

# Clinical Practice Track

The **Clinical Practice Track** is appropriate for faculty whose contributions to the missions of the School of Medicine center upon patient care, professional service, and/or activities in support of patient care. Clinical faculty in the School of Medicine, regardless of track, must exhibit excellence in clinical skills and participate in practice management and quality improvement. As faculty in the School of Medicine, **Clinical Practice Track** faculty are also expected to conduct their work in an academic manner, including teaching, which for faculty on this track, typically occurs in the course of their clinical duties. Research and scholarship are not a focus of faculty on this track, but are viewed positively.

*(Approved by VUSM Executive Faculty 6/19/13)*

**Criteria for Appointment or Promotion to the Rank of Associate Professor** Promotion to Associate Professor on the **Clinical Practice Track** is not based on time in rank, but rather is a function of demonstrated excellence in both clinical performance and professional contributions. Faculty can demonstrate achievement and excellence that warrant promotion in a variety of ways.

1. Sustained excellence in clinical performance, including but not limited to:

A. Peer evaluation of clinical performance (required for all promotions). This should provide evidence for excellence in clinical care in the candidate's field of specialty in dimensions such as:

- Medical knowledge, clinical judgment, and clinical skills
- Communication with other health professionals
- Compassion and respect for and communication with patients
- Dedication to and enthusiasm for patient care
- Professionalism and respect for colleagues, trainees, and allied health professionals

B. Delivery of high quality clinical care considered to be safe, timely, effective, efficient, patient-centered, and equitable

C. Performance on measures of patient and/or colleague satisfaction

D. Outstanding clinical productivity

E. Contributions to clinical services (i.e. informatics support, documentation, compliance and billing leadership)

F. Awards for clinical practice

G. Reputation for excellence (e.g. pattern of referrals, requests to provide clinical opinions on challenging cases, excellence in clinical outcomes)

H. Other contributions in the clinical realm that demonstrate excellence

2. Professional contributions that benefit the Department, School, patients, or the faculty member's field, expressed in one or more of the following domains:

A. Administration and Leadership. Examples of contributions may include, but are not limited to:

- Significant service on departmental or institutional committees (i.e. chair or special role)
- Significant contributions in an administrative or leadership role
- Directorship of clinical programs

B. Patient Outcomes and Quality Improvement. Examples include, but are not limited to:

- Participation in development of guidelines or critical pathways
- Development of programs or introduction of new methods
- Achievement in quality and process improvement projects/programs
- Consultation with industry, government, or other academic institutions

C. Education of Patients and Service to the Community. Examples include, but are not limited to:

- Service in community organizations that enhance health (e.g. health-related community-based organizations, campus-community partnerships that serve the community)
- Community service of a clinical nature

- Health related advocacy (e.g. testimony in local, state, or national government)

D. Service to the Field. Examples include, but are not limited to:

- Service or leadership roles in local, regional, or national professional organizations
- Delivery of continuing medical education or community education (e.g. presentations, media)
- Reviewing articles for academic journals

E. Academic Contributions. Examples include, but are not limited to:

- Excellence in teaching demonstrated by strong teaching evaluations or teaching awards
- Scholarly publications (i.e. case reports, contributions to manuscripts)
- Development and/or delivery of clinical education programs for students, professionals, or community
- Participation in clinical trials as an investigator/co-investigator, regular referral of patients
- Special contributions in other areas which further the mission of the Department, School, or University

Promotion to Associate Professor on this track may be considered when the faculty member has demonstrated sustained excellence in clinical performance and distinguished professional contributions in at least one domain (i.e. Patient Outcomes/Quality Improvement or Professional Service). Promotion to Associate Professor should be supported by evidence of a presence and reputation outside the Medical Center.

**Appointment and Promotion to Professor** Promotion to full Professor on the **Clinical Practice Track** may be considered when the faculty member has demonstrated sustained excellence in clinical performance and distinguished professional contributions in at least two domains or extraordinary contributions in one domain. Promotion to Professor must be supported by evidence of a presence and reputation on a regional or national level.

## Supporting Documentation

1. **Standardized Form of the Curriculum Vitae** The Committee on Faculty Appointments and Promotions has developed a **standard form of the curriculum vitae** that must be used

by faculty and departments in supporting recommendations for promotions and tenure. Use of the standard form will assure that all information needed by the committee is present and will expedite the review of recommendations.

**2. Documentation of Teaching Effectiveness** The **Documentation of Teaching Form** (PDF or MSWord or the [VUSM electronic educator's portfolio](#)) should be used to specify the teaching activities of the candidate on the **Clinical Practice Track** where appropriate. Specific assessments of the candidate's teaching effectiveness should be submitted in reference to the candidate's primary mode of teaching. Such assessments might include peer assessments by colleagues who have observed the teaching, or trainee assessments including student assessments as compiled by the Student Curriculum Committee, or those provided by individual trainees who have worked in a more direct relationship with the candidate (e.g. graduate students, residents, fellows).

**3. Letters of Evaluation** [Guidelines for Letters of Evaluation](#)