

Qualifications, Standards, and Guidelines for Faculty Appointments, Promotion and Granting of Tenure for the CWRU School of Medicine

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CASE WESTERN RESERVE
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School of Medicine

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1. Introduction: School of Medicine Faculty

The faculty consist of educators, researchers, scholars, and clinicians working across four major academic medical center campuses, the Health Education Campus, in addition to those working at the main campus of CWRU. Bilateral affiliation agreements with CWRU specify faculty appointments and scholarship linked to the SOM for University Hospitals Health System (UHHS), MetroHealth System (MHS), Louis Stokes Cleveland Department of Veterans Affairs Medical Center (VA), and Cleveland Clinic Health System (CCHS). Faculty with primary appointments in the basic science departments and the centers of the SOM are recruited and employed directly by CWRU. Faculty are appointed and promoted by CWRU upon recommendation of their academic chair, the SOM CAPT, and the dean. In addition, all full-time faculty require approval by the CWRU Board of Trustees. All faculty of the SOM advance and impact the discipline of medicine through excellence in education, research, and/or community benefit to collectively improve health.

This document serves as a guideline to better define the characteristics for faculty appointment and promotion of medical center-based faculty located throughout our 4 hospital extensive health systems (HS) (CCHS, MHS, UHHS, VA) including their clinical networks. The purpose of this document is to update the expectations of faculty appointment, promotion, and tenure across the entire faculty of the SOM, compliant with norms of CWRU. By doing so, the SOM will advance scholarship across the field of medicine.

The medical center-based faculty of the School of Medicine (full and part-time) are recruited through medical center academic departments. The number of medical center-based faculty has expanded over the past decade and now are the majority of faculty of the SOM. When applying for faculty status or for promotion, the medical center-based faculty are asked to document and demonstrate their academic scholarship by our university and the SOM in terms of classic academic parameters listed in SOM guidelines that focus on research, service and education in terms used for university appointments.

Unfortunately, the classic academic parameters do not highlight the practice and teaching of medicine as a dominant part of the performance assessment of clinical faculty who spend their efforts in these endeavors.

For instance, in 2004, when the Cleveland Clinic Lerner College of Medicine was established “as a distinct entity for research and education of CWRU within the School of Medicine,” the specification established that within the School of Medicine of CWRU there is a distinct category of medical center-based faculty who focus on education and research composed primarily of physician practitioners who will have faculty appointments thus reflecting their expertise in clinical medicine.

Part-time “special” faculty, as defined in the CWRU Faculty Handbook, includes the appointment of individuals who participate in the mission of the SOM through their activities and contributions to education, research, service, and or excellence in clinical scholarship that contributes to and impacts the SOM. These individuals may have another full-time appointment at another institution, be employed by an affiliated health system outside of the Cleveland health care ecosystem or make

special research collaborations with our faculty. They may be educators, collaborators, or independent researchers linked by collaboration and project or program to an academic department or center (basic science or hospital-based) of the SOM.

The SOM bases appointment and promotion on the unifying overarching concepts of scholarship, authorship, and impact. Cumulatively these combine to reflect a faculty member's accomplishments. The term **scholarship** reflects, in its broadest terms, activities that advance the field of a medical or scientific discipline, the practice of a medical specialty, or an area of prevention and implementation of new methodologies. Scholarship may encompass research, education, or translational advancement in clinical medicine across the full spectrum of medicine. **Authorship** reflects the many ways in which information is reviewed, authenticated, and distributed to advance the field, and extends beyond peer reviewed publications. **Impact** is of high quality when it is paradigm shifting, practice changing, or policy informing. Throughout these activities, educational efforts and mentoring are essential synergies that advance the specialty, have impact, and create recognition.

The SOM additionally incorporates **service**, a term included in CWRU promotion standards, focused, in the context of clinical medicine, as service activities that support the advancement of clinical practice, for instance, service on hospital-based committees, tumor boards, and review panels, participation in community outreach and education programs. Other service activities are represented by leadership positions that support education, research, and clinical programs including coordination of care programs within health care systems. Such activities are often under-represented in published peer-reviewed documents yet may result in alternative documents authored by the faculty member, such as policies, procedures, guidelines, care maps, educational materials (including CME), electronic media, and presentations that promote high quality clinical care, share practice standards, teach others, and review the evidence-based standards for best practice. In clinical medicine, this definition of service is valued as academic work or as clinical scholarship that promotes institutional values and advancements in the field of medicine. Service, however, is not a term that physicians use as they advance their clinical specialty through innovation patient care or education.

2. Classification of Appointments

An appointment shall be classified as initial, renewal, or continuing (nontenure appointments are renewed annually). An appointment shall be classified as full-time or part-time and is aligned with the Faculty Handbook.

A. Full-time Faculty Appointments and Titles

Faculty appointment and promotion tracks are designed to align with the interests, scholarship and goals of each individual faculty member and are not viewed as hierarchical tiers but reflect various ways in which faculty contribute to the fabric of the school and support its strategic plan and mission, while contributing scholarship to the field of medicine. Significant long-standing and high impact contributions are pursued across the entirety of the faculty of medicine.

To accommodate the spectrum of faculty scholarship that contributes to the fabric of the SOM, there are three tracks: Academic Tenure Track¹, Academic Track², and Clinical Academic Track².

Faculty Titles for all tracks include: Professor, Associate Professor, Assistant Professor, Senior Instructor and Instructor. Academic Tenured and Tenure Track, Academic Track and Clinical Academic Track do not appear in faculty titles.

Prior to each appointment and promotion, faculty will elect, with affirmation by their departmental chair, one track to pursue and be reviewed by their Committee on Appointments, Promotions, and Tenure (CAPT). Request for change in track will not alter review period guidelines after appointment at the rank of Assistant Professor or above.

At the time of appointment, faculty are encouraged to review the School of Medicine's [Strategic Plan](#) and point out how they contribute to that Plan. The SOM established guidelines for team science (noted below) may be applied for promotion and tenure and these will be considered when specified by the applicant.

Appointments may be made at any level, and promotions must proceed sequentially with one exception--a faculty member serving as an instructor may skip over the move to senior instructor and move directly from instructor to assistant professor.

Appointment to a. Instructor: For appointment to the rank of instructor or senior instructor (by definition a non-tenure track appointment) the candidate should hold a Master's degree or higher, often plus a practice certification (such as physician assistant, genetic counselor, registered dietician). The candidate should have evidence of at least one of the following: competence in teaching, practice/professional expertise, or research, potentially including holding a training grant. For the senior instructor position, the candidate should demonstrate evidence of providing teaching, research or service beyond the entry-level.

a. Academic Tenured and Tenure Track

The Academic Tenured and Tenure track (Tenure Track) is currently described and available to faculty who engage in sustained and cumulative discovery, innovation, and/or translational research-focused activities that impact the field of medicine with peer reviewed publications, external grant support, recognition for expertise in research or education in areas of the biomedical disciplines.

¹ Faculty Handbook: Article I Membership of the University Faculty Section A. Tenured or tenure-track faculty members

² Faculty Handbook: Article I Membership of the University Faculty Section B. Non-tenure track faculty members

i. Tenure Track Faculty Defined

Tenured faculty appointments, although affirmed by the dean and faculty member annually, are of indefinite duration until retirement. Tenure Track appointments are typically guided by the career status at the time of appointment or promotion such as:

- Discovery research into basic mechanisms of biology, physiology, the basis of disease, diagnosis and treatment, and population health.
- Sustained efforts in clinical investigation including for example externally supported investigator-initiated, national, or industry supported clinical trials; that may include therapeutic, diagnostic, and interventional methods.
- Population-oriented implementation science and evaluation of health-related topics in populations.
- Scholarship contributions of educators who advance methods and content of teaching and education programs through the continuum of medical careers.
- Mentoring activities, especially in the context of career advancement.
- Service in the form of participation and leadership in institutional and regional and national committees, review bodies, invited and elected positions, other activities in the appropriate specialty area, study section, boards, and editorial activities contribute to the academic impact of faculty performance and contributions.

ii. Required SOM Basic Science appointment for all Tenure Track Faculty:

PhDs, and MDs and related terminal degree holders in basic and clinical departments may be appointed into this track upon the recommendation of their department chair and review by the SOM Appointment Promotion and Tenure (APT) committee. All tenure track appointments based in a hospital department are required to be recruited in a manner compliant with CWRU SOM and University recruitment policies. All tenure track appointments recruited into a clinical department are required to secure a secondary appointment in a SOM basic science department approved in writing by the basic science chair as a co-signatory of the offer letter.

b. Academic Track (Non-tenure Track)

Academically oriented investigators in the academic track pursue the same level of scholarship focused activities, but without the tenure expectations noted in Section A. Faculty in the Academic Track are experts in their field committed to the development and advancement of the field through their contributions in research, education, and service.

i. Academic Track Faculty Defined

Metrics for Academic Track faculty include peer reviewed publications, external grant support, and a sustained effort to promote innovation in their field, including performance as exemplary teachers and educators and leaders to advance local and global health. Evidence of substantial teaching can be recognized through authorship and development of educational materials, electronic media, lectures, simulations, and preclinical and bedside teaching, with evidence of excellence and impact in training through trainee reviews, teaching awards, excellence in clinical practice with evidence of regional and national recognition.

ii. Service Expectations

This may be in the form of participation in institutional, regional, and national committees, review bodies, invited and elected positions, other activities in the appropriate specialty area, study section, boards, and editorial activities that contribute to the academic impact of faculty performance and contributions.

iii. Clinical Scholarship

When clinical scholarship (refer to Clinical Academic Track) contributes to an individual's accomplishments in the academic track, it should be noted.

c. Clinical Academic Track (Non-Tenure Track)

i. Clinical Academic Track Faculty Defined

The Clinical Academic Track intentionally supports the career advancement of faculty who focus predominantly on excellence in clinical medicine, and contribute to scholarship through participation in clinical innovation, quality improvement and education programs of medical students, residents, fellows, and colleagues; and are recognized for clinical excellence in their field of practice. These faculty have responsibilities in the practice of medicine and participate in scholarship through their practice as educators, leaders, coordinators, as experts to whom patients are referred from a large geographic area or are recognized innovators in developing improvements of the practice in their specialty. Faculty may exhibit excellence in clinical research, but typically not as an independent investigator. Eligible professionals include physicians, PhDs, and other similar positions with "terminal" advanced degrees in disciplines who focus on clinical and educational activities such as Psychologists, Medical Physicists, Physician Assistants, Nurses (DNP), and with appointments in a SOM department, etc.

ii. Distinctions between Academic and Clinical Tracks

Distinctions between "Academic" and "Clinical" Tracks should be guided by the individual alignment towards the appropriate track in terms of the SOM defined metrics, areas of emphasis, expectations for each component regarding the tracks defined above, and aspirations of the faculty member to achieve the goals of the track. While the arbiter for review is the SOM's committee for APT, most individuals will be successfully assigned by the academic chair well before APT committee review. Transition between tracks is allowed [with justification](#).

The descriptions below provide examples of activities contributing to excellence in the Clinical Academic Track, guided by the career status at the time of appointment or promotion. The primary distinctive of the Clinical Academic Track is the emphasis on clinical and educational **impact** with reduced focus on research at the level of independent investigation, peer-reviewed publications, and extramural grants. Thus, the following activities and metrics may be considered to evaluate the clinical and educational impact of faculty with primary medical center-based appointments:

- [leadership of and supervision of, committees, tumor boards, review panels, and](#)

- education programs;
- authorship contributions to books, book chapters, clinical reviews, policies, procedures, clinical guidelines, care maps or plans, or podcasts;
- teaching that includes authorship and development of educational materials, electronic media, lectures, simulations, and preclinical and bedside teaching, leadership of SOM “Blocks;”
- excellence in training through trainee reviews, teaching awards;
- excellence in clinical practice with evidence of regional and national or international referral base;
- service in the form of participation in and leadership of institutional and regional and national committees, review bodies, invited and elected positions, other activities in the appropriate specialty area, study section, boards, and editorial activities;
- involvement and leadership in developing innovations in care, participation in national efforts to develop innovation in care through participation, leadership and decision making, including FDA testimony, industry medical advisory boards, national specialty treatment guidance boards within one’s specialty, participation in and PI status of clinical trials (commercially supported, nationally driven and investigator initiated); and
- evidence-based presentations that promote quality, share clinical practice standards, introduce novel approaches, teach others, and provide reviews of the evidence behind best practices;
- and mentoring activities, especially in the context of career advancement.

d. Selection of Track

The chair and the faculty member should together select the appropriate track. While these three tracks overlap in attainment of scholarship and impact, and there will be some degree of a “judgement” call in the assigned track, the level of focus for the faculty member on achieving a level of scholarship and impact should be the driving force. The Clinical Academic Track is the more likely option for those more heavily involved in the practice of medicine (including administration and education) and the academic track is the likely option for those more involved in research, education, scholarship, leadership, and peer reviewed discovery. At the time of formal appointment and promotion, the track and rank will be indicated, however, the SOM does not require that track (or tenure status) be included in faculty correspondence or public-facing information to accompany professorial rank.

e. Transfer between Tenure and Non-Tenure Tracks

i. Transfer from the Non-Tenure track to the Tenure Track

The appointment into the tenure track should normally occur at the time of appointment at the level of assistant professor and may occur at the rank of associate professor or professor. The date of appointment closest to July 1 of the year signifies the start of the “tenure clock”. If transfer to the tenure track takes place later, the initial faculty appointment date at the rank of assistant professor or higher becomes the default start of the tenure clock, and requests for extension must be made to the Dean for consideration and must be approved by the Provost.

ii. Transfer from the Tenure Track to the Non-Tenure Track.

Faculty on the Tenure Track may transfer to the Non-tenure Track any time before the start

of their 9th pretenure year (also referred to as the mandatory tenure year). Faculty are required to state in writing to their department chair and the dean. Once this letter is received, the faculty will be issued a new appointment on the non-tenure track. Once a faculty transfers from the tenure track to the non-tenure track, they are ineligible to transfer back to the tenure track.

B. Tenure

The award of tenure is proposed by the department chair and reviewed by the department or hospital APT committee, SOM APT committee and forwarded for approval by the dean, and then to the provost, president, and Board of Trustees of CWRU. The consideration of the award of tenure is made on separate review by the CAPT based on the expectations of ongoing significant and sustained contributions to scholarship, and discovery in the School of Medicine. Tenure considerations are based on the outlook for sustained accomplishment trajectory, expectation of ongoing excellence in their field with substantive, long term and ongoing impact on the field and contribution to the School and University through externally supported research for a research-based investigator or in recognized innovation in education for outstanding educators. Clinical investigators, clinical scientists, and physician scientists would be expected to have a significant number of publications, evidence of external grant support, and impact on the field.

The responsibility of tenure resides in the SOM and is maintained by CWRU. Most medical center-based faculty will not pursue a tenure appointment as part of their condition for employment. The basic purpose of tenure is to provide the assurance of academic freedom throughout the university. Another important purpose of tenure is to attract and retain outstanding faculty through continued commitment of the university to these individuals. Tenured faculty members are protected explicitly against dismissal or disciplinary action because their views are unpopular or contrary to the views of others within the guidelines of academic professionalism of CWRU, and compliance with federal regulations. Non-tenure-eligible colleagues shall derive protection by general extension of these principles of academic freedom. When awarded, academic tenure rests at the constituent faculty level (SOM).

CAP review of tenure track appointments, promotion and award of tenure of hospital-based department faculty who are PhDs require written review and recommendation from the chair or director of the basic science SOM based department or type A center in which the candidate is required to have a secondary appointment, since the SOM is responsible for the interminable nature of the award of tenure.

The award of academic tenure to a faculty member is a career commitment which grants that faculty member the right to retain their appointment without term until retirement. The appointment of a tenured faculty member may be terminated only for just cause. In the event that a tenured faculty member's school, department, or other unit of the university in which the faculty member's appointment rests is closed or reduced in size, the university shall make all reasonable attempts to provide a tenured faculty member with an appointment of

unlimited duration until retirement.

Examples of just cause for the termination of any faculty member (tenured, tenure track, non-tenure, or special) include (a) grave misconduct or serious neglect of academic or professional responsibilities as defined through a fair hearing; (b) educational considerations as determined by a majority vote of the entire constituent faculty of the affected individual which lead to the closing of the academic unit of the university or a part thereof in which the faculty member has a primary appointment; and (c) financial exigent circumstances that force the university to reduce the size of a constituent faculty in which the faculty member has a primary appointment.

A tenured faculty member may be terminated for financial exigent circumstances only after all faculty members who are not tenured in that constituent faculty have been terminated in the order determined by the dean of the School of Medicine in consultation with the department chairs, the Faculty Council and other faculty members.

a. The Pre-Tenure Period

The pre-tenure period in the School of Medicine is nine years. Each faculty member whose appointment leads to tenure consideration shall be considered for tenure no later than in the ninth year after the date of initial appointment at the rank of assistant professor or higher. For faculty in the Academic Tenure Track, the final year of eligibility for SOM tenure is in the 8th year of appointment so that a decision by the SOM CAPT can be rendered and if tenure is not awarded, a final year of appointment letter can be transmitted by June 30. Should a faculty member request tenure review in their ninth year, and not receive tenure recommendation, their faculty appointment terminates on June 30 of that year.

A faculty member in the tenure track may request extensions to the pre-tenure period. The extensions may be (1) requested by exceptionally worthy candidates in the event of unusual constraints in the university, or part or parts thereof, which would prevent tenure award at the end of the normal period; or (2) requested for the purpose of compensating special earlier circumstances disadvantageous to a candidate's tenure consideration (such as serious illness family emergency, maternity, or extraordinary teaching or administrative assignments, or national events such as COVID); or (3) upon written request by the faculty member within one year after each live birth or after each adoption, an extension of one year shall be granted by the provost to any faculty member who will be the primary care giving parent.

Extensions should be requested as soon after the occurrence of the relevant circumstances as practicable [practical], ordinarily not later than one year prior to the normally scheduled expiration of the pre-tenure period. Extensions requested under (1) or (2) above require request by the faculty member, review, and a recommendation by the department's committee on appointments, promotions, and tenure, the department chair, and the dean, and approval by the provost. Pre-tenure extensions may not be used to defer tenure consideration of a faculty member more than three years beyond the normal pre-tenure

period except for extensions made under (3) above.

For faculty members whose tenure consideration has not produced a tenure award during the pre-tenure period, further appointment is normally restricted to one year. In exceptional cases, individuals who failed to receive tenure may be converted to the non-tenure eligible track on recommendation of the department Committee on Appointments, Promotions, and Tenure, the department chair, the Committee on Appointments, Promotions and Tenure of the School of Medicine, the dean of the School of Medicine, and the approval of the provost. Such appointments will specify financial support for the position.

The number, nature, and duration of pre-tenure period extensions made to an individual faculty member's pre-tenure period is not considered by the CAPT when reviewing that faculty member for award of tenure or promotion.

b. Tenure Guarantee

When awarded, academic tenure rests at the constituent faculty level rather than at the departmental level. The award of academic tenure to a faculty member is a career commitment which grants that faculty member the right to retain their appointment without term until retirement. This commitment includes a salary guarantee to which the University obligates itself. The salary shall be at a level determined by the dean of the relevant school or college to be reasonable compensation for the roles and responsibilities of the tenured faculty member. The appointment of a tenured faculty member may be terminated only for just cause. In the event that a tenured faculty member's school, department, or other unit of the University in which the faculty member's primary appointment rests is closed or reduced in size, the University shall make all reasonable attempts to provide a tenured faculty member with an appointment of unlimited duration until retirement. Award of tenure for faculty based in the School of Medicine who have 100% salary sourced by the SOM will have three components to their salary: base, merit, and incentive. These components will be adjusted by annual performance review, but the base salary will not be reduced.

c. Special Faculty Appointments and Titles

Special Faculty Appointments include a prefix and must be included when referencing the CWRU appointment publicly. Special Faculty are ineligible for tenure.

i. Adjunct Clinical Part-Time Faculty

Physicians and researchers seeking faculty appointment who work at affiliate-hospitals and institutions who align with CWRU-recognized clinical or research academic departments but who are located outside Cleveland's medical ecosystem (and thus not primarily involved in activities that benefit the SOM in education and research) may have faculty appointments as part-time faculty for their contributions in collaborative clinical, education or research programs with other SOM faculty.

The term "part-time" is a CWRU designation of participation in the activities of the university

the SOM but is not linked to university employment status. The part-time designation is used to recognize faculty who contribute to the mission of the school through specific research, leadership, or educational efforts in their locale. The efforts of these individuals impact the school directly and through their affiliate hospitals with contributions to scholarship in a limited capacity such as a specific training or collaborative research activity.

All individuals proposed for part-time appointments will make a request outlining their contributions to the SOM upon recommendation of their academic department chair.

Part-time Faculty titles include: Adjunct Clinical Professor, Adjunct Clinical Associate Professor, Adjunct Clinical Assistant Professor and Adjunct Clinical Instructor

ii. Research Faculty

Research faculty appointments are issued for CWRU employed full-time faculty at the time of their initial hire for an interim period up to one year until approval of the full appointment by the Board of Trustees. Titles for these appointments are based on the proposed rank of the faculty member as specified in the CWRU offer letter.

iii. Visiting Faculty

Visiting faculty appointments are issued for specified terms of one year or less than one year and can be full- or part-time. Rank is determined at the request by the chair, support of the dean and approval by the University.

iv. Emeritus Faculty

Emeritus faculty are appointed by the Board of Trustees as described in the Faculty Handbook, Chapter 3, Part II, Articles VI. In the School of Medicine, faculty that have held the rank of assistant professor, associate professor, or professor or at these ranks modified by the term clinical adjunct are eligible for emeritus appointment. Meritorious service in CWRU activities benefiting the School and their field for at least ten years is required.

d. Multiple Appointments

Within the confines of CWRU, faculty appointment that applies to more than one constituent faculty (School or College of CWRU), or to more than one department, or to an administrative office as well as an academic unit, the appointment may be identified either (1) as a primary-secondary constituent faculty appointment or (2) as a joint appointment.

i. Primary-Secondary Appointments.

For a primary-secondary appointment arrangement, one constituent faculty or department shall be identified as the primary appointment and the other as secondary. Responsibility for the initiation of consideration of re-appointment, promotion, award of tenure, or termination shall rest with the primary unit.

a. Secondary Appointments and Promotions

Secondary appointments at all ranks shall be recommended by the chair of the secondary department, require the concurrence of the primary department chair, and may be made at

the discretion of the dean.

b. Secondary Appointments in the Division of General Medical Science

For secondary appointments and promotions in the Division of General Medical Sciences for Type A Centers (DGMS), the dean shall, prior to reaching a decision, also consider the recommendation of the Divisions committee on appointments, promotions, and tenure. This paragraph will govern secondary appointments in the department of biomedical engineering principally based in the School of Medicine and promotions of faculty holding such secondary appointments. The dean shall inform the Dean of Case School of Engineering of any such appointments and promotions.

ii. Joint Appointments

Faculty with joint appointments have full rights as a faculty member in both constituent faculties and departments. The notice of appointment shall be issued jointly by the two constituent faculties or departments. Consideration of appointment, reappointment, promotion, and/or tenure for joint appointment arrangements shall be as described in the Faculty Handbook sections pertaining to such appointments.

e. Appointment Terms

All faculty of the SOM will receive, review, and accept an annual reappointment letter. Appointments with tenure shall be of unlimited duration until retirement, subject only to termination for just cause (defined below). Non-tenured full-time faculty members who receive a non-reappointment letter maintain an appointment for the period as specific in the Faculty Handbook. Part-time faculty appointments are reviewed by the chair and appointed annually.

3. Qualifications for Appointments and Promotions in all Tracks

Full-time and part-time faculty appointments are reviewed and approved by the department APT committees and full-time senior faculty appointments require review by the SOM APT committee and otherwise abide by the SOM approved guidance for appointments, promotion, and tenure; and are reappointed by the dean and CWRU annually. Department or Hospital APT committees are required to review and make recommendations on all faculty promotions. If the promotion is to a full-time senior rank (Associate Professor or Professor), the SOM APT committee must also review the application.

A. Professionalism

All faculty are expected to be exemplary citizens of our academic community and to participate actively and appropriately in peer and staff interactions, training, mentorship, interactions across institutions, and with our CWRU community. At the time of appointment and promotion, each candidate should identify their contributions to professionalism and their chair will be asked to comment on any outstanding or resolved concerns related to professional performance. The expectations of professionalism of faculty are found:

<https://case.edu/medicine/faculty-and-staff/office-faculty/professionalism>

B. Evaluating Faculty scholarship, authorship, and impact to determine rank

Scholarship, authorship, and impact attributes of the school of medicine faculty include written and verbal original contributions such as those focused on:

- Understanding of a broad range of investigative strategies of biological pathways that contribute to health, disease, development, and aging.
- Population-based, EMR-data base, policy-focused, or environmental-focused assessment of processes that contribute to social determinants of health, their biological effectors and or environmental impact on health and disease, development, and aging.
- Paradigm-shifting, clinical practice changing and public policy-influencing academic contributions.
- Efforts that promote commercial development of recent discoveries, particularly those originating from the work of the faculty member with IP, patents, and licenses, or including roles on expert advisory panels and positions that are intended to disseminate discoveries that aim to benefit human health.
- Educational and training efforts, in the broadest scope, in the life sciences that advance career efforts in medicine-related disciplines, train pipeline students along the continuum, provide community education programs that advance human health, mentor career advancement in medicine, and evaluate medical and biomedical research education and training programs. Authorship of training guidelines, standards, presentations of fundamental aspects of specialty training and state of the art advancements; chairing and participation in practice review and patient review boards are examples of contributions to the education efforts in the physicians' area of expertise.
- Efforts to train and support future workforce development through mentoring of students (BS, MS, PhD, MD), residents or junior colleagues, encouraging professional development of peers and through development of novel programs that inspire future health care professionals to pursue a career in academic medicine.
- Service activities, as they relate to academic and education scholarship would include health care leadership both within academia, government, or for-profit entities; roles on internal and external academic, clinical (including hospital-based) and or commercial advisory boards; study sections; editorial boards; public and discipline-specific policy boards.
- Awards for performance and accomplishment from internal (school, hospital, university) and external entities. Organizations that provide such awards from outside of the institution could be a source of external letters of accomplishment and perspective. Award categories should include those related to the area of expertise of the candidate, as well as discoveries, education, community service, leadership, and may be recognize any aspect of faculty activity.

For promotion of rank, accomplishments should be clear in the candidate's CV and personal statement. As a general rule, the level of accomplishment will be taken into consideration by the APT committees and expected to be the basis upon which external letters provide

guidance, as to the applicability of appointment or promotion.

a. Academic Tenured and Tenure Track

- i. Assistant professor presents evidence of a record of scholarly activity and the potential to advance in a field of research. Generally, the candidate should have received a doctoral degree and completed at least several post-doctoral or fellowship years. Assistant professors in the tenure track should have some teaching experience and show a commitment to assuming teaching duties.
- ii. Associate professor presents evidence of excellent research and recognition of the research program at a national level. Candidates must demonstrate an established reputation, as individual investigators or within a research team, for original ideas, innovations, and contributions. A high level of teaching effectiveness and service contributions is also required.
- iii. Professor presents evidence of sustained excellence, enhanced recognition of research contributions, and a national or international reputation. Candidates must demonstrate an established reputation, as individual investigators or within a research team, for original ideas, innovations, and contributions. A high level of teaching effectiveness and service contributions in the medical school's educational programs and in service on SOM or CWRU committees is also required.

b. Academic Track (Non-Tenure Track)

- i. Assistant Professors presents evidence of expertise in their field of study and should have received a doctoral degree and completed several postdoctoral or fellowship years. Individuals should have some teaching experience and show a commitment to assuming teaching responsibilities. Faculty in clinical practice should be board-certified or board eligible.
- ii. Associate professors present evidence of considerable recognition locally, and regionally as a clinical expert and prominent referral resource in their clinical area of expertise with considerable evidence of scholarship and educational activity using the components of evidence outlined above.
- iii. Professors would fulfill the expectations of associate professor level appointments or promotion and have evidence of more mature and durable, local, regional, national, and even international impact in their area of expertise, both by written documentation in their CV (including positions, presentations, publications, and external support), as well as arm's length external letters and support letters from prior trainees.

c. Clinical Academic Track (Non-Tenure Track)

- i. Assistant Professors presents evidence of expertise in their field of study and should have received a doctoral degree and completed several postdoctoral or

fellowship years. Individuals should have some teaching experience and show a commitment to assuming teaching responsibilities. Faculty in clinical practice should be board-certified or board eligible.

- ii. Associate Professor places greater emphasis on the mature and durable recognition of clinical, education and/or service excellence and ongoing contributions and impact to clinical scholarship and/or educational activity. Commonly, such evidence of contributions to the field includes regional or broader recognition which may be noted in multiple ways. The APT committee will consider local and/or regional recognition as reflected in leadership roles, high impact clinical programs, regional referral pattern, including education programs (including program directors), and or advancement of the field. When presenting local impact as the primary consideration for promotion, the magnitude and likely durability of the impact will be especially important factors. This may be reflected in statements by the candidate and their chair and corroborated by external reviewers.
- iii. Professors in the Clinical Academic Track should include a record of continued interval excellence in their field with ongoing interval contributions to excellence in education and/or clinical practice service in their area of expertise with examples of impact on their field in domains such as:
 - Internal reviews of educational accomplishments and/or leadership roles
 - External letters indicating support for clinical expertise
 - Clinical practice referral breadth
 - Contributions, local, regional, and national to advances in clinical medicine in their discipline
 - Other examples of significant clinical impact

Evidence of contributions to the field and recognition by experts in the field may be noted in many different ways. The APT committee welcomes evidence of national and even international recognition and will consider regional recognition as reflected in leadership roles, high impact programs including educational programs, and or advancement of their field. When presenting regional impact as the primary consideration for promotion, the magnitude and likely durability of the impact will be especially important factors. This should be reflected in statements by the candidate and their chair and corroborated by external reviewers.

C. Evaluations of part-time faculty scholarship, authorship, and impact to determine rank

The School of Medicine values the contributions to clinical excellence, clinical training, contributions to the advancement of medicine and improvements in health and prevention for humankind locally, regionally, and across the world. Placing such activities in the context of an academic school of medicine, and its surrounding academic medical centers in Cleveland, creates the dichotomy of expectations that is best managed through a part-time appointment for those outside of the immediate medical centers in Cleveland. The majority of

individuals will have a clinical appointment **outside** one of the four affiliated hospitals of the School of Medicine of CWRU (CC, UH, MH, VA) yet may be part of the health systems of these hospitals and are welcomed members of the faculty for their contributions in clinical excellence and clinical training (including MD, MS, MSA, PA and similar tracks). In some instances, expertise will extend to impact on policy, national standards for medical care, medical and healthcare leadership, and health outcomes, training, and practice. Other individuals may participate in specific research projects or programs. Some may have part-time appointments with the SOM to fulfill specific activities in service or education. Often, individuals will have a primary full-time appointment at another institution.

Part-time Faculty may align with either the academic track or clinical academic track. Appointment and promotion criteria will be similar to that of full-time academic track in terms of reputation, peer review publications and grant support, and other reputational accomplishments but, since most of these activities will take place outside of the purview of the SOM, attestation of these accomplishments will be reviewed on the basis of the CV, personal statement, and chair recommendation. Similarly, Appointment and promotion criteria will be similar to that of full-time Clinical Academic Track in terms of local and regional recognition as a clinical expert and have evidence of participation in education and service activities, with supportive evidence of verbal and written scholarship. Since these activities will take place outside of the purview of the SOM, attestation of these accomplishments will be reviewed based on the CV, personal statement, and chair recommendation. Documentation in the CV of scholarship in education and field of practice will be the basis of review.

Individuals with a full-time appointment at another academic institution will be afforded a rank identical part-time appointment position upon documentation and request as an administrative adjustment by the CAPT and review by the dean.

4. Process for Full-time Faculty Appointment and Promotion

All appointment and promotion assessments begin with a request made by the faculty candidate to the department chair.

A. Process for Full-time Faculty Appointments and Promotions

The dean shall submit recommendations for appointments and promotions to the ranks of associate professor and professor and the granting of tenure concerning full-time faculty with primary appointments based in the departments of the School of Medicine (including those faculty in the Department of Biomedical Engineering with appointments principally based in the School of Medicine) presented by the department chairs or other persons as designated by the dean or initiated by other means as outlined in the Faculty Handbook of Case Western Reserve University, Chapter 3.I.1, to the Committee on Appointments, Promotions and Tenure C-APT) of the School of Medicine. The CAPT shall consider the documented evidence relating to each candidate and, following the qualifications and standards set forth in Exhibit I to these Bylaws, shall report its affirmative or negative recommendations to the Steering Committee of the Faculty Council. Each recommendation shall be reported promptly to the

academic chair of the candidate's department. The candidate shall be informed by the academic chair of the committee's recommendation. The academic chair or other nominator may appeal a negative recommendation by notifying the chair of the Committee on Appointments, Promotions, and Tenure (CAPT) of the School of Medicine. Appeals may be made in writing or in person. Written documentation of the appeal and the response of the Committee on Appointments, Promotions, and Tenure must be appended to the candidate's file. If the appeal to the Committee on Appointments, Promotions and Tenure is not successful, the academic chair or other nominator or the affected faculty member may bring to the attention of the Steering Committee of the Faculty Council, through a detailed, written submission, any alleged errors in procedure or non-adherence to the current published guidelines for appointments, promotions, and tenure. The Steering Committee of The Faculty Council may investigate the allegations to the extent it deems appropriate, may review all other candidates' files as it deems necessary, and may request the appearance of persons with knowledge of current and prior procedures and policies of the CAPT. A written report of the results of any investigation by the Steering Committee shall be appended to the candidate's file. All files will be forwarded to the dean after the Committee on Appointments, Promotions and Tenure, and, if applicable, the Steering Committee of the Faculty Council have discharged their responsibilities as specified above. The dean shall transmit the file, with added comments if desired, to the president of the university; for informational purposes, the dean will also provide the Dean of the Case School of Engineering with complete copies of the files of candidates in the Department of Biomedical Engineering with appointments principally based in the School of Medicine.

B. Process for Part-time Faculty Appointments and Promotions

Special faculty appointments and promotions modified by the prefix adjunct clinical shall be recommended by the department chair and may be granted by the dean. For these adjunct appointments and promotions at the ranks of assistant professor, associate professor, and professor, the dean shall, prior to reaching a decision, also consider the recommendation of the department's committee on appointments, promotions, and tenure. The dean shall also consider letters of reference concerning the appointment and promotion of faculty to the ranks of adjunct associate professor and adjunct professor.

C. Department and Medical Center Review

The packet is reviewed and voted on with tally and comment by the departmental or medical center-based APT committee. An affirmative vote by the dCAPT is required for an appointment to advance. If the dCAPT is not supportive of a faculty's promotion, the faculty may elect to self-initiate per the Faculty Handbook. With an affirmative vote, this committee and Office of Faculty (with assistance in identifying appropriate external reviewers from the candidate screened by the department chair) will solicit letters from institutional colleagues, secondary department chairs, trainees and other independent external evaluation letters from arm's length senior faculty or experts who can comment on candidate trajectory and as well as reflect on research, academic and or clinical impact. External referees will be asked to review the candidate's scholarship, authorship and impact outside CWRU and in the field. Local service and CWRU educational activities will be reviewed by the DCAPT and SOM CAPT.

Details on the scope of external reviews are noted below “under external letters of evaluation.” External reviewers may be solicited by the departmental chair, dean and from the SOM APT, but letters, for which confidentiality will be maintained, should be addressed to, and seen only by the SOM APT and the dean.

D. Referee Letters

All requests are expected to have support from the academic department chair who has reviewed the applicant’s CV and accomplishments and provided guidance as to the rationale for the appointment or promotion, including the quality of clinical excellence, teaching, scholarship, and service.

To evaluate educational activities, letters from prior trainees, and a summation report as of the quality of education (including learner evaluations) from institutional education leaders who have reviewed trainee feedback is required.

External letters should comment on the candidate’s performance, accomplishments in scholarship, authorship and impact and trajectory in research, education, clinical practice, and other service. However, review of local education and training activities will not be requested unless the faculty member indicates a significant role in regional and national education programs.

When requested, external letters are requested from arm’s length senior faculty or experts who will comment on the faculty member’s accomplishments and trajectory in their field. These reviews will be viewed in the context of the faculty’s track, rank, area of expertise and impact on research, and as appropriate, clinical specialty. External reviewers may be solicited by the departmental chair, dean and from the SOM APT, but letters, for which confidentiality will be maintained and addressed to the SOM APT.

Letter requests:

- Request in coordination with DCAPT review
- Referee review format to include brief description in bullet or paragraph responses:
 - state own status in the field as a reviewer
 - state knowledge of candidate and prior association
 - review of scholarship, authorship and impact and the expected trajectory
 - request 1 page review
 - for out of country candidates at least one letter from a US reviewer

a. For Academic Tenured and Tenure Track Appointments

Assistant: 3 letters from mentors and advisors

Associate: 6 letters external letters

Professor: 6 letters external letters

b. For Academic Track Appointments

Assistant: 3 letters from mentors and advisors

Associate: 6 letters external letters

Professor: 6 letters external letters

c. For Clinical Academic Track Appointments

Assistant: 3 letters from mentors and advisors

Associate: 6 letters external letters

Professor: 6 letters external letters

d. For Adjunct Clinical Part-time Appointments

Assistant: 3 letters from mentors and advisors

Associate and Professor: 3 letters

1 letter from a colleague currently at a different institution

1 letter from an independent arm's length expert in the field

1 letter from a US based clinician in the field

5. Documentation for consideration of advancement Request for appointment and promotion

a. Faculty Request for Appointment or Promotion.

The faculty member would request consideration of promotion to their chair and should specify continuity of or change to the Academic Tenure, Academic or Clinical Academic Track, and consideration as a team scientist, as appropriate for their situation. If the chair does not support the application, the faculty member may pursue an application directly through the SOM Office of Faculty with justification in their letter request for promotion. Promotion considerations include how the faculty member has made substantial contributions in the form of scholarship, authorship, and impact.

b. CV:

The SOM CV categories include all elements of scholarship, authorship and impact and will be used as the primary evidence, substantiated by documentation of education quantity and quality, leadership positions, lists of presentations and reviews, contributions to policies and educational materials.

For the Academic Track, special accomplishments not otherwise listed as positions, grants, publications of all forms, intellectual property, disclosures, patent applications, commercialization licenses and affiliations, should be separately listed in the CV and noted in the personal statement.

For the Clinical Academic Track, contributions to the area of clinical specialty and education within that specialty should be highlighted. Authorship of all clinical trials should be included, noting principal investigator role and whether the trial is investigator initiated as appropriate. Educators will complete the Educators Portfolio to accompany the CV. Honors, awards, and recognitions should be included.

A preferred CV style sheet with categories and order is provided to each applicant and available on the Office of Faculty website. [Curriculum Vitae \(CV\) Template](#)

c. Educator Portfolio.

While teaching for the CWRU School of Medicine is an expectation of all faculty. Those faculty know for their education scholarship and leadership must complete the Educators Portfolio to accompany the CV. It is highly recommended that all educators submit an Educator Portfolio to effectively convey the scholarship, authorship and impact of contributions in education at CWRU and beyond.

o Sample Education Portfolio

d. Personal Statement:

In 3 pages, the candidate should identify their key area of expertise, their accomplishments in scholarship, authorship, and impact (citing publications, internal hospital documents, web sites and the like) and their view of how the contributions they have made impact in their area of expertise. They should also comment in a forward-looking manner their strategic trajectory and priorities for academic/clinical and scholarship performance that extends their area of expertise more broadly over time and expanding from local to regional, and when applicable national, and perhaps international recognition and impact. When appropriate, ~~and~~ for team science consideration indicate instances of collaborators who are key to expectations and goals. In addition, faculty may highlight their involvement and contributions to diversity, equity and inclusion. Faculty should note the value of such specific contributions (select up to 5 high-impact contributions – authorship, guidelines, peer reviewed publications, inventions, commercialization efforts, and when achieved, paradigm shifting discoveries, practice changing observations and policy impacting findings).

For the Academic Track, faculty should include an up-to-date citation index and H factor which will be assessed by the committee within the considerations of rank, discipline of record and roles in teaching and service.

For the Clinical Academic Track, faculty should indicate their contributions to the field in their discipline, contribution to care systems improvement, their trajectory to maintain this impact and their contribution to the advancement of the discipline's practice and education.

e. Additional Statements

From time to time the Provost or Dean may request or provide an option for additional statements regarding special circumstances.

6. Special Process Considerations

A. Transfer of Senior Rank Faculty (Non-Tenure Track)

For candidates recruited at the level of associate professor or professor from another academic institution in the United States at rank, a formal appointment process described below, will be undertaken, but expedited with the following considerations:

- Current information from the candidate, including CV, personal statement, and letter

from the incoming chair as noted above

- Request for updated letters from the same individuals who provided independent external review for promotion at the prior institution. Additional letters will benefit and expedite review
- Letters from prior trainees
- Summary information regarding quality (with reviews) and quantity of educational performance activities at the prior institution

For individuals transferring with the award of tenure at the prior institution, the review of the award of tenure will be undertaken by the CAPT using the standards of the school of medicine, and cannot be assured at the time of offer, but can be reviewed prior to the start of the appointment.

B. Reinstatement of CWRU appointment within two years

Individuals returning to SOM, having held a prior appointment at rank from another institution within 2 years will be afforded expedited review by the SOM APT, upon request from the individual, documented with CV, and personal statement, letter from their incoming chair that includes position and support for faculty members scholarship activities, and a statement from the outgoing institution chair or dean that they depart in good standing and are not currently being investigated for misconduct.

7. Review of Qualifications and Standards for Appointments, Promotions and the Award of Tenure

Qualifications and standards for faculty appointments, reappointments, promotions, and granting of tenure shall be generally as stated in the Faculty Handbook of Case Western Reserve University. Specific qualifications and standards applicable to the School of Medicine shall be determined by the Faculty of Medicine and appended to these bylaws. These qualifications and standards shall be reviewed every five years by the Faculty Council.

Faculty ranks approved by the Board of Trustees will not be changed as a result of a change to these Qualifications and Standards.