by the Acting Dean.

The Executive Committee shall act as an advisory committee to the Dean. In the fulfillment of its duties, the Executive Committee shall consider and make recommendations to the Dean and the Faculty Senate on such matters as the relationship of the SOM to other institutions and groups, the obligations, privileges and status of the faculty, the nature of the curriculum and the education of students, the size of the student body and the physical facilities of the School, the advisability of changes in the governance and established procedures of the SOM, and all other matters that relate to, or impinge on, the educational, clinical, scholarly, research and administrative activities of the faculty and School. The Executive Committee shall have access to all reports of standing and ad hoc committees that may be pertinent to its deliberations and decisions, and to the activities and policies of the School. The President of the SOM Faculty shall make a report to the Executive Committee at each meeting.

A quorum for meetings of the Executive Committee shall consist of those who are present at the time and place of a meeting announced at least one week in advance. Only members who are present at a meeting may vote on matters that are before the Executive Committee. Proxy voting is not allowed.

Except as set forth below, no action of the Executive Committee is considered to be final, for this authority resides with either the Dean or the Faculty Senate as defined in these Rules. In matters over which the Faculty Senate has authority, but which require immediate decision, the Executive Committee may act in accordance with what it believes to be the spirit of the Faculty Senate. However, such actions shall be referred to the Faculty Senate at the first regular meeting after the date on which they have passed, or at a special meeting. A special meeting will be called if there is not a regular meeting scheduled.

If there is disagreement on major issues between the Executive Committee and Faculty Senate regarding an action or recommendation, it may be re-considered jointly by both bodies, with the final decision made by the Dean.

In addition to decisions and actions that must be referred to the Faculty Senate for final action, the Executive Committee, upon recommendation by the Senior Associate Dean for Education, representing the faculty and the SOM's established criteria for graduation, shall also approve the list of candidates to be presented to the Regents for degrees. The Executive Committee shall also have the authority to review and recommend to the Dean and Chancellor the title of Emeriti to selected retiring members of the faculty. Only the department chairs may vote on these personnel matters, which shall be considered in executive session.

Motions voted on by the Executive Committee shall be affirmed by a simple majority of the votes.

E. Standing Committees

- Committee on Admissions
- Curriculum Steering Committee
- Committee for Continuous Quality Improvement of the MD Program
- Student Promotions Committee
- Student Research Committee
- Graduate Medical Education Committee
- Continuing Medical Education Advisory Committee
- Faculty Promotions Committee (FPC)

1. Committee Meetings

Regular committee and subcommittee meetings shall be open to members of the Executive Faculty, who may attend as non-voting observers, unless otherwise specified in the committee or subcommittee bylaws. However, by majority vote of the members in attendance, the committees and subcommittees may go into executive session.

2. Committee Reports

All committees shall make an annual written report of their activities and those of their subcommittees within three months of the end of the academic year to the Dean and the Faculty Senate, except as otherwise specified below. In addition, the Chair of each committee may be requested to make a brief oral summary to the Faculty Senate if issues are identified. More frequent reports to the Faculty Senate and Executive Committee shall be made in instances where important decisions need to be made.

Unless otherwise specified, the Chair of a subcommittee will be an ex-officio, non-voting member of the parent committee.

3. Committee Membership

Procedures for electing or appointing members of standing committees vary and are specified in Article III. All committees may appoint ex-officio, non-voting members, and additional ad hoc subcommittees as needed.

Except as otherwise provided for in the Rules, committees will be formed to achieve broad input from members of departments most relevant to the function of the committee.

ARTICLE II. FACULTY APPOINTMENTS, PROMOTION AND TENURE

A. Department Chairs

1. Searches for department chairs shall be conducted in accordance with [Campus Administrative Policy 1020](#).
2. After consulting with faculty in the department and the Faculty Officers, the Dean shall appoint a committee to conduct a search for a new department chair. The search committee shall consist of at least six members and shall include persons from the basic science departments, the clinical departments and the adjoint faculty (if appropriate). The Dean shall determine whether the search committee will include departmental representation. Where appropriate, and in a manner consistent with approved agreements between the SOM and affiliated hospitals, the search committee shall also include representation from affiliated hospitals.
3. The chair of the committee shall be designated by the Dean.
4. The Associate Dean of Health Opportunities and Professional Experiences, or their designee, shall be an ex officio member of all chair search committees.
5. At appropriate times during the search process, the Dean, or dean's designee, will discuss the progress of the search with the faculty in the department concerned.
6. Neither the Chancellor nor the Dean, Senior Associate, Associate or Assistant Deans shall be members of the committee, but a representative from those offices may be requested by the committee to act with it on an ex-officio, non-voting basis.
7. The committee shall have the privilege of consultation with the outgoing department chair, but the outgoing chair shall not be a member of the committee.
8. The committee will recommend suitable candidates to the Dean, who will then make the final selection.

B. Division Heads

1. Division heads are responsible to the department chairs.
2. An ad hoc committee to recommend the appointment of a division head shall be appointed by the Department Chair, after consultation with the Dean. The Associate Dean of Health Opportunities and Professional Experiences, or their designee, shall be an ad hoc member of all division head search committees. The outgoing head of the division shall not be a member of the committee. The ad hoc committee shall forward its recommendations to the Department Chair. After receiving the committee's recommendations, the Department Chair shall appoint the Division Head, subject to approval by the Dean.
3. In instances where there is an inter-departmental division, the ad hoc committee to recommend the appointment of a Division Head shall be appointed by the Dean, after consultation with the involved department chairs. The ad hoc committee shall forward its recommendations to the Dean, who will appoint the Division Head.

C. Administrative Positions

Administrative positions, including deans, departmental chairs, center directors and division and section heads, in accordance with University policy, are at-will appointments, serving at the pleasure of their immediate supervisors.

D. Types of Faculty Appointments

Consistent with the University of Colorado [Administrative Policy Statement 5060](#), the SOM recognizes four types of faculty appointments: Tenured, Indeterminate, Limited, and At-will.

1. **Tenured appointments** (designated as “continuous appointments” in Administrative Policy Statements [5060](#) and [5002](#)) continue until termination by resignation, retirement or otherwise pursuant to applicable Regent laws and policies.
2. **Indeterminate appointments** are made for an indefinite period of time; continuance is dependent upon inclusion in the approved budget and available funding. Notice must be provided to faculty members holding indeterminate appointments if their appointment will end for reasons other than available funding or inclusion in the budget.
3. **Limited (or Term) appointments** are for specified periods of time (from less than one year to four years). In the SOM, Instructors, Senior Instructors and Assistant Professors will usually receive one-year, renewable limited appointments. Associate and full Professors who are not tenured will usually receive renewable limited appointments of 1, 2, or 3 years.
4. **At-will appointments** are made for an indefinite period of time; their continuance is at-will. Faculty members holding limited or indeterminate appointments may not be reassigned to at-will appointments unless proper notice is provided, in accordance with SOM and University policies.

The Dean's Office, in collaboration with the Faculty Senate and Executive Committee, will develop specific guidelines for the use of limited, indeterminate and at-will appointments, consistent with the requirements of [Administrative Policy Statement 5060](#).

A member of the faculty whose salary is paid by an affiliated institution may receive an indeterminate or at-will appointment, but this will usually not involve any continuing financial obligation on the part of the University. Such a position is not usually tenured.

E. Full-time versus Adjoint Faculty Appointments

In the SOM, faculty members may hold either a full-time or an adjoint appointment.

1. Full-time faculty members hold appointments at 0.5 FTE or greater and do not have any independent or other health care practice. Faculty employed at affiliated hospitals also hold full-time faculty appointments, although their appointments may be subject to different policies, including those pertaining to compensation, benefits and eligibility for tenure or sabbatical assignment. Full-time faculty members include those appointed and promoted in the Tenured and Tenure-Eligible, Clinical Practice and Research Professor tracks.
2. Adjoint faculty include healthcare practitioners or other professionals who perform volunteer teaching, research, or clinical services, and those whose paid appointments are less than 0.5 FTE³.

F. Special Characteristics of the School of Medicine Relevant to Promotion and Tenure

1. Experience has repeatedly demonstrated that teaching clinical skills is often more effective if the teacher also has ongoing involvement in patient care, so that their teaching is up to date and relevant to actual practice. In addition, clinical research may be more impactful if it is related to clinical practice and the experiences of patients seeking care. Finally, the funding of the academic programs of the SOM is heavily dependent upon its clinical activities. For all of these reasons, excellence in clinical work for practicing physicians, advanced practice providers and other clinicians is highly valued by the School. Therefore, clinical contributions should be evaluated as part of the overall review of a clinician for promotion and tenure.

³ The title adjoint is also applied to employees of other universities, national research institutes, or other agencies or institutions who offer courses or supervise academic programs with or without compensation from the University of Colorado.

2. The SOM differs from other schools of the university in that clinical departments utilize geographically disparate sites, including hospitals and medical centers with which the SOM has developed, or plans to develop, formal affiliations. Rigorous review is required to maintain the same high standards for faculty at affiliated institutions that apply to faculty located on the medical school campus to ensure uniform excellence of teaching to all students, residents, and fellows at all locations. University tenure is not awarded to faculty members employed at affiliated institutions. Nevertheless, the same standards are applied both to these faculty and to other SOM faculty by rigorous review for promotion to Associate Professor and Professor in all tracks.

3. **Definitions**

- a. **Clinical Activity:** In addition to direct patient care, “clinical work” includes development of practice guidelines and other structured projects that assess and improve the quality of clinical care, enhance the patient experience, promote patient safety, and identify opportunities for greater value and efficiency in health care. Clinical work also includes activities that advance health outcomes, empower patients, shape public health policy, strengthen access to resources for all communities, or address community health and healthcare needs. The SOM values scholarly projects that advance the science and practice of health care quality, efficiency, and patient safety. Importantly, excellence in clinical activity also includes serving as a model of professional conduct for students and residents, colleagues and healthcare team members; in turn, excellence includes behaviors that promote the safety and dignity of all healthcare team members and the patients they serve.
- b. **Teaching:** Teaching is also broadly defined. Teaching includes not only didactic instruction but also mentorship, professional role modeling and supervision of learners in classroom, clinical, research, and community settings. Teaching includes course leadership and administration, development of innovative instructional or evaluation methods, and educational scholarship and research. The SOM recognizes teaching of undergraduate students, graduate students, residents, fellows, and health care providers in all the health professions. Importantly, excellence in teaching also includes being a model of professional conduct for students, residents and other trainees.
- c. **Research or Other Scholarly Activity:** Basic, clinical, translational, educational and other forms of research and scholarly activity are highly valued by the SOM. As outlined in the Promotion Criteria (Appendix 1A), “excellence” may be demonstrated through peer-reviewed scientific publications, competitive grant funding, a national or international reputation, and evidence of originality, creativity and influence as an investigator. The SOM recognizes the importance of inter-disciplinary and team science and the need for collaboration among investigators. Therefore, as recommended by the National Academy of Science, the SOM defines an “independent investigator” as one who demonstrates “independence of thought” - that is, one who has defined a research question of interest, who has chosen or developed the best strategies and approaches to address that question and who has contributed distinct intellectual expertise to successful research programs. Importantly, excellence in research also includes serving as a model of professional conduct for students and fellows, colleagues, and research team members.

The School will recognize the following four types of scholarship as adapted and modified from concepts developed by Ernest Boyer and others⁴:

- i. 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 promote quality of care and patient safety and advance the science and practice of health care quality improvement.
 - ii. 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.
 - iii. The “scholarship of integration” (horizontal scholarship) includes creative syntheses 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 original research or creative work. Review articles, books and book chapters are examples of the scholarship of integration. Publications in the medical and healthcare humanities, including musical and artistic works, may also be considered examples of the scholarship of integration.
 - iv. 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.
- d. **Leadership and Service:** Leadership and service are core missions of the University and the School. Service is broadly defined as using the faculty member’s relevant expertise, in collaboration with others, to support the University community, the faculty member’s academic profession, and our broader society. All faculty members are expected to contribute to the service missions of the School. The SOM especially values service activities where the faculty member has demonstrated leadership and impact. Service is distinguished from, but supports, the teaching, clinical and scholarly missions of the School. Service includes a wide range of activities, including committee work, service on study sections and editorial boards, leadership of conferences and activities that inform public policy, and efforts that advance inclusive excellence, support underserved populations, and promote access in academic medicine. Service also includes engaging communities and forming academic-community partnerships that promote healthy and resilient communities through programs in clinical care, education, research, and advocacy.

G. Faculty Ranks and Tenure

The Promotion Criteria (Appendix 1) will be used to guide faculty members, department chairs, and departmental evaluation committees in assessing how candidates for promotion or

⁴ Boyer, Ernest, “Scholarship Reconsidered: Priorities of The Professorate,” Carnegie Foundation for the Advancement Of Teaching, Princeton University Press, 1990; Glassick D, Huber MR, Maeroff GI. Scholarship assessed: Evaluation of the Professoriate.1997; San Fransico, CA: Jossey-Bass; Simpson D, Yaris LM, Carek PJ. Defining the scholarly and scholarship common program requirements. J Grad Med Ed. 2013;5: 539-540.

tenure meet those criteria. “Meritorious” is broadly defined as performance that is praiseworthy or deserving of merit, while “Excellent” is defined as performance that is outstanding or of exceptional merit.

Faculty members may be promoted in either the Tenured and Tenure-Eligible, Clinical Practice or Research Professor tracks. These promotion tracks were developed to recognize the diverse activities, responsibilities and areas of accomplishment of the faculty of the SOM and are consistent with the roles and responsibilities defined in [Administrative Policy Statement 5060](#); these multiple promotion pathways should be recognized as parallel and equal in importance, without an implied hierarchy. In all tracks, the promotion process is meant to describe and reward continued professional growth and achievement.

1. Tenured and Tenure-Eligible Track

a. Criteria

i. Instructor

Instructors should have at least a Master’s degree or equivalent qualifications and should otherwise be well qualified to participate in teaching, research or other scholarly activity, or clinical activities in the SOM and its programs.

ii. Senior Instructor

The rank of Senior Instructor allows higher recognition and salary and longer periods of appointment than that of Instructor. It may be awarded to faculty members who do not possess the terminal degree or equivalent qualifications or other prerequisites for promotion to Assistant Professor, but who have special abilities in teaching, research or other scholarly activity, or clinical activity that justify such recognition.

Faculty at the Instructor or Senior Instructor level may have the terminal degree appropriate to their field. They may also have promise in teaching, research or other scholarly activity, or clinical activity, although they usually do not have an established record of outstanding accomplishments. Faculty at the Instructor or Senior Instructor level may lack board certification, a record of research funding, teaching or clinical experience, or other qualifications for appointment or promotion to Assistant Professor. Appointment to the rank of Instructor or Senior Instructor, or advancement from Instructor to Senior Instructor is made at the discretion of the department.

iii. Assistant Professor

Assistant Professors should have the terminal degree appropriate to their field, or equivalent qualifications, and should otherwise be well qualified to teach in the medical school and its programs. Assistant Professors should demonstrate the potential for excellence in teaching, research or other scholarly activity, or clinical activity, and the capacity to participate productively in research or other scholarly activity. Advancement from Instructor or Senior Instructor to Assistant Professor or appointment to the rank of Assistant Professor is made at the discretion of the department.

iv. Associate Professor

Associate Professors in the tenured and tenure-eligible track should have the terminal degree appropriate to their field or equivalent qualifications. Associate Professors must demonstrate excellence in one of the domains of teaching, research or other scholarly activity, or clinical activity and at least meritorious performance in the remaining domains of teaching, research or other scholarly activity, and service or clinical activity.

Thus the review for promotion or appointment to Associate Professor shall be in accordance with the following guidelines:

At least Meritorious performance in all:	Excellence in at least one:
<ul style="list-style-type: none">• Teaching• Research or Other Scholarly Activity• Service or Clinical Activity	<ul style="list-style-type: none">• Teaching• Research or Other Scholarly Activity• Clinical Activity

Review for promotion to Associate Professor may occur whenever the faculty member meets the criteria, but usually the review will begin by the start of the seventh year as an Assistant Professor. In most cases, promotion to Associate Professor will be based primarily on the faculty member's accomplishments while serving as an Assistant Professor. Recent accomplishments in non-academic settings will also be considered if they meet the requirements for promotion.

Faculty members who have not applied for promotion to Associate Professor by the beginning of their seventh year at the rank of Assistant Professor will be given appropriate notice that their appointment will not be renewed, or that they must request an extension, in accordance with University and SOM policies. A three-year extension to the "time-clock" (throughout this document, the phrase "time-clock" refers to the "probationary period" as defined in [Regent Policy 5.D.1\(C\)](#)) will be considered in accordance with current policies, which stipulate that: a) any Assistant Professor in the 5th or 6th year in rank may submit a petition to the Dean requesting a three-year extension; b) prior to submission of the request, the faculty member must have undergone a comprehensive early career review that includes an assessment of their readiness for promotion; and c) the chair of the department must concur with the request for extension. If the faculty member is in their 7th year as an Assistant Professor, the request for an extension must be submitted prior to the deadline that year for submission of promotion dossiers to the Dean's Office and prior to the start of the review by the SOM Faculty Promotions Committee. After review and approval by the Dean or their designee, all requests for extensions will be forwarded to the Chancellor or their designee for final approval. If an extension is denied by the chair, the faculty member may appeal to the Dean.

It is expected that faculty members who elect to extend their time as an Assistant Professor will continue to meet regularly with their department chair, division or section head, or other supervisor to review their career goals and opportunities. Faculty members may elect to be considered for promotion to Associate Professor at any time.

An individual granted an extension to the "time-clock" shall not be subject to additional scholarship, clinical, service, or teaching requirements, above or beyond those normally required in order to qualify for promotion or tenure.

An Assistant Professor initially appointed to the Tenured and Tenure-Eligible track whose career goals have shifted may request to move to the Clinical Practice or Research Professor tracks. If approved by the department chair, the faculty member will assume the rank of Assistant Professor of Clinical Practice (or Assistant Research Professor). This move must be requested by the end of the 6th year as an Assistant Professor in the Tenured and Tenure-Eligible track. If an extension has been granted, a request to change tracks must be made before the final year of the extension. All faculty reassignments must follow university and campus policy.

v. Professor

Professors in the Tenured and Tenure-Eligible track should have the terminal degree appropriate to their field or equivalent qualifications. They must demonstrate continued achievement in their areas of expertise; that is, they must have a record since receiving promotion to Associate Professor that indicates substantial, significant and continued growth, development, and accomplishment.

Professors in the Tenured and Tenure-Eligible track must demonstrate at least meritorious performance in teaching and service or clinical activity. They must demonstrate excellence in research or other scholarly activity and excellence in at least one of teaching or clinical activity. The faculty member must have a national reputation. Evidence of a national reputation may include: nationally recognized research, scholarship, clinical activities or teaching; service on national study sections or editorial boards; visiting professorships or invitations to speak at other universities or at national meetings; authorship of nationally recognized clinical practice guidelines or review articles in respected journals; and leadership of national committees or task forces. In most cases, promotion to Professor will be based primarily on the faculty member's accomplishments while serving as an Associate Professor. Recent accomplishments in non-academic settings will also be considered if they meet the requirements for promotion.

Thus the review for promotion or appointment to Professor shall be in accordance with the following guidelines, as well as documentation of a national reputation:

Meritorious in all:	Excellence in at least one:	Excellence in:
Teaching	Teaching	Research or Other Scholarly Activity
Service or Clinical Activity	Clinical Activity	

b. Scholarship Requirement for All Faculty in the Tenured and Tenure-Eligible Track

All faculty in the Tenured and Tenure-Eligible track will be required to participate in scholarship, as broadly defined. All scholarship implies creativity. The central purposes of scholarship and creative work are to deepen understanding and to advance and disseminate knowledge. The products of all scholarship must be in a format that can be evaluated, which would typically mean a written format, but could also include web-based or digital formats.

Full professors in the Tenured and Tenure-Eligible track must demonstrate excellence in research or other scholarly activity. The criteria for excellence may vary, depending on the type of scholarship submitted, however it will necessarily include important goals, appropriate methods, a demonstrable connection to existing knowledge or contemporary work undertaken by others, significant impact or results, and dissemination to peers.

For additional information on the types of scholarship that may be considered during promotion or tenure reviews, see the [Office for Faculty Affairs website](#).

2. Clinical Practice Track

Faculty members whose duties are focused primarily on patient care or clinical program leadership may be given titles in the Clinical Practice track. Faculty members appointed or promoted in this track shall hold the titles of "Instructor, Senior Instructor, Assistant Professor, Associate Professor, or Professor of Clinical Practice." The official title (e.g. Associate Professor of Clinical Practice) is used on all appointment, promotion, and university human

resources correspondence, and on the faculty member's curriculum vitae. For routine communications, such as e-mails, patient correspondence or scholarly work, the shorter working title (e.g. Associate Professor) may be used.

Faculty promoted to the ranks of Associate Professor or Professor in the Clinical Practice track must demonstrate excellence in clinical activity, as defined in the Promotion Criteria (Appendix 1A). They must also demonstrate at least meritorious accomplishments in teaching. Faculty in this track are encouraged, but not required, to participate in research or other scholarly activity. As such, they are not eligible for tenure. Faculty in this track may hold limited, indeterminate, or at-will appointments.

Instructors, Senior Instructors, Assistant Professors, Associate Professors and Professors of Clinical Practice are entitled to the rights and privileges of full-time faculty in the Tenured and Tenure-Eligible track, including eligibility for sabbatical assignments, except those rights and privileges only afforded to tenured faculty (see [Administrative Policy Statement 1022](#) and [Campus Administrative Policy 1049A](#)). Faculty in the Clinical Practice track are eligible for vacation and sick leave, health and life insurance coverage and retirement benefits in accordance with [University policies](#). Annual performance reviews are identical to the review and approval processes for tenured and tenure-eligible faculty.

Positions in the Clinical Practice track and the Tenured and Tenure-Eligible track are not interchangeable. Faculty members in the Clinical Practice track may be reassigned to the Tenured and Tenure-Eligible track (and vice versa) only if agreed to by the faculty member and the department chair. Faculty members who are reassigned must be reviewed by the appropriate departmental and SOM committees, to ensure that they meet all criteria for the new title and rank. All faculty reassignments must follow university and campus policy.

a. Criteria

All faculty promoted to the ranks of Associate Professor or Professor in the Clinical Practice track are expected to demonstrate excellence in clinical care, as detailed in the Promotion Criteria (Appendix 1A). As stated above, the promotion process is meant to describe and reward continued professional growth and achievement. Therefore, faculty appointed or promoted to the rank of Professor of Clinical Practice must demonstrate ongoing achievement in their areas of expertise; they will have met a larger number of the criteria for clinical excellence listed in the Promotion Criteria and will have demonstrated leadership in one or more areas of clinical practice or clinical program leadership. Associate Professors of Clinical Practice will usually have met fewer of these criteria or in less depth.

i. Instructor of Clinical Practice

Instructors of Clinical Practice should have at least a Master's degree or equivalent qualifications and should otherwise be well qualified to participate in teaching or clinical activity in the SOM and its programs.

ii. Senior Instructor of Clinical Practice

The rank of Senior Instructor of Clinical Practice allows higher recognition and salary and longer periods of appointment than that of Instructor. It may be awarded to faculty members who do not possess the terminal degree or equivalent qualifications or other prerequisites for promotion to Assistant Professor, but who have special abilities in teaching or clinical activity that justify such recognition.

Faculty at the Instructor or Senior Instructor level may have the terminal degree appropriate to their field. They may also have promise in teaching or clinical activity, although they usually do not have an established record of outstanding accomplishments. Faculty at the Instructor or Senior Instructor level may lack board certification, teaching or clinical experience, or other

qualifications for appointment or promotion to Assistant Professor. Appointment to the rank of Instructor or Senior Instructor, or advancement from Instructor to Senior Instructor is made at the discretion of the department.

iii. **Assistant Professor of Clinical Practice**

Assistant Professors of Clinical Practice should have the terminal degree appropriate to their field, or equivalent qualifications, and should otherwise be well qualified to teach in the SOM and its programs. Assistant Professors of Clinical Practice should demonstrate the potential for excellence in teaching or clinical activity and, where appropriate, the capacity to participate productively in research or other scholarly activity. Advancement from Instructor or Senior Instructor to Assistant Professor or appointment to the rank of Assistant Professor is made at the discretion of the department.

iv. **Associate Professor of Clinical Practice**

Faculty appointed or promoted to the rank of Associate Professor of Clinical Practice will devote the majority of their time and effort to clinical care or clinical program leadership. They should have the terminal degree appropriate to their field, or equivalent qualifications. Associate Professors of Clinical Practice must demonstrate: excellence in clinical care; at least meritorious performance in teaching; and a local (hospital or university) or regional reputation for clinical excellence. Evidence of a local or regional reputation may include letters of support from clinical colleagues, evidence that the faculty member has become a resource for other clinicians, leadership of clinical programs, meaningful participation in quality improvement or clinical policy activities or other evidence of a local or regional reputation. Scholarship related to clinical practice is encouraged and will strengthen the clinician's dossier.

Faculty in the Clinical Practice track do not have a "time-clock," thus, depending on their career goals and in consultation with their department chair, they may remain at the rank of Assistant Professor of Clinical Practice indefinitely. Review for promotion to Associate Professor of Clinical Practice may occur whenever the faculty member meets the specified criteria; there are no additional requirements based on the length of time a faculty has served as an Assistant Professor of Clinical Practice. Regardless of the intent of the faculty member to seek promotion or the timing of promotion, they must undergo a comprehensive early career review as detailed in Article II.I.3.f. It is expected that faculty members at the rank of Assistant Professor of Clinical Practice, regardless of the duration at that rank, will meet regularly with their department chair, division or section head, or other supervisor to review their career goals and opportunities.

An Assistant Professor of Clinical Practice whose career goals have shifted may request to be promoted within the Tenured and Tenure-Eligible track. If approved by the department chair, the faculty member may apply for promotion to Associate Professor in accordance with the policies specified in Article II.G.1.a.iv.

v. **Professor of Clinical Practice**

Professors of Clinical Practice should have the terminal degree appropriate to their field or equivalent qualifications. They must demonstrate excellence in clinical care and at least meritorious accomplishments in teaching. Professors of Clinical Practice must demonstrate continued achievement in their areas of expertise; that is, they must have a record, since receiving

appointment or promotion to Associate Professor, that indicates substantial, significant and continued growth, development and accomplishment.

In addition to excellence in clinical care, Professors of Clinical Practice must demonstrate a national reputation for excellence in clinical care. Evidence of a national reputation may include: nationally recognized clinical activities or teaching; visiting professorships or invitations to speak at other universities or at national meetings; authorship of nationally recognized clinical practice guidelines or review articles in respected publications; and leadership of national committees or task forces.

Professors of Clinical Practice must also demonstrate at least one of the following: excellence in teaching; leadership of structured projects that have assessed and improved the quality, value or efficiency of clinical care; or leadership of projects that have addressed barriers in the healthcare system, shaped public health policy or addressed community health and healthcare needs.

Scholarship is encouraged and will strengthen the applicant's dossier. Greatest weight is given to scholarly projects that advance the science and practice of excellence in health care quality, uniform access, operational efficiency and patient safety.

3. Research Professor Track

Faculty members whose principal duties are to conduct research may be given titles in the Research Professor track (Appendix 2). Faculty members appointed in this track will have limited involvement in instructional programs.

Faculty appointed or promoted in the Research Professor track may be independent or collaborative investigators. Faculty appointed or promoted to the ranks of Associate Research Professor or Research Professor may be serving as senior investigators with independent funding, scientists reporting to regular faculty, principal investigators, co-principal investigators, or directors or co-directors of core scientific facilities. Faculty in this track are expected to demonstrate evidence of excellence in research or other scholarly activity, specifically the scholarship of discovery, as defined above in G.1.b.iv.

Faculty in the Research Professor track will usually be supported by non-general funds. However, when there is a gap between externally funded research grants, departments or the School may provide interim support to selected faculty members in this track who have made significant contributions to the School. They are not eligible for tenure or sabbatical assignment.

Members of the Research Professor track are eligible for vacation and sick leave, health and life insurance coverage, and retirement benefits in accordance with [University policies](#). Annual performance reviews and reviews for appointment and promotion in the Research Professor track are identical to the review and approval processes for faculty in the Clinical Practice track.

Positions in the Research Professor and Tenured and Tenure-Eligible tracks are not interchangeable. Faculty members holding Tenured and Tenure-Eligible appointments may be reassigned to the Research Professor track only if agreed to by the faculty member and the department chair. Conversely, faculty members in the Research Professor track may be reassigned to the Tenured and Tenure-Eligible track if agreed to by the faculty member and the department chair, after which they must be reviewed by the appropriate departmental and SOM committees to ensure that they meet all criteria for the new title and rank. All faculty reassignments must follow university and campus policy.

a. Criteria

Faculty in the Research Professor track are expected to demonstrate excellence in research or other scholarly activity, specifically the scholarship of discovery as defined above in G.1.b.iv, as independent or collaborative investigators. The Promotion Criteria will be used to judge whether a candidate for promotion in the Research Professor track has met the requirements for excellence. As the promotion process is meant to describe and reward continued professional growth and achievement, Research Professors will have met more of the criteria for excellence listed in the Promotion Criteria than Associate Research Professors or have met them in more depth.

Faculty in the Research Professor track do not have a "time-clock," thus, depending on their career goals and in consultation with their department chair, they may remain at the rank of Assistant Research Professor indefinitely. Review for promotion to Associate Research Professor may occur whenever the faculty member meets the specified criteria; there are no additional requirements based on the length of time a faculty has served as an Assistant Research Professor. Regardless of the intent of the faculty member to seek promotion or the timing of promotion, they must undergo a comprehensive early career review as detailed in Article II.1.3.f. It is expected that faculty members at the rank of Assistant Research Professor, regardless of the duration at that rank, will continue to meet regularly with their department chair, division or section head, or other supervisor to review their career goals and opportunities.

Faculty appointed or promoted to the rank of Research Professor must demonstrate skill as an investigator, originality and creativity, outstanding contributions to the research programs of their department and the SOM, and a national reputation. Creativity and originality imply that the faculty member has contributed to the generation of new observations, new concepts, new techniques, or new interpretations in their field of scholarly endeavor. Evidence of a national reputation may include letters of praise from external referees, service on scientific review panels or study sections, invited scientific presentations or other evidence of national standing. Research Professors will usually have a record of funding as a principal or co-investigator and will have published high-quality scientific papers in peer-reviewed journals.

4. Adjoint Faculty⁵

As stated in Article II.E.2, faculty members who perform volunteer teaching, research, administrative, advocacy or clinical services, and those whose appointments are less than half-time (< 0.5 FTE), shall be appointed as adjoint faculty. Faculty holding adjoint titles may be granted the ranks of Adjoint Instructor, Adjoint Senior Instructor, Adjoint Assistant Professor, Adjoint Associate Professor, Adjoint Professor, or Adjoint Professor with Distinction (Appendix 2). Note that the rank precedes the "Adjoint" designation in the official job title (per [Administrative Policy Statement 5060](#)). However, for the commonly used designation in the SOM, the term "Adjoint" will precede the rank for these faculty members and is therefore a "working title." Letters of offer must include the official title, however the working title will be used in the SOM. Unless they demonstrate significant accomplishments in teaching or mentoring, research, healthcare program leadership or community service at the time their association with the SOM begins, members of the adjoint faculty will usually begin at the rank

⁵ The title adjoint is also applied to employees of other universities, national research institutes, or other agencies or institutions who offer courses or supervise academic programs with or without compensation from the University of Colorado.

of Adjoint Senior Instructor or Adjoint Assistant Professor. All adjoint faculty members shall be appointed to at-will positions. The performance of adjoint faculty members who have teaching responsibilities will be reviewed at least every three years.

Adjoint faculty are expected to demonstrate significant, ongoing contributions to the teaching, service, clinical care, research or administrative programs of their department, the SOM, or the Anschutz Medical Campus.

The criteria outlined below for each rank are general guidelines. The criteria for appointment and promotion of adjoint faculty members may vary across departments. Additionally, branch campuses, Longitudinal Integrated Clerkships (LIC), and other educational program leaders may establish specific requirements for appointment and promotion that meet the needs of their teaching programs. Further, departments, campuses, clerkship sites, and other teaching programs may require specific documentation during performance reviews, such as teaching logs, teaching evaluations, feedback from mentees, and other documentation of meaningful contributions and engagement.

Adjoint faculty members who are primarily focused on teaching must maintain a significant teaching presence. Teaching includes instruction and supervision of learners in classroom, clinical, research, and community settings. Teaching also includes mentorship, coaching, professional role modeling, and participation in course leadership and educational scholarship and research. The SOM recognizes the teaching of undergraduate students, graduate students, residents, fellows and health care providers in all the health professions. Importantly, excellence in teaching also requires being a model of professional conduct for students, residents, and other trainees.

Advocacy, service, community engagement and other activities that support the missions of the school may also be recognized during review for appointment and promotion.

Adjoint Associate Professors should have a minimum of four years of service as Adjoint Assistant Professor or equivalent experience, combined with evidence of significant ongoing contributions to one or more SOM or departmental activities.

Adjoint Professors should have a minimum of six years of service as an Adjoint Associate Professor or equivalent experience, combined with evidence of continuing outstanding contributions to the SOM or to the programs of their department. Adjoint Professors should be outstanding teachers and professional role models. They should also demonstrate institutional citizenship, exemplified by such activities as service on committees, attendance at conferences, and support of the academic missions of the department or the SOM.

The title **Adjoint Professor with Distinction** is extended to recognize part time or volunteer faculty members who have made outstanding contributions to the SOM and to their academic disciplines. Candidates recommended for this rank must fulfill the requirements for Adjoint Professor above and must demonstrate:

1. Exemplary teaching; and
2. Distinguished scholarship or creative work.

Each department must define specific guidelines for promotion to each rank within these general rules. These guidelines must be communicated in writing to the adjoint faculty of the department and must be made available to the Assistant Dean for Community-Based Medical Education and to the Committee on Adjoint Appointments and Promotions.

Appointments at the level of Adjoint Associate Professor, Adjoint Professor, and Adjoint Professor with Distinction are reviewed and approved by the Committee on Adjoint Appointments and Promotions. All such appointments and promotions must be approved by the department chair and departmental committee reviewing such

appointments and promotions prior to submission to the Committee on Adjoint Appointments and Promotions.

5. Special Faculty Titles

The University has approved the use of special titles and title prefixes, which may be used by the SOM in specific situations.

a. Visiting Faculty Appointments

Faculty members hired at the level of Associate Professor or Professor in any track are subject to review and approval by the SOM Faculty Promotions Committee. The term “Visiting” is used in the faculty member’s title (e.g., “Visiting Associate Professor”) until the dossier has been approved by this committee. The title “Visiting” is a temporary designation; the faculty member’s dossier must be submitted for review by the Faculty Promotions Committee within one year after the start of the faculty member’s appointment at the SOM and the term may be removed upon notification of committee approval by the department chair. The dossier may be submitted for review at any time after the faculty member’s employment begins.

b. Adjoint Faculty Appointments

Separately from the faculty members who perform volunteer or part-time teaching, research, administrative, advocacy, or clinical activity described above, the “adjoint” designation, applied at the end of a faculty title, is used for individuals such as employees of other universities, national research institutes, or other agencies or institutions who offer courses or supervise academic programs with or without compensation from the University of Colorado. Their academic qualifications should be similar to those of all other faculty at the Professor, Associate Professor, or Assistant Professor ranks. These appointments are at-will.

6. Emeriti Status

Upon retirement, any member of the faculty who has given exemplary service to the School may be allowed to retain their title with the description of “emeriti.” Appointment as an emeriti faculty member is an honor bestowed upon a retiring faculty member who has brought distinction to the SOM through longstanding contributions to the School’s educational, clinical, service, community engagement or research missions. The recommendation for this status can originate from the appropriate department chair, who will forward the recommendation to the Executive Committee. Or it may originate directly in the Executive Committee. The Executive Committee, acting as the Dean’s Review Committee, shall then transmit the recommendation to the Chancellor or their designee for approval ([Campus Administrative Policy 1011A](#)).

Upon retirement, a member of the adjoint faculty who has given exemplary service to the SOM may be allowed to retain their title with the description of “emeriti.” The emeriti designation may be given to those faculty members who hold the academic rank of Adjoint Associate Professor, Adjoint Professor, or Adjoint Professor with Distinction and who have rendered 20 or more years of exemplary service to the SOM. The recommendation for this status should originate with the pertinent department chair, who will forward the recommendation to the Committee on Adjoint Appointments and Promotions. That committee will transmit its recommendation to the Executive Committee. There may be other special circumstances in which it is deemed fitting to award faculty with the designation of “emeriti.” In such cases, the recommendation, with appropriate justification, will be transmitted to the Committee on Adjoint Appointments and Promotions.

7. Tenure

Faculty members who are full-time employees of the University of Colorado at the academic ranks of Associate Professor or Professor in the Tenured and Tenure-Eligible track are

eligible for consideration for an award of tenure. Consideration for promotion and the award of tenure will be separate processes but may occur concurrently. No time limit exists for an award of tenure; however, a faculty member who is turned down for tenure at the level of the Faculty Promotions Committee may not be re-considered for three years.

Tenure recommendations must first be reviewed by the department chair and by tenured members of the Departmental Evaluation Committee. Tenure recommendations will then be reviewed and voted on by a subcommittee of tenured members of the Faculty Promotions Committee, and their recommendation will then be forwarded to the Dean, and subsequently to the Executive Vice Chancellor for Academic and Student Affairs and the Vice Chancellor's Advisory Committee. The review will be conducted separately from any promotion consideration.

The award of tenure in the SOM will be reserved for those faculty members who are among the best in their field of scholarly endeavor. The faculty members will also be widely recognized as outstanding and influential teachers and will show definitive promise of continuing, outstanding contributions to the SOM. The balance between accomplishments in scholarship and teaching may vary considerably from one faculty member to another, but both scholarship and teaching excellence must be present before an award of tenure is made. Professional and administrative leadership, service, and clinical activities by a faculty member should be weighed into any decision regarding an award of tenure, but such activities, in the absence of significant accomplishments in both teaching and scholarship, are not an adequate basis for an award of tenure.

The first requisite for an award of tenure is excellence in scholarship which has led to a national and international reputation. Scholarship is defined here, in the context of an award of tenure, as the rigorous, systematic study of phenomena or events which leads to a competent mastery of one or more of the medical, allied health or related basic science disciplines. More narrowly, scholarship refers to advanced study which leads to the acquisition of knowledge in a particular field, along with accuracy and skill in investigation, and the demonstration of powers of critical analysis in interpretation of such knowledge. While the foregoing primarily refers to the scholarship of discovery, it also includes the scholarship of application, integration, and teaching, as previously defined. All candidates for the award of tenure in the SOM will have demonstrated significant accomplishments in scholarly endeavors, which is synonymous with the generation of new knowledge. The faculty member's scholarship must provide compelling promise of continued creativity with respect to generating new observations, new concepts, and new interpretations related to the individual's scholarly endeavors.

The second requisite for the granting of tenure is demonstrated excellence in, and dedication to, teaching. The faculty member must have demonstrated a capacity and a desire to maintain teaching effectiveness and must show capacity for continued growth as a teacher. The faculty member must have an outstanding record of success in teaching or mentoring students, residents, fellows, or faculty members. It is implicit that excellence in teaching includes being a model of professional conduct for students, colleagues, and, if applicable, patients.

The award of tenure will be reserved for those faculty members whose achievements in scholarship and teaching have been recognized by academicians outside of the University as well as by the faculty member's colleagues. Tenured faculty members are those individuals whose presence on the faculty enhances the prestige of the University of Colorado School of Medicine.

a. Tenure Upon Hire

If an individual's professional accomplishments warrant, tenure may be recommended upon hire. When this occurs, the recommendation for tenure must be documented in the letter of offer. Recommendations for tenure upon hire are subject to the same rigorous review as all other tenure candidates. Although the timeline may be expedited, steps in the process cannot be truncated or omitted.

The only exception is that letters of recommendation at the time of hire may be used in place of external referee letters, so long as those letters address the candidate's qualifications for tenure and the rank to which they are being appointed. If necessary, additional letters may be requested during the tenure evaluation process.

8. Tenure Criteria

A full-time non-CU employed faculty member, who holds the rank of Associate Professor or Professor in the Tenured and Tenure-Eligible track, is eligible for consideration for the honorary title of "Tenure Criteria." This honorary title will be reserved for those non-CU employed faculty members who have met the criteria for excellent accomplishments in scholarship and teaching that have led to an international reputation. Those recommended for Tenure Criteria will also have a strong record of service, which may include service to the community, the University, the affiliated institution, or to one or more scientific or professional organizations.

Applications for the honorary title of Tenure Criteria shall be reviewed by the Department Evaluation Committee and then forwarded to the Faculty Promotions Committee for consideration. Granting the honorary title of Tenure Criteria lies within the SOM and these applications will not be reviewed by the Board of Regents. This honorary title is not equivalent to the award of Tenure and shall not involve a financial obligation by the SOM or the University. The granting of the honorary title of Tenure Criteria to a non-CU employed faculty member shall not lead to the award of Tenure. Tenure is only awarded by the University of Colorado Board of Regents to CU employed faculty who have advanced through the tenure review process which is reserved for CU employed Tenured and Tenure-Eligible track faculty. A non-CU employed faculty member who is granted the honorary title of Tenure Criteria by the SOM who subsequently becomes a University employed faculty member does not automatically gain Tenure but is instead eligible to apply for the award of Tenure through the tenure review process outlined by the University and SOM rules.

H. Procedures for Appointment, Promotion and Award of Tenure

1. Departmental Review

- a. Review for appointment or promotion to Associate Professor or Professor, regardless of track, and review for the award of tenure, occurs within the faculty member's department and within the SOM (first level review), and in cases of application for award of tenure, by the Chancellor (second level review). Recommendations for the award of tenure must also be reviewed by the President and by the Board of Regents (third level review), as outlined in [Administrative Policy Statement 1022](#) and [Campus Administrative Policy 1049A](#).
- b. The initial review of a faculty member's qualifications for appointment or promotion to Associate Professor or Professor or for the award of tenure is performed by the Departmental Evaluation Committee ("Evaluation Committee" in [Administrative Policy Statement 1022](#)) in consultation with the chair of the faculty member's department ("primary unit"). When the chair and the Departmental Evaluation Committee agree that a faculty member should be recommended for appointment or promotion or for the award of tenure, the chair will forward to the Dean the faculty member's credentials and all appropriate supporting documents, along with a letter summarizing the professional experience, achievements and departmental role of the candidate.
- c. Each department shall elect or appoint (having previously voted on a method to be followed) from among its Professors and Associate Professors, a standing Departmental Evaluation Committee (DEC). Membership on the DEC may rotate or remain stable, depending on the preference of the departmental faculty, with the concurrence of the department chair. Members of the DEC who have

administrative responsibility for a faculty member under review cannot participate in the initial review and must recuse themselves from DEC deliberations about that faculty member. Only full Professors may vote on recommendations for appointment or promotion to full Professor. Only tenured faculty members may vote on recommendations for tenure; if necessary, tenured faculty members from other departments within the SOM may be recruited to review and vote on a recommendation for tenure.

- d. If either the chair or the DEC does not support the recommendation for promotion or tenure of an individual who is already in the department, this decision shall be disclosed to the faculty member in a letter fully stating the reasons for the decision. In such a case, the faculty member may submit to the Dean all credentials, supporting documents and other appropriate information regarding their promotion or tenure qualifications, as described below, and request review by the Faculty Promotions Committee. The Faculty Promotions Committee shall also have access to all relevant departmental records, including the letters by the department chairperson and the DEC.
- e. Additional rights of the faculty with respect to the promotion and tenure process are described in Article II.I.
- f. Information regarding a candidate submitted by the department to the Dean must include at least the following information:
 - i. A current curriculum vitae (C.V.) presented in an acceptable format (See the [Office for Faculty Affairs](#) website).
 - ii. Only in cases of application for the award of tenure, a C.V. Abstract in the format provided on the [Office for Faculty Affairs](#) website.
 - iii. A letter of recommendation from the department chair. The chair's letter should summarize the faculty member's accomplishments in teaching, research or other scholarly activity, clinical activity, service, and leadership, as well as the likelihood of continued success. The chair's letter should also include language addressing the faculty member's record of professionalism, as codified in the [Faculty Promise](#), [Teacher-Learner Agreement](#) and [Professionalism Code of Conduct](#).
 - iv. A letter from the DEC, including an explicit statement describing how the candidate fulfills the criteria for the proposed rank or award of tenure, and the results of the committee vote on the candidate.
 - v. Letters from 3 to 6 academic referees who can accurately evaluate the major accomplishments and qualifications of the candidate. At least 3 letters must be from individuals who do not hold University of Colorado faculty appointments and who are not otherwise affiliated with the University of Colorado ("external referees"). All letters must be requested by, and submitted to, the department chair or the chair of the DEC. Departments must use the approved template letter provided by the Office for Faculty Affairs when requesting letters from external referees. All letters received on behalf of a candidate must be included in the dossier that is submitted to the Faculty Promotions Committee. All referee letters except those provided by the department chair and the DEC are considered confidential and must not be shared with the candidate at any point during or after the review process.

External referees should be able to accurately and objectively evaluate the major accomplishments and qualifications of the candidate. Letters from former colleagues, thesis supervisors or fellowship directors may be submitted; however, they may constitute a conflict of interest. At least three letters must be from academicians whose evaluations will not be perceived as

constituting a conflict of interest.⁶ Letter writers must state in the first paragraph whether, in what manner, and for how long they have known the faculty candidate. External letters should be from faculty members holding an academic rank at least as high as that sought by the candidate. However, exceptions may be made when external reviewers have specialized expertise.

In accordance with [Administrative Policy Statement 1022](#) and [Campus Administrative Policy 1049A](#), selection of external evaluators shall be undertaken by the department, in consultation with the candidate. Consistent with the above guidelines, a uniform process for selection of external referees must be followed by the department and must include the following steps: a) candidates shall be given the opportunity to suggest possible external referees; b) for each suggested referee, the candidate must indicate in writing to the department chair whether, in what manner, and for how long they have known the external referee;⁷ and c) the faculty candidate must be provided the opportunity to indicate specific individuals to exclude from consideration because their evaluations might constitute a conflict of interest or be prejudiced against the candidate.

- vi. If appropriate, letters from individuals from other departments and units within the University and the community who are competent to judge the candidate and have a legitimate interest in the appointment, promotion or tenure recommendation.
- vii. A cover letter (suggested length 3-5 pages) which describes the candidate's area(s) of excellence and highlights the impact, importance, and reach of the candidate's accomplishments. Additional details about the structure and content of the cover letter are in the [Dossier Preparation](#) section of the Office for Faculty Affairs website.
- viii. A single, Personalized Promotions Matrix, highlighting how the candidate has met the standards for "meritorious" or "excellent" in each of the applicable domains (teaching, clinical activity, research or other scholarly activity, and leadership and service). The Promotion Criteria are included as Appendix 1A, and the template for the Personalized Promotions Matrix as Appendix 1B. Sample personalized matrices are available on the Office for Faculty Affairs website.
- ix. Supporting documentation or evidence of accomplishments in applicable domains (recommended limit of 25 pages, excluding teaching evaluations).
- x. Teaching evaluations, teaching or mentoring excellence awards, or other evidence of at least meritorious teaching for all faculty for whom at least meritorious teaching is required for promotion.
- xi. Any other information submitted by the candidate that the candidate believes will ensure adequate consideration and evaluation of their appointment, promotion or tenure.

⁶ Review committee members recognize that team scientists and faculty members with unique areas of academic focus (e.g., Community-Based Participatory Research) may not always have access to strictly "arms-length" external referees. Review committee members will use their independent judgment in assessing whether external referee letters are sufficiently objective and arms-length.

⁷ Faculty candidates must disclose all prior relationships. These may include mentor-mentee connections, having been trained by the external referee, service together on editorial boards, national committees or study sections, co-authorship of research or other publications, and other professional relationships. While these relationships do not necessarily introduce bias, they must be disclosed.

- g. The faculty member under consideration should have the opportunity to review their dossier, excluding confidential letters of evaluation, for completeness before it is forwarded from the department to the Dean.

2. First-level (School of Medicine) Review

a. General Procedures

First level review (within the SOM) of proposals for appointment, promotion or award of tenure submitted by a department or its representative or, in the absence of agreement within the department, by the candidate, shall follow these guidelines:

Consideration for promotion or appointment to the ranks of Associate Professor and Professor in the Tenured and Tenure-Eligible, Clinical Practice, and Research Professor tracks, and consideration for tenure, are subject to review within the SOM by the Faculty Promotions Committee ("Dean's Advisory Committee" in [Campus Administrative Policy 1049A](#)). The Faculty Promotions Committee (FPC) shall receive all information submitted by the faculty member's department to support the recommendation and shall request any additional information until, in its judgment, the submitted information is adequate. When the petition for promotion, appointment, or award of tenure is made by the individual faculty member (without the support of the department chair and DEC), it is the responsibility of the faculty member to collect and present to the Dean all appropriate information. This information will then be forwarded to the FPC by the Dean.

b. Faculty Promotions Committee

- i. Each academic department shall provide to the Office for Faculty Affairs at least one nomination for the FPC each year. The nominees need not necessarily be members of that department. In addition, any individual member of the Executive Faculty may indicate to the Office for Faculty Affairs their interest in, and qualifications for, this committee. Final approval of the FPC roster rests with the Dean or their designee.
- ii. The FPC shall be composed of at least 15 members. Every effort will be made to ensure that scientists, clinicians, and educators are represented on the FPC. All committee members must hold the rank of Associate Professor or Professor in the Tenured and Tenure-Eligible or Clinical Practice tracks. At least seven members of the committee must be tenured. Deans, departmental chairs, division heads, and section heads may not be members of the FPC.
- iii. The SOM shall seek to appoint a balanced committee; its representation should, to the extent possible, reflect the different departments, the affiliated hospitals, and the varied clinical, research and teaching missions, of the School. Members of the FPC shall also be selected to ensure a breadth of perspectives, experiences, and practice locations. All FPC members are required to support impartial, consistent, and non-discriminatory application of criteria in the review process.
- iv. The FPC shall have at least one chair who is elected by the committee members. Wherever possible, members of the FPC will elect two or more co-chairs, ensuring that the basic science and clinical departments are represented.
- v. The FPC chair(s), or their designee from the committee, shall receive information from the Dean regarding all individuals to be considered for appointment or promotion or award of tenure, shall call meetings, and shall appoint advisory committees when necessary.

- vi. All committee members shall serve for three-year terms, staggered so that one-third of the committee is replaced each year. After completing a three-year term, a faculty member may be reappointed to additional three-year terms.
- vii. If a committee member resigns prior to completion of their term, a replacement to complete that unexpired term may be selected by the Faculty Officers and the Dean.
- viii. The FPC shall receive adequate administrative and secretarial support from the Dean's Office to carry out its responsibilities.
- ix. Ad hoc committees that are advisory to the FPC may, in selected instances, be appointed to aid in the evaluation of a proposed appointment, promotion, or award of tenure. Such an ad hoc committee shall consist of at least two members of the FPC and three to five members (selected by the FPC) who have special knowledge regarding the area of expertise of the individual being considered. The chair of an advisory committee to the FPC shall be one of the members of the FPC and will be appointed by the chair of the FPC. The ad hoc advisory committee will make recommendations and give information to the FPC.
- x. Having reviewed all relevant information regarding a candidate, the FPC will make a recommendation either to support or reject the proposed faculty member's appointment, promotion, or award of tenure. A subcommittee of at least seven tenured members of the FPC will vote concerning tenure. This recommendation will be conveyed to the Dean or their designee for approval. However, before forwarding its final recommendation to the Dean, the FPC may elect to contact the department chair and request additional information related to the qualifications of a candidate for appointment, promotion, or tenure.
- xi. A candidate for appointment, promotion, or tenure shall be informed of the recommendation by the department chair as expeditiously as possible following receipt of the information from the Dean.

3. Second Level Review (Level of the Chancellor)

- a. For awards of tenure, the Dean shall submit to the Chancellor a list of all approved tenure recommendations, along with the results of the votes of the DEC and the FPC, the Dean's approval, a summary of the qualifications and accomplishments of the candidate, and letters of reference on behalf of the candidate.
- b. If there are any differences of opinion regarding a candidate's application for promotion among the department chair, the DEC, the FPC, or the Dean that have not been resolved, each party in the disagreement shall submit to the Chancellor or their designee a statement outlining the areas of disagreement and the reasons for its recommendations.
- c. Completion of review by the Chancellor of the University of Colorado Anschutz Medical Campus and completion of review by the President of the University shall occur as outlined in [Regent Policy 5D](#), [Administrative Policy Statement 1022](#) and [Campus Administrative Policy 1049A](#).

I. Rights and Responsibilities in Faculty Appointments, Promotion and Career Development

- 1. At the time of a faculty member's initial appointment, it is the responsibility of that member's departmental chair or division or section head to inform them about the job

responsibilities and performance expectations for the position. It is also the responsibility of the chair, or division or section head to provide relevant information about the criteria for promotion within the department and the SOM and to provide an opportunity for the new faculty member to discuss these criteria.

In addition, at the time of a faculty member's initial appointment, the department shall provide copies of, or shall provide electronic access to, the current Rules of the School of Medicine, [Administrative Policy Statement 1022](#), and [Campus Administrative Policies 1049A](#) or [1019A](#). Each faculty member must be afforded ample opportunity to discuss these documents with the chair and other officials of the School and the University.

All faculty in all tracks who have not advanced to the rank of Professor will be assigned at least one mentor by the department chair or designee. In the case of new appointments, the assignment of mentors may take place prior to the start of the faculty member's initial appointment but must occur within 3 months of the start of their appointment.

2. Shared Responsibilities

- a. The process of faculty review and promotion includes various responsibilities that are shared among individual faculty members, department and division heads, mentors, and administrators.
- b. Each faculty member has the primary responsibility for documentation and presentation of their accomplishments. With respect to annual performance reviews, comprehensive early career reviews, reviews for promotion or awards of tenure and post-tenure reviews, each faculty member must submit all documents that are required by department, SOM and University policies and must participate actively in these reviews.
- c. The Office for Faculty Affairs shall also develop and make available to all faculty and departments additional tools to aid in the faculty review and promotion process, including but not limited to, a suggested format for the C.V., guidelines for assembling promotion and tenure dossiers, examples of required dossier elements, and a description of all annual reviews and other performance evaluations required by School or University policies.
- d. Departmental committees, division and section heads, and chairs are responsible for reviewing the School's written guidelines for promotion and tenure and for applying these standards fairly and equitably when reviewing faculty members' performance. Additional responsibilities for department chairs are outlined in Article I.A.3.a.
- e. Annual performance evaluations shall be conducted for all faculty members ($\geq 50\%$ FTE), including those employed by affiliate institutions. Annual reviews must be conducted by the department chair or designee and must adhere to the schedule set forth by the University of Colorado or the affiliated institution where the faculty member is employed. This review shall indicate the chair's evaluation of the faculty member's work within the department and, if appropriate, shall indicate the chair's future plans regarding continued appointment and promotion. This report shall become a part of the faculty member's official personnel file. On an annual basis, and in accordance with University policies, each University-employed faculty member must also receive a Performance Rating and may participate in the development or revision of a Professional Plan. Faculty members who receive a performance rating of "below expectations" or "not meeting expectations" must participate in developing a Performance Improvement Agreement, as outlined in [Administrative Policy Statement 5008](#). The Office for Faculty Affairs shall ensure that faculty members who receive a performance rating of "below expectations" or "not meeting expectations" are made aware of their right to appeal this rating.

- i. A faculty member's performance shall be evaluated based upon performance standards developed by each department and any written expectations agreed to between the faculty member and the department. The faculty member's performance in teaching, clinical activity or service, and scholarship should be considered, along with the assigned workload and administrative and faculty governance service, as outlined in [Regent Policy 5C](#).
 - ii. Examples of appropriate criteria to be used in evaluating teaching, clinical care, research or other scholarly activity, and service are listed in the Promotion Criteria (Appendix 1A).
 - iii. Volunteer and part-time faculty members who have teaching responsibilities must also undergo regular reviews of their teaching performance. The teaching evaluations of all volunteer faculty members are reviewed annually by the Assessment, Evaluation, and Outcomes Office and by the appropriate LIC or course director. If concerns are identified, feedback and an opportunity to improve are provided; volunteer teachers may also be dismissed from teaching responsibilities when necessary.
- f. In addition, all faculty members ($\geq 50\%$ FTE) at the rank of Assistant Professor, regardless of track, shall be evaluated in a comprehensive manner during the third or fourth year in rank, in accordance with [Administrative Policy Statement 1022](#), which states, "The comprehensive review is a critical appraisal designed to identify a candidate's strengths and weaknesses in sufficient time to allow promising candidates to improve their records before the evaluation for [promotion or] tenure."
 - i. The comprehensive early career review is intended to be advisory to the faculty member and to their chair and career mentors. It should provide specific and helpful feedback about a faculty member's career development and progress toward promotion or tenure. An important purpose of the review is to help the candidate identify and remedy any deficiencies before the formal review for promotion. Each faculty member shall be informed by the chair or their designee of the results of the evaluation.
 - ii. Associate Professors must receive ongoing mentorship and comprehensive performance reviews to identify their strengths and weaknesses and to assist them to develop a plan for academic success, which may include a pathway to the rank of Professor.
- g. Each faculty member shall have access to all performance evaluation documents in their file, including the summary of the comprehensive early career review, letters of recommendation for promotion or award of tenure written by the chair or the DEC and all other information, with the exception of letters of recommendation solicited from outside the faculty member's department, which are to be treated as confidential to the extent provided by law.
- h. At the time of an initial appointment, and at the time of any substantive change in the faculty member's job responsibilities, the department chair shall provide each member of the faculty with a Letter of Offer (LOO) describing the nature and terms of their appointment, including the salary and the type, duration, and conditions of the appointment.
- i. A candidate for promotion or award of tenure shall be entitled to submit to the Dean any material or information for submission to the FPC which they feel will be helpful in its deliberations. The faculty member also may submit to the Chancellor and the President any additional information that they feel may be helpful in the second and third levels of review.
- j. In the event of a decision not to reappoint, promote or grant tenure, the candidate shall be informed expeditiously by the department chair.

- k. If an Assistant Professor in the Tenured and Tenure-Eligible track who holds a limited appointment is not recommended for reappointment, or when the "time-clock" has expired, or if the proposed promotion is not approved, the faculty member shall be provided notice in writing by the chair that their appointment will not be renewed. Notice must also be provided to faculty members holding indeterminate appointments if their appointment will be converted to at-will or will not be continued for reasons other than available funding or inclusion in the budget. In all cases, notice must be provided in accordance with [Campus Administrative Policy 1029](#), which state that three months' notice of non-reappointment is required for faculty members in their first year of service at the University, and six months' notice is required for faculty members who have 1-3 years of service. One year's notice is required for faculty members after three or more years of service.
- l. If a candidate so requests, the Dean or Chancellor or their designee shall, in a confidential conversation, advise the candidate of the reasons that contributed either to a recommendation not to reappoint or grant tenure, or to the reversal at any level of a department's recommendation to promote or award tenure.
- m. A candidate for the award of tenure, or for reappointment or promotion in the Tenured and Tenure-Eligible Track shall be entitled to appeal to the CU System Faculty Senate Grievance Committee if the candidate feels that the procedures described herein have not been appropriately followed at any stage of the recommendation or review process. Faculty in the Clinical Practice and Research Professor Tracks denied reappointment or promotion can request a review by the Dean, as specified in [Campus Administrative Policy 1019A](#).
 - i. While procedural errors per se may entitle a candidate to proper reconsideration as herein provided, such errors shall never be used as the justification for personnel recommendations not otherwise justified on the basis of performance and need.
 - ii. The System Faculty Senate Grievance Committee shall not substitute its judgment about an individual's merit for that of other committees and administrators. They shall promptly report any procedural deficiencies to the Chancellor or their designee and the Dean, who shall reinstitute the review process at the point at which the procedural deficiency occurred.
- n. In order to facilitate continuing faculty development, each tenured faculty member shall receive a comprehensive peer review and evaluation at least once every 5 years after the award of tenure. This evaluation will be conducted in accordance with existing post-tenure review procedures ([Administrative Policy Statement 1022](#) and [Campus Administrative Policy 1049A](#)). The faculty member shall be informed orally and in writing by the department chair of the results of the evaluation, which shall become part of the faculty member's personnel file.
- o. All faculty members are expected to uphold the SOM's standards for professional conduct, as codified in these Rules, the Professionalism Code of Conduct, Faculty Promise, and Teacher-Learner Agreement. Professionalism is considered in annual performance evaluations for all SOM faculty members, and professionalism is also considered during reviews for promotion and awards of tenure. Unprofessional conduct identified during annual performance reviews may lead to a "below" or "not meeting" expectations rating and subsequent requirement to participate in a Performance Improvement Agreement. Additionally, unprofessional conduct, especially if it is repeated, may lead to an assessment and evaluation by the Office for Faculty Relations (OFR), the entity designated for this purpose by the SOM. OFR is committed to upholding the professionalism standards of the SOM, addressing unprofessional conduct, helping faculty members and other members of the community reflect and self-correct, while also ensuring accountability. OFR is

also committed to recognizing faculty members, staff and trainees who are demonstrating outstanding professionalism. As part of responding to reports of unprofessional conduct, OFR may issue Letters of Expectation or Letters of Discipline and may make referrals to the department chairs or other supervisors, the Office of Equity, the Colorado Physician Health Program, behavioral health specialists, or other relevant offices.

J. Sabbatical Assignments

After six years of service to the SOM on a full-time appointment in the Tenured and Tenure-Eligible or Clinical Practice tracks, faculty shall be eligible for sabbatical assignment. Faculty members whose appointments are less than 100% (0.5 – 0.99 FTE) are also eligible for sabbaticals; the required years of service before a first sabbatical and then the interval before subsequent sabbaticals will be adjusted accordingly. For the purposes of sabbatical eligibility under Regent policies, the Clinical Practice track is considered a “specialty track.” In all cases, faculty members must have attained the rank of Associate Professor or Professor before qualifying for a sabbatical. In accordance with [Administrative Policy Statement 1024](#), “a sabbatical is a privilege granted by the university for the advancement of the university, subject to the availability of resources. A sabbatical assignment is an important tool in developing academic scholarship and is a time for concentrated professional development. It is expected that the faculty member shall use the sabbatical assignment in a manner that shall enhance [their] scholarly and/or teaching competence and potential for leadership and service to the university, as well as to advance the primary unit's program goals.”

All sabbatical assignments are subject to the availability of adequate funding and a positive recommendation by the department chair, Dean, Executive Vice Chancellor for Academic and Student Affairs, and Chancellor or their designee.

The Board of Regents grants final approval. Eligible faculty members seeking approval for a sabbatical must submit a specific plan, and review and approval of such plans shall be conducted in accordance with University and campus policies.

ARTICLE III. FUNCTIONS AND DUTIES OF STANDING COMMITTEES

A. Committee on Admissions

The Admissions Committee is the final decision-making committee that is responsible for the selection of entering MD and Medical Scientist Training Program (MSTP) students. The Admissions Committee is composed of at least 20 voting members, the majority of whom are members of the faculty of the SOM. Medical students and community members may also be appointed as voting members of the committee. The chair of the Admissions Committee is a full-time faculty member nominated by the Admissions Committee and Assistant Dean of Admissions who does not hold an appointment in the Dean's office that reports directly to the Dean. The chair of the Admissions Committee is autonomous and does not report to the Dean in this role. Alternatively, this position can be divided into two co-chair positions. The position of chair or co-chair of the committee is elected by the voting members of the committee for a two-year term, renewable for additional terms by a vote of the committee. Full-time faculty members of the committee who have had a minimum of one year's experience on the committee are eligible for consideration as chair. Committee members are selected through self-nomination, nomination by department chairs, or recruitment by the Admissions Committee chair or Assistant Dean of Admissions.

Voting members of the Admissions Committee serve for terms of one year and are eligible for reappointment if approved by the Admissions Committee chair and the Assistant Dean of Admissions. Only elected or appointed members, or invited guests, may attend meetings of the Committee on Admissions.

The Admissions Committee votes on medical school candidate selection. All committee meetings, materials, and deliberations are confidential. The Assistant Dean of Admissions is a non-voting member of the Admission Committee and all sub-committees of the Admissions Committee. For individual admissions decisions, a quorum for voting requires at least 10 votes with the majority being faculty.

The Admissions Committee has full and final authority to select members of the entering class and to fill vacancies that may occur in any of the classes. The decisions of the Admissions Committee are final; the Dean does not participate in, nor seek to influence, any aspect of medical school admissions decisions.

The subcommittees of the Admissions Committee include the Screening Subcommittee, the Interview Subcommittee, and the Background Check Review Subcommittee. Members of each subcommittee are appointed by the Assistant Dean of Admissions and consist of current faculty members, retired faculty, alumni, community physicians, other community members and stakeholders, current medical students, and residents or fellows. The role of the Screening Subcommittee is to make decisions regarding which applicants receive secondary applications and which applicants receive an interview. The Interview Subcommittee is charged with interviewing selected applicants, and the Background Check Subcommittee is responsible for review of background checks of students accepted to the SOM.

B. Curriculum Steering Committee

The Curriculum Steering Committee (CSC) is responsible for the oversight, design, implementation, integration, evaluation, review, and revision of the medical school curriculum. With appropriate faculty input, the CSC will: 1) oversee the medical education program as a whole, including design, integration, evaluation and continuous quality improvement; 2) guide, review and approve course, block, and pillar content as well as educational formats; 3) systematically establish the evaluation procedure for curriculum and faculty as well as assessment of students; 4) focus on helping achieve specific curricular outcomes associated with graduating superior physicians; 5) periodically review and amend educational policies; and 6) recommend, facilitate, and develop procedures to ensure that suggested changes to

the curriculum are implemented. The CSC will work closely with the Senior Associate Dean for Education and the Assistant or Associate Deans for Education as well as all other curricular development faculty and the Office of Student Life to guide, revise and implement changes and foster continuous quality improvement. The CSC will present a report to the Faculty Senate annually.

CSC membership includes broad faculty and student representation: pre clerkship and post clerkship faculty members; pillar directors; LIC directors; clinical and foundational science content directors; clinical and basic science chairs; physician educators and advisors from the community; medical students from each class; MSTP students; directors of mentored scholarly activity; the Center for Advancing Professional Excellence; the Compass program; a Faculty Senate representative; the associate deans of the Colorado Springs and Fort Collins branch campuses; and representatives of all deans involved with medical education.

C. Student Promotions Committee

The Student Promotions Committee is responsible for all actions related to medical student academic status, including, but not limited to, promotion, graduation, dismissal, and extended programs. The Student Promotions Committee may also review reports of unprofessional behavior that are referred from the Student Professionalism Committee. The Student Promotions Committee reports to the Senior Associate Dean of Education. The Committee shall consist of eight members representing both basic science and clinical departments, plus one student member, who will be a fourth-year student selected by the Medical Student Council. The Committee shall have a chair who is elected by the committee members. Members are appointed by the Senior Associate Dean of Education for staggered three-year terms with reappointment at the Senior Associate Dean's discretion. The Associate Dean for Student Life and the Assistant Deans of Student Affairs shall be ex-officio members.

Only elected or appointed members, or invited guests, may attend meetings of the Student Promotions Committee. However, a student appearing before the committee may choose to be accompanied by one advocate, who must be a faculty member, a staff member, or a fellow student. This advocate is not allowed to speak on behalf of the student at the meeting. The student may also request to be represented by the Associate Dean for Student Advocacy who is the only person, in addition to the student, who may speak on behalf of the student. As this is not a legal proceeding, attorneys and their representatives may not attend these meetings.

D. Student Research Committee

The Student Research Committee shall be composed of faculty members with experience in guiding Mentored Scholarly Activities (MSAs) and other student research projects. The chair of the Student Research Committee will be the Assistant Dean for the Post-Clerkship Phase and will report to the Senior Associate Dean for Education.

The Student Research Committee is responsible for: general oversight of the [MSA program](#); ensuring quality and consistency of MSAs and other student research activities, such as research electives, the Research Track, the Research Trail, and summer research opportunities across the branch and regional campuses; overseeing the responsibilities of MSA mentors; and implementing a system for informing students of research opportunities and for connecting students with appropriate faculty mentors. The Student Research Committee will also ensure that resources are made available to students to help them understand critical research topics, such as navigating Institutional Review Boards and conducting comprehensive literature reviews. Finally, the Student Research Committee will develop programs to recognize student scholarly activities.

The chair will work closely with the Senior Associate Dean for Education and the other Assistant and Associate Deans for Education as well as other curricular development faculty leaders and the Office of Student Life in its efforts to oversee and improve the MSA program

and research opportunities and mentorship for students. The committee will present a report to the Curriculum Steering Committee annually.

E. Committee for Continuous Quality Improvement of the MD Program

The Committee for the Continuous Quality Improvement (CQI) of the MD Program is responsible for ongoing review of the LCME requirements and accreditation standards that apply to the SOM. Specifically, the committee will be responsible for oversight of standards and elements that extend beyond the scope of the curriculum. These elements include areas such as the administration of the SOM, faculty development and accountability, governance of the SOM, resources for students, and clinical partnerships. In collaboration with the Senior Associate Dean for Faculty, the CQI Committee will be chaired by the Senior Associate Dean of Education and will meet at least quarterly. The committee will be supported by the LCME accreditation specialist and will call upon standing committees within the School for any necessary changes or areas of monitoring

F. Graduate Medical Education Committee

The Associate Dean for Graduate Medical Education (GME) serves as chair of the Graduate Medical Education Committee (GMEC) and reports to the Senior Associate Dean of Education at the Sponsoring Institution (the University of Colorado School of Medicine). The GMEC reports to the Executive Committee. Voting members include program directors from the following ACGME residency programs: Anesthesiology; Family Medicine; Internal Medicine; Neurological Surgery; Obstetrics/Gynecology; Ophthalmology; Orthopedic Surgery; Pathology; Pediatrics; Radiology; Surgery; and Urology. Voting members shall also include: one Quality Improvement/Patient Safety Officer or designee; the Senior Associate Dean for Education (ex-officio); peer-selected resident and fellow representatives from the Housestaff Association and the Gold Humanism Honor Society; and GME hospital liaisons from the University of Colorado Hospital, Children's Hospital Colorado, Denver Health and Hospital Authority and the Rocky Mountain Regional VAMC. The following individuals shall also be voting members of the GMEC: the Family Medicine Vice-Chair of Education; an Internal Medicine fellowship representative; an Emergency Medicine-designated faculty representative; and a surgical fellowship representative. In order to carry out portions of the GMEC's responsibilities, additional GMEC members may be appointed, as determined by the GMEC.

The following GMEC sub-committees are established in order to address required GMEC responsibilities and submit reports and recommendations to GMEC for approval: 1) Clinical Learning Environment Subcommittee; 2) Education Subcommittee; and 3) Program Oversight Subcommittee. Subcommittee membership includes, but is not limited to, program directors, faculty and peer-selected residents or fellows. GMEC Subcommittee chairs and vice chairs shall serve as voting members of the GMEC.

The GMEC: 1) Oversees all ACGME-accredited and non-accredited residency and fellowship programs' educational programs, accreditation and compliance with ACGME and other regulatory requirements; 2) Demonstrates effective oversight of underperforming programs through a special review process that establishes criteria for identifying underperformance and results in a report that describes the quality improvement goals, the corrective actions, and the process for GMEC monitoring of outcomes; and 3) Demonstrates effective oversight of CUSOM's accreditation through review and approval of an Annual Institutional Review (AIR), using specific performance indicators defined by ACGME.

G. Continuing Medical Education Advisory Committee

The Continuing Medical Education Advisory Committee, shall be appointed by the Dean in consultation with the Associate Dean for Continuing Medical Education and the Faculty Officers. This committee shall consist of at least five members and shall include representatives from the clinical and basic science departments and the volunteer faculty of the SOM, as well as one member representing the physicians of Colorado who are not directly affiliated with the School. The committee shall provide advice and consultation to the Associate

Dean for Continuing Medical Education, shall review the activities of the Office for Continuing Medical Education on an annual basis, and shall provide the Faculty Senate a yearly report.

H. Rules and Governance Committee

A Rules and Governance Committee shall be appointed by the Dean, in consultation with the Faculty Officers. The committee shall be composed of at least five members of the full-time faculty. Members shall be appointed for three-year terms, and members may be reappointed to subsequent three-year terms. The chair shall be appointed by the Dean. The committee shall conduct an ongoing review of the rules and governance of the SOM and shall receive and evaluate suggestions for changes to the rules and governance. In addition, at least once every seven years the committee shall conduct a comprehensive review of the SOM's standards and procedures for promotion and tenure. To assist in this review, and to ensure appropriate representation of faculty clinicians, teachers and scientists, the Dean may appoint additional ad hoc members to the Rules and Governance Committee. The committee shall bring recommendations for changes in the rules and governance to the Faculty Senate and to the Executive Committee, for approval. Notice of any proposed changes to the Rules of the School of Medicine shall then be presented to the Executive Faculty for final approval.

I. Committee on Adjoint Appointments and Promotions

The Committee on Adjoint Appointment and Promotions shall consist of at least nine members appointed by the Dean or their designee, in consultation with the Faculty Officers. At least three members of the committee shall be members of the full-time faculty. At least one member of the faculty based at each of the approved medical school branch campuses shall serve as voting members of the committee.

The committee shall review applications for appointment or promotion to the ranks of Adjoint Associate Professor, Adjoint Professor, and Adjoint Professor with Distinction and forward these recommendations to the Dean. This committee does not review adjoint appointments or promotions for individuals who are employees of other universities, national research institutes, or other agencies or institutions. Those appointments are reviewed and approved by the primary sponsoring department. The Committee on Adjoint Appointments and Promotions shall be a rotating committee, with a membership of three years duration. Members may be reappointed to additional three-year terms. The chair will be appointed by the Dean or their designee and may be reappointed to one-year renewable terms.

J. Health Opportunities and Professional Engagement (HOPE) Council

The Health Opportunities and Professional Engagement (HOPE) Council shall be appointed by the Dean to advise and support efforts that advance the SOM's mission to foster environments in which everyone feels seen, valued, and respected. The council shall focus on initiatives that promote access, opportunity, professional development, and excellence across the education, research, clinical, and community service missions of the School. The chair of the council shall be appointed by the Dean. The members of the council shall include: at least one faculty representative from SOM Admissions, Student Affairs, Faculty Affairs, and Graduate Medical Education; leadership within the Office of Health Opportunities and Professional Engagement; thread director(s) of the cultural competency and medicine and society curricula; two medical students (one each from the pre-clinical and clinical years); one graduate student; two residents or fellows; at least two members of the full-time faculty; a representative of the adjoint faculty; and at least two community representatives. The students shall be appointed by the Dean after consultation with the officers from the classes. The Dean may appoint other members who have experience and interest in advancing the mission of the council. In addition, any individual member of the Executive Faculty may indicate to the Dean their interest in, and qualifications for, this committee. Members shall be appointed to serve terms of three years, and members shall be eligible for reappointment to similar terms.

K. Faculty Promotions Committee (See Article II.H.2.b)

ARTICLE IV. REQUIREMENTS FOR ADMISSION, PROMOTION, AND GRADUATION FROM THE SCHOOL OF MEDICINE

The requirements for admission, promotion and graduation from the SOM shall be established by a collaborative process that includes the Dean, the Senior Associate Dean for Education and faculty leaders.

ARTICLE V. FACULTY PERSONNEL POLICIES

For detailed information about the University's faculty personnel policies, faculty members should refer to the [laws](#) and [policies](#) of the Regents, University of Colorado [administrative policy statements](#), and campus [administrative policy statements](#).

ARTICLE VI. CAMPUS-WIDE FACULTY GOVERNANCE

The campus-wide faculty governance body is the Anschutz Medical Campus Faculty Assembly. A copy of the Faculty Assembly's [by-laws](#) is available to all faculty. SOM at-large representatives to the Campus Faculty Assembly are selected by the Faculty Senate.

ARTICLE VII. AMENDMENTS

Any proposed amendments to the Rules of the School of Medicine shall be presented first to the Dean and the Rules and Governance Committee. Then, proposed amendments shall be brought to the Faculty Senate and to the Executive Committee for approval. Proposed amendments shall then be presented to the Executive Faculty for approval. An electronic ballot will be distributed to the Executive Faculty with a summary of the proposed rules changes. A reply from 250 or more members of the Executive Faculty shall be considered a quorum, and the affirmative vote of two-thirds of those voting is needed to change the Rules of the School of Medicine. Throughout the process, proposed amendments will be reviewed by the Chancellor or their designee to ensure that they comply with Board of Regents Law and Policy and the campus and CU System administrative policies. As required by [Regent Policy 5.D.3](#), [Administrative Policy Statement 1022](#), and [Campus Administrative Policy 1049A](#), amendments to these Rules require final approval by the Dean and the Executive Vice Chancellor for Academic and Student Affairs.

APPENDIX 1A – PROMOTION CRITERIA

Teaching Criteria

(see the Office for Faculty Affairs website for specific examples in each domain)

Recognition of excellent performance as a teacher or mentor by students, other learners, and peers, are all considered during the promotion or tenure review process, as is curriculum leadership and innovation, and educational scholarship.

Excellent

- Regularly assumes greater than average share of teaching duties in classroom, laboratory, clinical or community settings.
- Regularly assumes greater than average share of administrative or service responsibilities, including committee leadership, related to teaching.
- Demonstration of educational leadership.
- Consistently receives excellent or outstanding teaching evaluations.
- Nomination for, or receipt of, honors or awards for excellence in teaching or mentorship.
- Recognition as an outstanding and influential role model for students, fellows, residents, or other trainees.
- Record of successful mentorship of students, residents, fellows, or other faculty.
- Leadership, development of, or significant contributions to courses, service-learning activities, mentoring or career development programs, assessment of learning outcomes, or other instructional materials or educational programs.
- Consistent record of advancing inclusive excellence, improving population health, engaging with communities, and supporting access to education and care in the health professions.
- Consistent participation in national educational activities.
- Senior Fellow or Legacy member in the CU SOM Academy of Medical Educators.
- Evidence of teaching scholarship.

Meritorious

- Participation in the teaching or mentoring activities of the department, school, campus, or university.
- Regular participation on committees that focus on teaching in the health professions or addressing challenges in education.
- Meritorious teaching evaluations from students, trainees, and peers.
- Development or redevelopment of teaching materials for students or other trainees, continuing education courses, or other faculty training.
- Participation in workshops or training programs that support respectful and inclusive workplace and learning environments.
- Participation as a mentor on a training grant.
- Participation in workshops or training programs to improve one's teaching or mentoring effectiveness.
- Associate or Fellow in the CU SOM Academy of Medical Educators.

Clinical Activity Criteria

Clinical activity includes direct patient care, leadership of clinical programs, health care innovations, quality improvement activities, and activities that focus on strengthening access to resources for all communities and population health.

Excellent

- Regularly assumes greater than average share of clinical duties.
- Regularly assumes greater than average share of administrative responsibilities in support of the patient care programs of the department, hospital, school or university.
- Demonstration of clinical services or skills representing a unique niche within a specialty that required additional training, responsibility, and knowledge beyond those normally applied for within the specialty.
- Documented evidence of consistent outstanding patient outcomes, patient referrals from a wide region, contributions to inter-professional healthcare teams, or successful collaborations across disciplines.
- Creative, active participation in the evaluation of the effectiveness of care.
- Recognition for excellence in clinical activity.
- Demonstration of effective leadership at the site of clinical practice.
- Leadership of, or significant contributions to, workshops or training programs that address challenges surrounding inclusiveness in clinical settings.
- Substantive leadership role at the regional, national, or international level in organizations related to clinical practice.
- Recognition by trainees, professional colleagues, or patients for possessing the attributes of an excellent clinician.
- Nomination for, or receipt of, honors or awards for clinical excellence or professionalism.
- Evidence of health care-related scholarship.

Meritorious

- Active and effective participation in clinical activities of the academic unit.
- Participation on committees or task forces that support the patient care programs of the department, hospital, school, or university.
- Demonstration of clinical skills that are highly effective.
- Letters of support from referring health professionals or from colleagues at the site of practice.
- Invitations to speak on clinical topics on campus or in the local community.
- Participation in activities that improve one's clinical skills or promote health care quality, address variations in care and outcomes, and improve patient safety.
- Participation in workshops or training programs that address challenges surrounding inclusiveness in clinical settings.
- Regular participation in community collaborations that strengthen clinical partnerships.

Research or Other Scholarly Activity Criteria

All faculty in the Tenured and Tenure-Eligible track are required to participate in scholarship, as broadly defined. All scholarship implies creativity. The central purposes of scholarship and creative work are to deepen understanding and to advance and disseminate knowledge. The products of scholarship must be in a format that can be evaluated, which would normally mean a written format, but could include web-based or digital formats.

Excellent

- A consistent level of peer-reviewed or other funding for research awarded in a competitive manner over a sustained period, including grants related to the education of health professionals, healthcare innovation or quality improvement, or public health.
- Principal investigator, Co-Principal, or Co-investigator status on competitive peer-reviewed research grants.
- Designs and directs a basic, clinical, translational, program evaluation, or other research program.
- Demonstrated evidence of originality as an investigator, with evidence that the faculty member's research has deepened understanding in relevant scientific discipline(s) and has advanced knowledge or the practical application of that knowledge.
- Success as a team scientist (e.g., significant independent intellectual contributions, such as contributing critical skills, expertise and effort, that result in sustained competitive research funding or successful publication, including middle authorship).
- An ongoing record of publications in peer-reviewed journals.
- An ongoing record of publications (e.g., investigative reports, reviews, case studies, policy reports, white papers or other written or electronic products of scholarship) related to clinical health care and quality, health professions education, or population health.
- Visiting professor activities at other institutions.
- Research presentations at national or international meetings.
- Development of patents.
- Documented leadership of, and outcomes from projects that have improved the quality of care, cost-efficiency, access, or patient safety.
- Development of new techniques, therapies, clinical guidelines, clinical information systems, patient care practices or pathways, or health care delivery systems that have improved the health of patients or populations.
- Consistent record of creative scholarship in the visual arts, literature, music or other domains reflecting on the human experience of health, illness or healthcare.
- Development of innovative educational activities, teaching methods, educational technologies, or programming to support learners or faculty, recognized outside the primary department.
- Leadership of or substantive contributions to the development of certifying, credentialing, or qualifying examinations for students, residents or fellows or practicing clinicians.
- Nomination for, or receipt of, honors or awards for research or scholarship.

Meritorious

- Authorship of papers in peer-reviewed journals or other disseminated publications.
- Serving as a collaborator in a basic science, clinical, translational or other research program.
- Co-investigator status on grants, including grants related to basic science, clinical, or translational research, health profession education, and healthcare innovation.
- A principal and sustained role in the management of a research program with external funding.
- Research presentations at institutional, local, or regional meetings.
- Regular participation on committees that focus on the research programs of the SOM.

- Documented interventions and outcomes from participation in activities that promote health care quality, cost-efficiency, access or patient safety within the institution.
- Documented interventions and outcomes from improvement or expansion of an existing course or curriculum.

Leadership and Service Criteria

Service includes professional and administrative activities that support one's discipline or that advance the clinical, teaching, research, or community engagement missions of the institution. Promotion to all ranks and awards of tenure require contributions in the leadership and service domain, noting that clinical activity is considered a form of service.

Meritorious

- Service on, or leadership of, committees or task forces within the program, division, department, school, campus, or university or non-profit organizations aligned with the mission of the medical school.
- Service to local, state, national, or international organizations.
- Participation in initiatives that promote inclusive excellence, broaden access and opportunity, and foster a respectful and supportive environment for all members of the academic and clinical community.
- Service as an article reviewer, editor, or editorial board member for clinical, educational, or scientific journals.
- Service as a member of a scientific study section.
- Appointment to leadership positions within the institution.
- 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.

Excellent

- Nomination for, or receipt of, awards for exemplary service, as defined above.

APPENDIX 1B – PERSONALIZE PROMOTIONS MATRIX TEMPLATE

Item	Level	Criterion	Page or Line Numbers		
			CV	Cover Letter	Supplemental Materials
TEACHING (T)					
T1	E	Regularly assumes greater than average share of teaching duties in classroom, laboratory, clinical or community settings.			
T2	E	Regularly assumes greater than average share of administrative or service responsibilities, including committee leadership, related to teaching.			
T3	E	Demonstration of educational leadership.			
T4	E	Consistently receives excellent or outstanding teaching evaluations.			
T5	E	Nomination for, or receipt of, honors or awards for excellence in teaching or mentorship.			
T6	E	Recognition as an outstanding and influential role model for students, fellows, residents, or other trainees.			
T7	E	Record of successful mentorship of students, residents, fellows, or other faculty.			
T8	E	Leadership, development of, or significant contributions to courses, service-learning activities, mentoring or career development programs, assessment of learning outcomes, or other instructional materials or educational programs.			
T9	E	Consistent record of advancing inclusive excellence, improving population health, engaging with communities, and supporting access to education and care in the health professions.			
T10	E	Consistent participation in national educational activities.			
T11	E	Senior Fellow or Legacy member in the CU SOM Academy of Medical Educators.			
T12	E	Evidence of teaching scholarship. (Only required here if not submitting a Research or Other Scholarly Activity Matrix)			
T13	M	Participation in the teaching or mentoring activities of the department, school, campus or university.			
T14	M	Regular participation on committees that focus on teaching in the health professions or addressing challenges in education.			
T15	M	Meritorious teaching evaluations from students, trainees and peers.			
T16	M	Development or redevelopment of teaching materials for students or other trainees, continuing education courses, or other faculty training.			
T17	M	Participation in workshops or training programs that support respectful and inclusive workplace and learning environments.			
T18	M	Participation as a mentor on a training grant.			
T19	M	Participation in workshops or training programs to improve one's teaching or mentoring effectiveness.			
T20	M	Associate or Fellow in the CU SOM Academy of Medical Educators.			
CLINICAL ACTIVITY (C)					
C1	E	Regularly assumes greater than average share of clinical duties.			
C2	E	Regularly assumes greater than average share of administrative responsibilities in support of the patient care programs of the department, hospital, school, or university.			
C3	E	Demonstration of clinical services or skills representing a unique niche within a specialty that required additional training, responsibility, and knowledge beyond those normally applied for within the specialty.			
C4	E	Documented evidence of consistent outstanding patient outcomes, patient referrals from a wide region, contributions to inter-professional healthcare teams or successful collaborations across disciplines.			
C5	E	Creative, active participation in the evaluation of the effectiveness of care.			
C6	E	Recognition for excellence in clinical activity.			
C7	E	Demonstration of effective leadership at the site of clinical practice.			
C8	E	Leadership of, or significant contributions to, workshops or training programs that address challenges surrounding inclusiveness in clinical settings.			
C9	E	Substantive leadership role at the regional, national, or international level in organizations related to clinical practice.			
C10	E	Recognition by trainees, professional colleagues, or patients for possessing the attributes of an excellent clinician.			
C11	E	Nomination for, or receipt of, honors or awards for clinical excellence or professionalism.			
C12	E	Evidence of health care-related scholarship. (Only required here if not submitting a Research or Other Scholarly Activity Matrix)			
C13	M	Active and effective participation in clinical activities of the academic unit.			
C14	M	Participation on committees or task forces that support the patient care programs of the department, hospital, school, or university.			
C15	M	Demonstration of clinical skills that are highly effective.			
C16	M	Letters of support from referring health professionals or from colleagues at the site of practice.			

Item	Level	Criterion	Page or Line Numbers
C17	M	Invitations to speak on clinical topics on campus or in the local community.	
C18	M	Participation in activities that improve one's clinical skills or promote health care quality, address variations in care and outcomes, and improve patient safety.	
C19	M	Participation in workshops or training programs that address challenges surrounding inclusiveness in clinical settings.	
C20	M	Regular participation in community collaborations that strengthen clinical partnerships.	
RESEARCH OR OTHER SCHOLARLY ACTIVITY (S)			
S1	E	A consistent level of peer-reviewed or other funding for research awarded in a competitive manner over a sustained period, including grants related to the education of health professionals, healthcare innovation or quality improvement, or public health.	CV
S2	E	Principal investigator, Co-Principal, or Co-investigator status on competitive peer-reviewed research grants.	
S3	E	Designs and directs a basic, clinical, translational, program evaluation, or other research program.	
S4	E	Demonstrated evidence of originality as an investigator, with evidence that the faculty member's research has deepened understanding in relevant scientific discipline(s) and has advanced knowledge or the practical application of that knowledge.	
S5	E	Success as a team scientist (e.g., significant independent intellectual contributions, such as contributing critical skills, expertise and effort, that result in sustained competitive research funding or successful publication, including middle authorship).	
S6	E	An ongoing record of publications in peer-reviewed journals.	
S7	E	An ongoing record of publications (e.g., investigative reports, reviews, case studies, policy reports, white papers or other written or electronic products of scholarship) related to clinical health care and quality, health professions education, or population health.	
S8	E	Visiting professor activities at other institutions.	
S9	E	Research presentations at national or international meetings.	
S10	E	Development of patents.	
S11	E	Documented leadership of, and outcomes from projects that have improved the quality of care, cost-efficiency, access, or patient safety.	
S12	E	Development of new techniques, therapies, clinical guidelines, clinical information systems, patient care practices or pathways, or health care delivery systems that have improved the health of patients or populations.	
S13	E	Consistent record of creative scholarship in the visual arts, literature, music or other domains reflecting on the human experience of health, illness or healthcare.	
S14	E	Development of innovative educational activities, teaching methods, educational technologies, or programming to support learners or faculty, recognized outside the primary department.	
S15	E	Leadership or substantive contributions to the development of certifying examinations for students, residents or fellows or assessments of practicing clinicians for certification or credentialing.	
S16	E	Nomination for, or receipt of, honors or awards for research or scholarship excellence.	
S17	M	Authorship of papers in peer-reviewed journals or other disseminated publications.	
S18	M	Serving as a collaborator in a basic science, clinical, translational or other research program.	
S19	M	Co-investigator status on grants, including grants related to basic science, clinical, or translational research, health profession education, and healthcare innovation.	
S20	M	A principal and sustained role in the management of a research program with external funding.	
S21	M	Research presentations at institutional, local, or regional meetings.	
S22	M	Regular participation on committees that focus on the research programs of the SOM.	
S23	M	Documented interventions and outcomes from participation in activities that promote health care quality, cost-efficiency, access or patient safety within the institution.	
S24	M	Documented interventions and outcomes from improvement or expansion of an existing course or curriculum.	

Item	Level	Criterion	Page or Line Numbers		
LEADERSHIP AND SERVICE (Se)			CV	Cover Letter	Supplemental Materials
Se1	M	Service on, or leadership of committees or task forces within the program, division, department, school, campus, or university or non-profit organizations aligned with the mission of the medical school.			
Se2	M	Service to local, state, national or international organizations.			
Se3	M	Participation in initiatives that promote inclusive excellence, broaden access and opportunity, and foster a respectful and supportive environment for all members of the academic and clinical community.			
Se4	M	Service as an article reviewer, editor, or editorial board member for clinical, educational, or scientific journals.			
Se5	M	Service as a member of a scientific study section.			
Se6	M	Appointment to leadership positions within the institution.			
Se7	M	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.			
Se8	E	Nomination for, or receipt of, awards for exemplary service, as defined above.			

APPENDIX 2 – FACULTY TRACKS

Tenured and Tenure-Eligible Track[^]

Traditional balance of activities; basic scientists, clinician-scientists, and clinician-educators.

Ranks available:

Instructor
Sr. Instructor*
Assistant Professor
Associate Professor
Professor*

Clinical Practice Track

Faculty members whose principal focus is direct patient care or program leadership.

Not Eligible for Tenure.

Ranks available:

*Instructor of Clinical Practice
Sr. Instructor of Clinical Practice
Assistant Professor of Clinical Practice
Associate Professor of Clinical Practice
Professor of Clinical Practice*

Research Professor Track

*Grant-funded scientists with limited teaching and service activities.
Not Eligible for Tenure.*

Ranks available:

*Research Scientist
Sr. Research Scientist
Assistant Research Professor
Associate Research Professor
Research Professor*

Adjoint Faculty

*Practitioners or other professionals who provide clinical care or engage in public health practice, teaching, or research on a part-time (less than 0.5 FTE) or volunteer basis. **Previously known as Clinical Faculty Series.***

Not Eligible for Tenure.

Ranks available:

*Adjoint Instructor
Adjoint Sr. Instructor
Adjoint Assistant Professor
Adjoint Associate Professor
Adjoint Professor
Adjoint Professor with Distinction*

*Contributions at this rank will not be considered in applications for tenure.

[^]Although faculty employed by affiliate hospitals are not eligible for tenure, they are welcome to promote within this track.