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**FACULTY APPOINTMENT AND ACADEMIC ADVANCEMENT:  
PROMOTION AND TENURE GUIDELINES AND EVALUATION CRITERIA**

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**FACULTY APPOINTMENT AND ACADEMIC ADVANCEMENT:  
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LSUHSC School of Medicine at New Orleans**

**Overview of Promotion and Tenure Guidelines**

The following general guidelines recognize that a faculty member functions in many spheres, and that *assessment for advancement must be individualized*. Promotion and tenure recommendations consider the following three basic categories of faculty activities: research and/or scholarship; teaching, education, and/or mentorship; and service and/or administration. The process seeks evidence of commitment to the fulfillment of the LSU-SOM mission in all three categories. Therefore, the promotion and tenure review process is meant to consider a faculty candidate's activities in these areas, and to assess their progress from the time of their appointment or their last academic promotion. It is important to note that academic advancement signifies the school's recognition that the faculty candidate is a worthy representative of the university. *While the promotion guidelines do not include adherence to the LSUHSC Code of Conduct as a specific criterion, the school expects that all faculty adhere to the Code and exemplify the underlying principles of professionalism the code entails. Lack of adherence will negatively impact promotion and tenure decisions.*

Initiation of the promotion and/or tenure process is an important step in career development and planning for a faculty member. As part of the annual review process, the faculty member and their supervisor should make a joint decision to proceed with promotion and/or tenure review. The promotion packet should clearly document the accomplishments of the faculty candidate with these general guidelines and evaluation criteria in mind, emphasizing those activities that are most valued in the candidate's academic appointment pathway.

**Overview of Tracks and Pathways**

LSUHSC School of Medicine (LSU-SOM) has four advancement tracks and three pathways within the Clinical Track. Faculty may switch to another track or pathway, as their career unfolds, by following the procedures described below.

1. **The *Clinical Track*** is for clinical faculty whose primary focus is excellence in clinical service with potential for development in other areas. There are three pathways on the clinical track: Clinical Practice, Clinician Scientist, and Clinician Educator.
  - a. ***Clinical Practice Pathway*** – Faculty on the Clinical Practice Pathway spend most of their effort in clinical practice. They will be expected to demonstrate excellence in clinical practice and a commitment to LSU-SOM over time, in accordance with the rank sought. Their contributions in research, scholarship, teaching and administration may be limited. However, if a faculty member's career path changes, and they demonstrate excellence in another domain in addition to clinical practice, they may be eligible to switch to another clinical pathway and eventually to the tenure track.

- b. **Clinician Scientist Pathway** – Faculty on the Clinician Scientist Pathway spend most of their effort in research and clinical practice based upon the amount of salary support provided through their research efforts. Faculty members who have demonstrated evidence of excellence in research as reflected by extramural funding, scholarly productivity and excellence in clinical practice may be eligible to switch to the tenure track.
- c. **Clinician Educator Pathway** – Faculty on the Clinician Educator Pathway spend most of their effort in teaching and clinical practice based upon the amount of clinical teaching and/or salary support provided by defined teaching, education, and/or mentorship, or administration and/or clinical service roles. The defined educational roles may include residency program director, clerkship course director, assistant or associate dean, etc. Faculty members who have demonstrated evidence of excellence in teaching and excellence in clinical practice may be eligible to switch to the tenure track.
2. **The Research Track** is for basic science faculty whose primary focus is research and scholarship. Faculty on the Research Track spend most of their effort in research and related activities. Faculty members who have demonstrated evidence of excellence in research as reflected by extramural funding, scholarly productivity, and recognition by the scientific community, as well as excellence in another area (teaching, education, and/or mentorship or service and/or administration) may be eligible to switch to the tenure track.
3. **The Instruction Track** is for faculty whose primary focus is teaching, education, and/or mentorship. They spend most of their effort in teaching, educational, and/or mentorship activities. Faculty members who have demonstrated evidence of excellence in instructional abilities and excellence in another area (research and/or scholarship or service and/or administration) may be eligible to switch to the tenure track.
4. **The Tenure Track** is for faculty with a commitment to excellence in at least two of the following domains: research and/or scholarship, teaching, education, and/or mentorship, or service and/or administration, and engagement in the third domain.

Track	Pathway	Eligible for:	
		Promotion	Switch to Tenure Track
Clinical	Clinical Practice	X	*
	Clinician Scientist	X	X
	Clinician Educator	X	X
Research		X	X
Instruction		X	X
		Promotion	Tenure
Tenure		X	X

\*Note: See 1a above.

## **I. Appointment, Promotion and Tenure Criteria**

The promotion and tenure review process evaluates accomplishments in accordance with the major focus/foci of a faculty member's effort as defined by the terms of their track and pathway appointment. Multiple individuals review promotion documents and make recommendations, including the Departmental Promotions Committee, Department Head, LSU-SOM Appointments and Promotions Committee (APC), the Administrative Council, the Dean, the LSUHSC Vice Chancellor for Academic Affairs and Senior Vice Chancellor, LSU President and LSU Board of Supervisors may also provide a judgment. (Permanent Memorandum #69, June 9, 2021). These groups and individuals consider the accomplishments of the faculty candidate in the context of the current appointment track, pathway, and assigned responsibilities.

### **A. Time in Rank**

Time in rank is defined as the number of years in the current rank at the time when the promotion would be granted. Typically, it takes 5-6 years for faculty to accrue the academic qualifications necessary for promotion to Associate Professor and 7-8 years for promotion from Associate Professor to Professor.

Time in rank *is* an important factor for faculty on the *Clinical Practice Pathway and Instruction Track* who are under consideration for promotion. While these faculty may engage in limited scholarly activity or research, their excellence in clinical practice and productivity (as evidenced by RVUs and other measures) or instruction for a significant length of time (typically 9-10 years) are important contributions to the school.

Likewise, time in rank may be an important factor for faculty who are gratis or part time at low percentages of effort. Those faculty may not have expectations to produce scholarship, as their commitments may focus on activities such as resident supervision. However, excellence in their primary role for a significant length of time (typically 9-10 years), excellence in other domains, and their commitment to the school may qualify for promotion.

### **B. Specific Criteria Based on Track and/or Pathway**

Guidelines for appointment and promotion within the different academic tracks and pathways are below. These guidelines suggest the necessary achievements in the domains of *research, scholarship, teaching, education, service, and administration* for promotion. They do not represent absolute requirements. Appointment and promotion requirements will vary depending on the advancement pathway and designated responsibilities of each faculty candidate. Outstanding work in one domain may be reason to have reduced expectations in other domains.

Faculty should provide evidence of excellence in the domains that most closely align with their track/pathway and designated role in the school or health sciences center. The required level of engagement and/or attainment of excellence in each domain is in Appendix A. The required number and source for letters of recommendation are in Appendix B.

Examples of evidence for each domain are in Appendix C. In general, the presence of a few examples in each category would be considered "Limited Engagement", about half would be considered "Engagement", and the presence of a significant number of examples in each category would

demonstrate “Excellence.”

### **Clinical Track Appointment and Promotion**

#### **Appointment to Instructor of Clinical \_\_\_\_\_**

- Terminal degree in the field.
- Evidence of effective clinical and teaching skills.
- Evidence of professionalism.
- Willingness to provide service to the department or school.
- A scholarly approach to clinical work and/or teaching, and the potential to become a productive member of the faculty.
- Show promise of the ability to successfully perform the duties for which they were employed or may be assigned in the future.
- Instructors are not eligible for tenure granting.

#### **Appointment or Promotion to Assistant Professor of Clinical \_\_\_\_\_**

##### **Clinical Practice Pathway**

- Terminal degree in field or specialty.
- Capacity for teaching and mentoring.
- Participation in departmental or school committee work.
- Excellence in patient care.
- A scholarly approach to clinical care.
- Clinical competence as evidenced by board-eligibility or board-certification in primary specialty.
- Requires at least three letters from various sources; intradepartmental letters are acceptable, but at least one from out of department.

##### **Clinician Scientist Pathway**

- Terminal degree in field or specialty.
- Capacity for teaching and mentoring.
- Clinical, basic science, team science, core laboratory services, or research contributions and collaborations.
- Participation in departmental or school committee work.
- Excellence in patient care.
- A scholarly approach in clinical care.
- Clinical competence as evidenced by board-eligibility or board-certification in primary specialty.
- Requires completion of a Research Statement.
- Requires at least three letters from various sources; intradepartmental letters are acceptable, but at least one from out of department.

##### **Clinician Educator Pathway**

- Terminal degree in field or specialty.
- Capacity for teaching and mentoring.
- Educational science research contributions and collaborations.

- Participation in departmental or school committee work.
- Excellence in patient care and teaching.
- A scholarly approach to clinical care and teaching.
- Clinical competence as evidenced by board-eligibility or board-certification in primary specialty.
- Requires completion of an Educator Portfolio.
- Requires at least three letters from various sources; intradepartmental letters are acceptable, but at least one from out of department.

**Appointment or Promotion to Associate Professor of Clinical \_\_\_\_\_**

**Clinical Practice Pathway**

- Excellence as a clinician.
- Commitment to LSU-SOM over time.
- Engagement in research and/or scholarship may be limited.
- Percent effort in teaching, education, and/or mentorship will vary.
- Membership in major scientific or specialty societies.
- Provide clinical service for the departmental and/or institutional missions.
- Community health efforts and other community service activities.
- Clinical competence as evidenced by board-eligibility or board-certification in primary specialty.
- Requires at least three out-of-department recommendation letters with one being an out-of-institution letter.

**Clinician Scientist Pathway**

- Excellence in research and/or scholarship and engagement in clinical service and/or administration.
- Engagement in teaching and education may be limited based upon engagement in research and clinical practice.
- Development and participation in clinical, basic science, team, or core laboratory services or research.
- Dissemination of knowledge through peer-reviewed publications and abstracts. Limited publications should demonstrate principal authorship (first or last position).
- Recognition through invitation to participate in local, regional, and national meetings
- Contribution to medical student and/or resident training.
- Continuing commitment to departmental and/or institutional missions of teaching, research, and/or service.
- Membership in major scientific or specialty societies.
- Local, regional, or national reputation.
- Recognition through formal awards, local and regional invited lectures, and participation in professional society or scientific programs and CME courses.
- Clinical competence as evidenced by board-eligibility or board-certification in primary specialty.
- Requires completion of a Research Statement.
- Requires at least three out-of-institution recommendation letters.

### **Clinician Educator Pathway**

- Excellence in teaching, education, and/or mentorship, and engagement in clinical service and/or administration.
- Engagement in research and/or scholarship may be limited.
- Evidence of significant contribution to medical student and/or resident training in clinical and/or preclinical years.
- Directorship of educational programs, including courses, clerkships, curricula, or residency training programs.
- Development or implementation of new teaching techniques, patient quality initiatives, etc. based on evidence from the literature.
- Dissemination of knowledge through peer-reviewed publications and abstracts. Limited publications should demonstrate principal authorship (first or last position).
- Membership in major scientific or specialty societies.
- Recognition through invitation to participate in local, regional, and national meetings, etc.
- Continued commitment to departmental and/or institutional missions.
- Leadership role in partnering hospitals, local or regional clinical affairs and/or participation in health care related internal and external committees, programs, and/or governing boards.
- Community health efforts and other community service activities.
- Clinical competence as evidenced by board-eligibility or board-certification in primary specialty.
- Requires completion of an Educator Portfolio.
- Requires at least three out-of-institution recommendation letters.

### **Appointment or Promotion to Professor of Clinical \_\_\_\_\_**

#### **Clinical Practice Pathway**

- Continued excellence in clinical service.
- Commitment to LSU-SOM over time.
- Engagement in research, scholarship, teaching, education, and/or mentorship may be limited.
- Continued contribution to medical student and/or resident training.
- Membership in major scientific or specialty societies.
- Commitment to service of the departmental and/or institutional missions.
- Leadership or administrative performance at departmental, school, health sciences center, state, and national levels.
- Community health efforts and other community service activities.
- Clinical competence as evidenced by board-eligibility or board-certification in primary specialty.
- Local, regional, or national reputation.
- Requires at least three out-of-institution recommendation letters.

#### **Clinician Scientist Pathway**

- Excellence in research and/or scholarship (with national reputation) and service and/or administration.

- Intramural and/or extramural funding.
- Extramural funding is considered in promotion and switch to the tenure track.
- Engaged in teaching, education, and/or mentorship.
- Development and participation in clinical research, basic science research, team science or core laboratory services or research.
- Leadership in research training, teaching, and advising of undergraduate, medical and graduate students, residents, clinical and postdoctoral research fellows, and colleagues.
- Development of enduring teaching materials or curricular initiatives.
- Development, or participation in clinical trials.
- Membership in major scientific or specialty societies.
- Evidence of dissemination of knowledge through peer-reviewed publications. Limited publications should demonstrate principal authorship (first or last position).
- Authorship or editorship of textbooks, monographs, or journals.
- Service on journal review panels, editorial boards and/or professional advisory groups.
- Election or appointment to professional societies, committees, and/or governing boards.
- Recognition through invitation to participate in local, regional, national, and international meetings, etc.
- Evidence of continuing commitment to departmental and/or institutional missions of teaching, research, and/or service.
- Leadership or administrative performance at departmental, school, health sciences center, state, and national levels.
- Clinical competence as evidenced by board-eligibility or board-certification in primary specialty.
- Requires completion of a Research Statement.
- Requires at least three out-of-state recommendation letters.

### **Clinician Educator Pathway**

- Excellence in teaching, education, and/or mentorship (with national reputation) and service and/or administration.
- Engaged in research and/or scholarship.
- Significant and continued contribution to medical student and/or resident training in preclinical and/or clinical years.
- Directorship of teaching or training course or program, curriculum or clerkship directors, residency program directors, etc.
- Development or implementation of new teaching techniques, patient quality initiatives, etc. based on evidence from the literature.
- Dissemination of knowledge through peer-reviewed publications. Limited publications should demonstrate principal authorship (first or last position).
- Membership in major scientific or specialty societies.
- Recognition through invitation to participate in local, regional, and national meetings, etc.
- Continued commitment to departmental and/or institutional missions.
- Continued contribution to medical student and/or resident training.
- Director of course, program, or formal curricular component of a training program.

- Development of enduring teaching materials or curricular initiatives.
- Exceptional leadership or administrative performance, at departmental, school, health sciences center, hospital, state, or national levels.
- Community health efforts and other community service activities.
- Clinical competence as evidenced by board-eligibility or board-certification in primary specialty.
- Requires completion of an Educator Portfolio.
- Requires at least three out-of-state recommendation letters.

### **Research Track Appointment and Promotion**

#### **Appointment to Instructor – Research**

- Terminal degree in the field.
- Evidence of effective research or teaching skills.
- Evidence of professionalism.
- Participation in team or core laboratory services or research.
- Capacity to provide service to the department or school.
- A scholarly approach in research and/or teaching, and the potential to become a productive member of the faculty.
- Show promise of the ability to perform successfully the duties for which they were employed or may be assigned in the future.
- Instructors are not eligible for tenure granting.

#### **Appointment or Promotion to Assistant Professor – Research**

- Terminal degree in a relevant field or specialty.
- Capacity for original and independent research, as demonstrated by recommendations from established senior faculty at the school and/or other institutions.
- Participation in team or core laboratory services or research.
- Dissemination of knowledge through peer-reviewed publications.
- Capacity for teaching and/or mentoring activities.
- Participation in departmental or school committee work.
- Requires completion of a Research Statement.
- Requires at least three letters from various sources; intradepartmental letters are acceptable, but at least one from out of department.

#### **Appointment or Promotion to Associate Professor – Research**

- Excellence in research and/or scholarship.
- Sustained service in research and scholarship.
- Intramural and/or extramural funding and salary support.
- Participation in the mentorship of graduate students.
- Recognition by peers for independent and original investigation (through peer-reviewed publications and extramural research funding) and/or for consistent contributions to extramural multi-investigator research programs.
- Participation in NIH study sections.

- Participation in team or core laboratory research providing services and support that are critical to the implementation and success of the grants or contracts of other investigators.
- Provide team science or core laboratory support to multiple and/or major projects. It is expected that Core Laboratory Scientists will participate in multiple projects simultaneously. Salary support should be derived from the source of funding or from funds generated by the core laboratory.
- Duration of service is also considered for team or core laboratory scientists. However, to qualify for transition to the Basic Science Educator pathway that is dedicated to research – primary grant support, independent research or significant funding from team science or core laboratory services must be present.
- Dissemination of knowledge through peer-reviewed publications and abstracts. Limited publications should demonstrate principal authorship (first or last position).
- Independent discovery and dissemination of new knowledge or specialized contributions to a team or core laboratory that discovers and disseminates new knowledge.
- Development of new research techniques.
- Participation in the mentorship of graduate students.
- Membership in major scientific or specialty societies.
- Invitation to participate in local, regional, and national meetings, etc.
- Evidence of service to the department and/or major scientific or specialty societies.
- Requires completion of a Research Statement.
- Requires at least three out-of-institution recommendation letters, but out-of-state letters are preferred.

#### **Appointment or Promotion to Professor – Research**

- Excellence in research and/or scholarship.
- Duration of service in research and scholarship.
- Extramural grant and salary support.
- Development of new research techniques.
- Acquisition of patents and/or other examples of protected intellectual property.
- Team or Core Laboratory Scientist services and support for implementation and success of the grants or contracts of other investigators.
- Involvement in multiple and/or major projects supported by independent funding or Core laboratories.
- Significant salary support for team and core laboratory scientists should be derived from the source of funding for the projects or from funds generated by the core laboratory.
- Primary grant support, independent research or significant funding from team science or core laboratory services must be present.
- Participation in NIH study sections.
- Dissemination of knowledge through peer-reviewed publications and abstracts. Limited publications and abstracts should demonstrate principal authorship (first or last position).
- Independent discovery and dissemination of new knowledge or specialized contributions to a team or core laboratory that discovers and disseminates new knowledge.
- Continued recognition by peers for independent and original investigation (through peer-reviewed publications and extramural research funding) and/or for consistent

- contributions to extramural multi-investigator research programs.
- Evidence of successful mentorship and training relationships with graduate students and fellows.
- Membership in major scientific or specialty societies.
- Appointed or elected leadership roles in major scientific or specialty societies.
- Invitation to participate in local, regional, national, and international meetings, etc.
- Invited society memberships with or without committee and/or governing board appointment.
- Authorship or editorship of textbooks, monographs, or journals.
- Participation in the mentorship of graduate students in the laboratory.
- Membership on editorial boards, study sections, and/or advisory groups.
- Directorship of a research core laboratory or participation in the design, redesign, or function of a core facility.
- Continued evidence of service to the department and/or major scientific or specialty societies.
- Requires completion of a Research Statement.
- Requires at least three out-of-state recommendation letters.

### **Instruction Track Appointment and Promotion**

#### **Appointment or Promotion to Assistant Professor – Instruction**

- Degree in a relevant field or specialty.
- Evidence of advanced capacity for teaching and mentoring.
- Capacity for collaboration.
- Participation in departmental or school committee work.
- Requires completion of an Educator Portfolio.
- Requires at least three letters from various sources; intradepartmental letters are acceptable, but at least one from out of department.

#### **Appointment or Promotion to Associate Professor – Instruction**

- Excellence in teaching, education, and/or mentorship.
- Sustained service in instructional efforts.
- Limited engagement in research, scholarship, service, or administration.
- Implementation of new teaching techniques based on evidence from the literature.
- Membership in major scientific or specialty societies.
- Evidence of service to the department, school, or health sciences center.
- Participation in the generation of assessments and assessment strategies.
- Establishment of a teaching role in the medical school or other HSC schools.
- Development of new graduate courses in the applicant's field of knowledge.
- Establishment of mentorship and training relationships with students, residents, fellows and/or faculty.
- Letters of recommendation written on behalf of students.
- Requires completion of an Educator Portfolio.
- Requires at least three out-of-department recommendation letters with one being an out-of-institution letter.

### **Appointment or Promotion to Professor – Instruction**

- Continued excellence in education.
- Duration of service in instructional efforts.
- Limited engagement in research, scholarship, service or administration. However, to be eligible to switch to the tenure track, excellence in two domains must be demonstrated.
- Continued implementation of new teaching techniques based on evidence from the literature.
- Directorship of curriculum, courses, etc.
- Membership in major scientific or specialty societies.
- Membership on editorial boards, grant review panel, and/or advisory groups.
- Evidence of service to the department, school, or health sciences center.
- Leadership or administrative performance at departmental, school, health sciences center, state, and national levels.
- Participation in the generation of assessments and assessment strategies.
- Exceptional leadership or administrative performance, at departmental, school, health sciences center, hospital, state, or national levels.
- Evidence of successful mentorship and training relationships with students, residents, fellows, and faculty.
- Evidence of excellence in education through course or mentorship evaluations or teaching awards.
- Creation of enduring teaching materials.
- Requires completion of an Educator Portfolio.
- Requires at least three out-of-institution recommendation letters.

### **Tenure Track Appointment and Promotion**

Faculty on the tenure track may be recommended for promotion only, tenure review only, or promotion with tenure review at the same time. This decision is made following discussions with the faculty members' Section Chief and/or Department Head.

All faculty on the tenure track have the title of **Assistant, Associate, Professor of \_\_\_\_\_**.  
**Designation of Clinical, Research and Instruction are no longer included in the titles.**

In addition to candidates documenting evidence in the criteria listed above for promotion, candidates must demonstrate excellence in two domains and engagement in the third domain in order to be eligible for tenure. Excellence would be demonstrated by documenting a significant number of examples listed in Appendix C from two domains. Candidates must also demonstrate national or international reputation in their area of excellence.

### **Part-time and Gratis Faculty Appointment and Promotion**

Clinical faculty – **Clinical** Assistant, Associate, Professor of \_\_\_\_\_

Research faculty – Title remains the same as full-time.

Instruction faculty – Title remains the same as full-time.

Part-time faculty who are at 75% effort or above will be evaluated by the same criteria as full time faculty given their track, pathway and rank. Gratis faculty and part-time faculty who are at less than 75% effort will be evaluated with respect to the criteria in their primary area of focus (clinical service, research/scholarship, or teaching/education).

### **Full-Time Affiliate (FTA) Appointment and Promotion**

FTA faculty are medical staff members at affiliated hospitals who have academic responsibilities equivalent to the full-time faculty. They are extremely rare in the School of Medicine. The criteria used for appointment and promotion of FTA faculty will be the same as those for faculty in the Clinical Track on the Clinical Practice Pathway.

## II. Procedures for New and Revised Faculty Appointment

### A. General Principles

1. The same criteria apply for initial faculty appointment and for faculty academic advancement.
2. All new faculty appointments are reviewed for appropriateness of the proposed rank, track, and pathway considering the educational background, academic training, and professional achievements of the candidate.
3. The LSU-SOM Appointments and Promotions Committee (APC) is not required to review and approve new faculty appointments at the rank of Instructor or Assistant Professor.
4. The APC is required to review new faculty appointments at advanced rank (Associate Professor or Professor).
5. For all proposed advanced rank appointments, the Department Head submits the candidate's Curriculum Vitae and a cover letter or memorandum with justification for the proposed academic rank and the anticipated role of the candidate in the department. External letters of reference may be requested for advanced rank appointments.
6. Tenure granting at the time of initial appointment is primarily for the recruitment and appointment of new Department Heads, Deans or Chancellors. However, the APC will consider granting tenure at the time of initial appointment for exceptional senior faculty candidates recruited to fill critical roles that support the mission and strategic plans of the Health Sciences Center, School, and hospital partners. After recommendation by the Administrative Council, Dean and Senior Vice Chancellor recommendations, the LSU President must approve all candidates for tenure. This action cannot be delegated to the Senior Vice Chancellor. (Permanent Memorandum #69, June 9, 2021)
7. Mandatory tenure review of initial advanced rank tenure-track appointment is no later than the fourth year of the appointment.
8. A faculty member may switch from a non-tenure track appointment to a tenure track appointment. Switch to the tenure track requires a request by the Department Head to the Dean, the Dean's recommendation to the APC, and approval of the APC. This switch does not require approval from the Administrative Council, Vice Chancellor for Academic Affairs, or Senior Vice Chancellor. However, a reassignment letter will be issued that documents the switch and outlines the new track expectations.
9. Faculty must wait at least one year before consideration for tenure review. If the track switch is made at the rank of Assistant Professor, the faculty member must begin the tenure review process no more than 5 years after the track switch (tenure review in the sixth year). If the track switch is made at the rank of Associate Professor or Professor, the faculty member must begin the tenure review process no more than 3 years after the track switch (tenure review in the fourth year).
10. Faculty may be considered for switch off the tenure track and on to the clinical, research or instruction track for a variety of personal or professional circumstances. Changing from the tenure track to a non-tenure track pathway should be no later than the beginning of the academic year prior to tenure review. This track switch requires mutual agreement of the faculty member and Department Head and does not require review by the APC, Administrative Council, Dean or Vice Chancellor for Academic Affairs or Senior Vice Chancellor. However, a

reassignment letter will be issued that documents the switch and outlines the new track expectations.

11. Faculty on the tenure track may seek to delay mandatory tenure review or request a tenure clock extension for a variety of personal or professional circumstances. The Department Head must file a written request along with faculty member's CV to the dean. Subsequently, the Dean submits a recommendation to the Vice Chancellor of Academic Affairs and the Senior Vice Chancellor for approval. Tenure review delay does not require approval of the APC or Administrative Council and is granted for one year. However, when there are extenuating circumstances, the Department Head may request a second delay.
12. The rank of Instructor is a faculty position. Therefore, as described in the LSUHSC Faculty Handbook, advancement in academic rank from Instructor to Assistant Professor is considered a promotion. Criteria for appointment as Assistant Professor must be met, and the normal promotion process must be followed.  
**Note exception:** Chief Residents and Fellows may be appointed as Instructors to serve in their roles. However, appointment to Assistant Professor will require application to a posted position. All standard hiring practices and procedures must be followed.
13. In exceptional circumstances, a highly achieving Post-Doctoral Researcher or Staff Scientist demonstrates that they are qualified for appointment as Instructor-Research or Assistant Professor-Research. Post-Doctoral Researcher and Staff Scientist are not faculty positions. Therefore, as described in the LSUHSC Faculty Handbook, this is not considered a promotion, and the position will require normal posting, advertising, and candidate interviews.

### III. Procedures for Promotion and Tenure

#### A. General Principles

1. The Department Promotions Committee, Department Head (along with secondary Department Heads and/or Center Directors), and the School of Medicine Appointments and Promotions Committee (APC) provide recommendations for promotion and/or tenure granting. The Administrative Council of the School of Medicine provides an advisory recommendation to the Dean. Subsequently, the Dean, Vice Chancellor for Academic Affairs, and the Senior Vice Chancellor provide recommendations for promotion and/or tenure granting for all faculty to the LSU President. These actions require approval by the LSU President and may not be delegated to the LSUHSC Senior Vice Chancellor. (Permanent Memorandum #69, June 9, 2021).
2. The Department Head initiates the process for departmental review of faculty candidates for promotion and/or tenure granting. Full time faculty may self-nominate for advancement.
3. The faculty candidate plays a principal role in the preparation of the promotion packet (described below) and validates that the documents submitted are accurate and complete. Faculty are required to submit a current Curriculum Vitae consistent with the current LSU School of Medicine template.
4. Each department forms a promotions committee composed of senior, advanced rank faculty members. The Department Committee members review the candidate's

- promotion packets prior to their meeting and deliberations.
5. A minimum of five (5) senior faculty members (Associate or full Professors) serve on the Department Committee. The Department Head selects the members of the Department Committee. If the department has less than five (5) senior faculty members, the Committee is comprised of departmental senior faculty and senior faculty members selected from other departments to provide the full committee complement of five. Associate Professors may serve on the Department Committee but can only vote for faculty advancing to the ranks of Assistant or Associate Professor.
  6. If a faculty member is being evaluated for promotion to Professor, at least five faculty at the rank of Professor must vote for the advanced rank.
  7. If a faculty member is being evaluated for granting of tenure, at least five tenured faculty members must vote.
  8. Note – A member of the APC cannot serve as a voting or ex officio member of a department committee.
  9. The Department Promotions Committee votes on each candidate and submits its votes and a written recommendation to the Department Head on the Promotion/Tenure Review Request form. If there is a split vote, the Department Committee Chair needs to provide a written explanation. Members of the committee and their rank and tenure status should be included, and the form is signed by the departmental promotions committee chair.
  10. The Department Head also writes a recommendation on the Promotion/Tenure Review Request form.
  11. If the faculty member holds a joint appointment with a Center of Excellence and/or with another department(s), the Center Director and/or other Department Head(s) must supply a written recommendation, positive or negative, using the Promotion/Tenure Review Request form page for Department Heads.
  12. The APC reviews all candidates following review by the departmental promotions committee and the Department Head. The APC is comprised of at least five tenured Professors. The APC Chair records the votes of committee members who are identified by number only. Therefore, individual committee members' votes are recorded anonymously on the Promotion/Tenure Review Request form.
  13. The Dean's Office forwards favorable and unfavorable recommendations from the APC to the Administrative Council for review and vote on a secret ballot. The Council Secretary records the advisory recommendation of the Administrative Council. Voting members of the Administrative Council are the Dean, Associate and Assistant Deans, Department Heads, Center Directors, and elected representatives of the Faculty Assembly. However, the Dean does not vote in this election. The Dean's recommendation and comments are recorded in a separate section of the Promotion/Tenure Review Request form.
  14. The Department Head informs the faculty candidate when there is a negative recommendation at any point in the promotion or tenure review process. The faculty candidate has the right to withdraw their packet from campus consideration at any time during the promotion process.
  15. The faculty candidate also has the right to advance their packet throughout the School of Medicine process without support from the department promotions committee, the

Department Head or the APC. However, the faculty member cannot advance their packet beyond the School of Medicine.

## **B. Promotion Packet Preparation**

1. In accordance with LSU Health Sciences Center policy, the candidate is responsible for the preparation of materials in their promotion packet. The candidate must also verify the accuracy and completeness of the Curriculum Vitae, the statements, and the demographic data on the Promotion/Tenure Review Request form. Once a faculty member signs off on the content of their packet (before letters of recommendation are added and before any review by committees), the faculty candidate does not have the opportunity to see their packet post-committee review.
2. A one-page personal statement must be included that indicates what qualifies the faculty member to seek promotion on a specific track (and pathway where appropriate). The statement should be a self-reflection on their professional development and the quantity, quality, and level of engagement on that track or pathway. The statement should focus on areas of achievement since hire date or the last promotion, whichever is most recent.
3. Candidates being considered for promotion on the Clinician Educator pathway or Instruction track are required to complete a Promotion Educator Portfolio.
4. Candidates being considered for promotion on the Clinician Scientist pathway or Research track are required to complete a Promotion Research Statement.
5. All candidates for promotion need at least three letters of recommendation from academic institutions. Please refer to specific criteria in Section I or Appendix B for required sources for letters. Letters from agencies that have significant overlap with academic institutions (e.g. NIH, DHHS, CDC, etc.) are acceptable. However, the writer should include the academic rank at their departure from an academic institution. Signed letters may be scanned, or scanned letters with an electronic signature with a date and time stamp embedded in the signature are accepted. Letters from community practice partners are not accepted unless submitted on university letterhead with the academic title of the author identified. Handwritten letters are not accepted. Letter writers must be at the equivalent or higher rank as the proposed promotion. For individuals seeking tenure, letter writers should be tenured and at the equivalent or higher rank of the candidate. The writer's tenure status should be included in the body or signature section of the letter. Letters from writers at non-tenure granting institutions will be reviewed on a case-by-case basis by the Department Head and Dean's Office. For part-time and gratis faculty members, letters of recommendation must specifically address the candidate's clinical, teaching, research or administrative contributions to the School of Medicine.
6. The candidate and Department Head generate a list of references for recommendation letters, and the Department Head solicits letters from that list. The Department Head may solicit additional letters and submit them to the departmental and school committees for consideration.
7. To ensure objectivity, letter writers should not be former mentors or current grant collaborators. This is especially germane in the context of tenure track and research track advancements, where an external evaluator should have a strong record of research and scholarship and should be from a "peer" institution or equivalent research

organization.

8. Detailed packet instructions are available annually in the "Promotion Memorandum" posted on the Faculty Affairs website.

### **C. Promotion and Tenure Appeals**

1. Full-time faculty candidates, but not part-time or gratis faculty, can request review by APC despite receiving negative recommendations from the Departmental Promotions Committee and/or the Department Head.
2. The Chair of LSU-SOM APC will notify the Department Head by phone when the committee has not recommended promotion and/or tenure. This notification is followed by a letter from the APC Chair with the committee's explanation and recommendations to assist the candidate with a future submission.
3. If the APC renders an unfavorable recommendation, the Department Head has the opportunity to appeal the decision in person before the committee's final recommendation is submitted to the Administrative Council and the Dean. The Department Head may also submit a letter or other documents with new information to the committee if such information is potentially valuable.
4. If the APC sustains an unfavorable recommendation after appeal, the Department Head has the opportunity to appeal to the Administrative Council. The Council will hear this appeal in an executive session, with only voting members and the APC Chair or their designee in attendance.
5. In the case of an appeal to the Council, all promotion packet material and the letter from APC to the Department Head about the candidate must be available for review. The APC Chair or their designee will attend the Council meeting to present the committee's position relative to the candidate. In the setting of an appeal, a favorable recommendation from the Administrative Council to the Dean requires a simple majority vote of a quorum of the voting membership.

## Appendix A

### Descriptive Tables for Expectations Across Tracks and Pathways

#### Tables for Clinical Track

##### Promotion from Assistant Professor to Associate Professor

Track	Pathway	Research and/or Scholarship	Teaching, education, and/or mentorship	*Service and/or Administration
<b>Clinical</b>	<i>Clinical Practice</i>	Limited Engagement	Limited Engagement	Excellence and Duration of Service
	<i>Clinician Scientist</i>	Excellence	Limited Engagement	Engagement
	<i>Clinician Educator</i>	Limited Engagement	Excellence	Engagement

\*Service – Clinical, Institutional, Organization/Society, Community.

##### Promotion from Associate Professor to Professor

Track	Pathway	Research and/or Scholarship	Teaching, education, and/or mentorship	*Service and/or Administration
<b>Clinical</b>	<i>Clinical Practice</i>	Limited Engagement	Engagement	Excellence and Duration of Service
		Engagement	Limited Engagement	
	<i>Clinician Scientist</i>	Excellence and National Reputation	Engagement	Excellence
	<i>Clinician Educator</i>	Engagement	Excellence and National Reputation	Excellence

\*Service – Clinical, Institutional, Organization/Society, Community.

**Tables for Research Track**

**Promotion from Assistant Professor to Associate Professor**

Track	Research and Scholarship	Teaching, education, and/or mentorship	‡Service and/or Administration
Research	Excellence	Engagement	Limited Engagement
		Limited Engagement	Engagement

**Promotion from Associate Professor to Professor**

Track	Research and Scholarship	Teaching, education, and/or mentorship	‡Service and/or Administration
Research	Excellence and National Reputation	Excellence	Engagement
		Engagement	Excellence

**Tables for Instruction Track**

**Promotion from Assistant Professor to Associate Professor**

Track	Research and Scholarship	Teaching, education, and/or mentorship	‡Service and/or Administration
Instruction	Limited Engagement	Excellence and Duration of Service	Limited Engagement

**Promotion from Associate Professor to Professor**

Track	Research and Scholarship	Teaching, education, and/or mentorship	‡Service and/or Administration
Instruction	Limited Engagement	Excellence and Duration of Service	Engagement
	Engagement		Limited Engagement

**Table for Tenure Review**

**(\*\*Note – For Tenure Track promotion only – Follow non-tenure track tables)**

	<b>‡ Research and/or Scholarship</b>	<b>‡ Teaching, education, and/or mentorship</b>	<b>** Service and/or Administration</b>
<b>Tenure Review</b>	Excellence	Engagement	Excellence
	Excellence	Excellence	Engagement
	Engagement	Excellence	Excellence

**‡ Must demonstrate national and/or international reputation.**

**\*\*Service – Clinical, Institutional, Organization/Society, Community.**

**Appendix B**  
**Letters of Recommendation**

Letters of recommendation must come from the following sources based upon the rank and track of the promotion. For tenure track promotion only, candidates should follow the requirements associated with their non-tenure track and/or pathway.

<b>Rank/Pathway</b>	<b>Letter Requirements</b>
<b>Promotion with Tenure or for Tenure review only</b>	At least three out of state letters
<b>Promotion to Associate Professor</b> Clinician Scientist, Clinician Educator, Research Track	At least three out of institution letters
<b>Promotion to Professor</b> Clinician Scientist, Clinician Educator, Research Track	At least three out of state letters
<b>Promotion to Associate Professor</b> Clinical Practice and Instruction Track	At least three out-of-department letters (including one out of institution)
<b>Promotion to Professor</b> Clinical Practice and Instruction Track	At least three out of institution letters
<b>Other promotion</b> including instructors to assistant professor, gratis and part-time	At least three letters from various sources; intradepartmental letters are acceptable, but at least one from out of department.

## **Appendix C**

### **Examples of Evidence for each Domain**

Examples of evidence for each domain that *may* be included in the curriculum vitae or elsewhere in the promotion packet to document the achievements of a faculty member and their contributions to the school in the categories of *research and/or scholarship; teaching, education, and/or mentorship; or service and/or administration*. The *specific* criteria used to make a recommendation about promotion or granting of tenure depend on a faculty member's academic pathway, and their designated responsibilities. *In general*, the presence of a few examples in each category would be considered "Limited Engagement", the presence of about half would be considered "Engagement" and the presence of a significant number of the examples in each category would be considered "Excellence."

#### **Research and Scholarship Domain**

**Excellence in Research and Scholarship can be recognized by documenting any of the following:**

##### **A. Expertise as an Independent Researcher, Team Scientist or Core Laboratory Scientist**

1. Primary grant support of the faculty member or their research program derived from grant or contract funds from local, national or international agencies, industry, foundations or other sources generated by the applicant as Principal Investigator, Co-/Sub/Site-Investigator, or Investigator.
2. Team or Core Laboratory Scientists provide services and support that are critical to the implementation and success of the grants or contracts described above. These faculty members should be involved in multiple and/or major projects supported by the funding.
3. It is expected that Core Laboratory Scientists will participate in multiple projects simultaneously. Significant salary support for team and core laboratory scientists should be derived from funds generated by the core laboratory projects and the individual faculty member.
4. Independent discovery and dissemination of new knowledge or specialized contributions to a team or core laboratory that discovers and disseminates new knowledge.
5. NIH study section or other research advisory or grant review boards.
6. Faculty on the Research Pathway may also provide services and support that are critical to the implementation and success of the grants or contracts described above. It is expected that some salary support will be generated from their research, but duration of service is also considered.
7. Participation in multi-center trials with national and international collaborators.
8. Development, dissemination, and acceptance of new ideas and concepts leading to further investigation.
9. Development, dissemination, and acceptance of a new or improved method of ensuring replicability of laboratory measurements.
10. Primary funding of clinical trials through grants, industry contracts, and other sources.
11. Development of a new method for assessing patient status.
12. Development, dissemination, and acceptance of a new method for diagnosis or interpreting diagnostic criteria.
13. Development of an improved method of therapy.
14. Discovery of new knowledge related to pathophysiologic processes or disease manifestation.

15. Active participation in multi-center studies that develop improved methods of therapy.
16. Outcomes-oriented and other applied research in a clinical setting.
17. Outcomes-oriented and other applied research in an educational setting.
18. Participation on a team of scientists that engage in any of the above activities, including but not limited to providing core laboratory services, data analysis and coordination of collaborators and other laboratories or clinical and research sites.

## **B. Scholarly Activity and Dissemination of New Knowledge**

1. Publications in peer-reviewed journals.
2. Publications co-authored with graduate students and/or residents and/or fellows.
3. Presentation and publication of peer-reviewed abstracts.
4. Presentation of peer-reviewed or juried papers at regional, national or international meetings.
5. Significant citation by other workers in the field, especially the leaders, of published papers (can be determined with Citation Index) or penetration into social and other media.
6. Published book chapters and reviews in the field of expertise.
7. Author or editor of books in the field of expertise.
8. Non-peer-reviewed publications or reviews in the field of expertise.
9. Published reviews of your papers and books by leaders and others in the field.
10. Invitations to speak at scientific meetings and at other universities.
11. Professional awards for outstanding research accomplishments.
12. Evidence of excellence in research through invitations for named lectureships.
13. Referee of manuscripts for journals in area of expertise.
14. Referee of paper proposals for meetings of national associations.
15. Review of grant applications to local, state, national, and governmental agencies.
16. Appointment to national committees to review research proposals or results.
17. Intellectual property holdings for the school (i.e., patents, copyrights, trade secrets, etc.) with associated licensing or development agreements, as appropriate.
18. Serving as an expert spokesperson in the field of expertise on local or national media.
19. Development and external dissemination of new and innovative curricula, student assessment, and instructional material.
20. Development and external dissemination of innovative methods for training educators in new instructional methods.
21. Submission of research proposals to national agencies or foundations.

## **Teaching, Education, and/or Mentorship Criteria Domain**

### **General comments about teaching, education, and/or mentorship criteria**

Teaching medical students, undergraduate and graduate students, clinical residents and post-doctoral fellows is any activity that fosters learning. This includes direct teaching in classroom, lab, and clinical settings as well as the creation of associated instructional materials. Faculty members should take a scholarly approach when they design, implement, assess, and redesign any educational activity. Faculty should draw from the literature and use “best practices” in their field. Faculty are also encouraged to engage in educational scholarship by disseminating their ideas and

experience in local presentations, presentations at professional meetings, on-line venues such as MedEd Portal, and publications. These educational presentations and publications will be evaluated as part of a faculty member's portfolio of research and scholarship.

There are four categories for criteria related to Teaching, education, and/or mentorship: *teaching, curriculum development, advising/mentoring, and learner assessment*. (Note that educational administration is an important aspect of education, but it is included in these guidelines as evidence of service to the school and administration.) Faculty seeking academic promotion may present evidence focused on a single educational activity category (e.g., teaching), or in multiple categories, such as curriculum innovation, learner assessment, and mentoring. The types and forms of evidence may vary by category. Documentation should be both quantitative and qualitative. Faculty should present the evidence concisely using common terminology and in easy-to-read formats that may include tables, figures, or graphs. In all cases, the faculty member's quantity, quality, and level of engagement related to teaching, education, and/or mentorship should be clear. In this context, quantity refers to the amount of teaching, mentoring, assessment, and curriculum development done by a faculty member. Quality refers to the excellence of faculty member's teaching, advising, assessment, and developed curriculum. Engagement refers to involvement with the broader educational community (local, regional, national, or international) to incorporate best practices and to disseminate new ideas and experiences.

### **Excellence in Teaching, education, and/or mentorship can be recognized by:**

#### **A. Teaching**

Faculty should list their formal teaching responsibilities and include the school and courses or programs in which these teaching activities occur. Formal teaching responsibilities include teaching that is part of a course (in one of the Health Sciences Center schools or a CME course), clerkship, or the recurrent didactic component of a residency or fellowship program.

##### **a. Quantity of Teaching**

Quantity should be defined in terms of cumulative hours per year, the size of the audience, and the teaching format. Quantify the hours per year that you spend in direct teaching in each of these categories:

- **Lecture**
  - Large group (i.e. medical school, nursing school, dental school or large allied health school class [large group is defined as > 75 students])
  - Moderate group (20-74 students)
  - Small group (i.e. graduate students, < 20 students)
- **Active learning**
  - Large group (Team Based Learning exercise, interactive question and answer review session, interactive case discussion session, etc. to a large group [group > 50 students])
  - Lecture or Active learning session with a group of 20-74 students
  - Simulation sessions
- **Small group seminar** (e.g. CSI clinical forums session, Team Up session, etc. [generally

- with a group <20 students])
- **Project mentoring** (i.e. teaching a learner and the skills needed and working with them on a QI project, learner research project, etc.)
- **Lab instruction** (e.g. teaching in gross anatomy lab, physiology lab, skills lab, physical diagnosis instruction, surgical anatomy elective, etc. regardless of class size)
- **Teaching conferences** (e.g. Grand Rounds, case conferences, journal clubs and other conferences directed toward residents or mixtures of residents, students, and faculty)
- **Clinical rounds** (This includes formal teaching rounds designed specifically for students, direct observation exercises, or combined patient care/teaching rounds. When making combined patient care/teaching rounds, allocate no more than 50% of the time spent teaching residents and students. When teaching in the outpatient clinic setting, allocate no more than 25% of the time spent in clinic to teaching.)

In addition to listing lectures, conferences, and other formal teaching responsibilities on the CV, faculty may want to quantify their teaching responsibilities since their last promotion in a table such as the one shown below.

Teaching Type or Format	Hours/year*	Taught individually or as part of a team	Recorded or Live
Lecture to a large group ( $\geq 75$ )			
Lecture to a moderate group (20-74)			
Lecture to a small group (<20)			
Active learning for a large group			
Active learning for a moderate group			
Active learning for a small group			
Simulation sessions			
Small group seminar			
Project mentoring			
Lab instruction			
Clinical rounds			

\*Average since the last promotion

### b. Quality of Teaching

Evidence for teaching quality can come from a variety of measures. If faculty propose promotion partially based on excellence in teaching, then faculty must provide evidence of teaching quality in addition to learner evaluations using standard forms and rating scales or open-ended narrative comments, including comparative evaluation to peers such as:

1. Learner evaluations using standard forms (e.g. Aesculapian) and rating scales or open-ended narrative comments, including comparative evaluation to peers.
2. Peer review by members of an applicant's division, department, or institutional committee, with an eye toward objectives, format, organization, and innovation.

3. Teaching awards and honors.
4. Evidence of learning as a strong indicator of excellence (e.g., pre- and post-teaching assessment of learner performance).

### **c. Engagement with the Education Community**

Faculty can demonstrate their engagement with the educational community in a variety of ways. These include, but are not limited to:

1. Descriptions of how teachers' approaches or uses of instructional materials were informed by the literature or best practice.
2. Graphical presentation of a comparative analysis of teachers' own materials with "best practices" in the field, documenting relative strengths and weaknesses.
3. Other examples of efforts to improve teaching by engagement with the education community (e.g., formal course work in education, attendance at educational conferences).
4. Evaluations from a conference presentation, teaching awards, or recognition with annotations regarding selection process and criteria.
5. Data demonstrating adoption by other faculty.

## **B. Curricular Innovation**

**Quantity:** Faculty can quantify their curriculum innovations through brief narrative descriptions on the CV.

1. Narrative description of each innovation at the level of new teaching sessions, course development, or curriculum as a whole.
2. A narrative description of 'curricula' developed for faculty may also be included as curricular innovation. Comprehensive faculty development initiatives, such as those that relate to community engagement, health equity and inclusion may be included here and are valuable to the institution.

**Quality:** Faculty can demonstrate the quality of their curricular innovations by including data or descriptions of the following in the brief narratives on their CV, in the educator portfolio or in letters of recommendation.

1. Learner reactions and ratings
2. Outcomes, including the impact on learning (e.g., course examinations)
3. Graphic displays of improvement over time (e.g., relation to previous curriculum offerings)
4. Peer review by local experts, the institution's curriculum committee, or accreditation reviewers

**Engagement with the Education Community:** Faculty can provide evidence of engagement with the education community by listing the following in their CV.

1. Invitations to present curriculum work at meetings, supplemented by documentation of the presentation's quality.
2. Peer-reviewed or invited presentations at regional, national, or international meetings.
3. Acceptance of curriculum material to a peer-reviewed repository (e.g., MedEdPORTAL).
4. List of institutions where the curriculum has been adopted, including the author's home institution.

5. Invitations for curriculum consultation from other department or schools, including tracking of the consultations' use.
6. Number of citations in other instructors' curricula.

### **C. Advising and Mentoring**

**Quantity:** Quantitative data should include the following:

1. List the type and number of learners (Protegés, House's students, PhD students, letters of reference, etc.) mentored or advised in chronological order. These interactions document those outside of the routine interactions that occur as part of the educational environment. Include an estimate of the time invested in each relationship (e.g., duration, frequency of contact, and total hours).
2. When serving as a dissertation advisor, the names and positions of the mentees should be included.
3. The number of graduate students, residents, post-doctoral students, and fellows for whom the faculty member serves as the research director.

**Quality:** Evidence of quality mentoring may include the following:

1. Listing of advisees' significant accomplishments, including publications, and presentations, and the development of tangible educational products, recognitions, and awards.
2. Evaluations of advising and mentoring effectiveness from advisees using standardized forms with comparative ratings can be included in the educator portfolio or in the recommendations from your Department Head or Department Committee.
3. Narrative comments from advisees; when available, comparative data in the form of historical or discipline-based standards can be included in letters of recommendation.

**Engagement with the Education Community:** Evidence of engagement may include the following:

1. Participating in professional development activities to enhance mentoring/advising skills.
2. Adopting effective mentoring strategies with documented links to the literature.
3. Writing an institutional guide informed by the literature and best practices.
4. Designing an effective program guided by current evidence.
5. Leading initiatives that improve institutional mentoring and advising practices.
6. Receiving invitations to critically appraise mentoring programs and providing documentation of the results and the appraisal's impact.
7. Posing investigational questions about mentoring/advising, selecting methods to answer them, collecting and analyzing data, making the results public, and obtaining peer review.
8. Securing program development funding through a peer-reviewed process.
9. Conducting skill enhancement training sessions at professional meetings.
10. Publishing peer-reviewed materials in print or electronic formats, such as institutional mentoring guides.
11. Convening scholarly conferences on mentoring, serving as a mentoring consultant to professional organizations, being invited to serve as a peer reviewer of mentoring or advising, receiving mentoring or advising awards, and having success in competitive funding for innovative mentoring-related projects.

## **D. Learner Assessment**

### **Quantity**

The time and effort engaged in learner assessment can be included in descriptions of teaching and administrative efforts. For instance, faculty can include the number of test questions written with the listing of a new lecture that was prepared. Additionally, course directors can include the time and effort involved in writing exams or putting together board type exams. Brief descriptions should use jargon-free language and should include the size and nature of the learner population being assessed, the size of the assessment, and the intended uses of the information.

### **Quality and Engagement with the Educational Community**

More important than quantity of assessments are advances in assessment quality and a scholarly approach to assessment that is validated by the educational community. Evidence for assessment quality and external engagement may include the following:

1. Presentations on the assessment process or outcomes to local audiences (e.g., curriculum committees or internal reviews in preparation for a residency review committee visit).
2. Peer-reviewed presentations and workshops at professional meetings or invited presentations.
3. Acceptance of the assessment tool in a peer-reviewed repository.
4. Assessment research presented at national meetings or published in peer-reviewed journals.

## **E. Educational Administration/Leadership**

Faculty who serve in leadership roles such as course directors, clerkship directors, program directors, or curriculum directors are vital to the school's educational mission. For purposes of promotion, these roles will be considered under Service and/or Administration.

### **Service and Academic Administration Domain**

#### **General Comments about Service and Academic Administration**

Service and academic administration include a variety of activities that contribute to the school's missions but do not directly involve teaching or research/scholarship. There are a variety of domains for service and administration. These include clinical service, school or university service, departmental service, hospital service, service to national or international organizations, and community service. The list below contains examples of these activities and a framework for reporting them. Faculty members should not only list the pertinent items on their CV but should also attempt to quantify the effort involved and include its impact for the school or health sciences center. In the case of clinical service, this may include objective measures such as RVUs, but clinicians should also document whether they bring a unique skill set to the school and region based on their expertise. Clinical service constitutes a large percentage of effort for most clinical faculty. Exceptional clinical service for a significant time period may be an important factor in promotion from Assistant Professor to Associate Professor on the clinical track. School or university service, departmental service, and hospital service generally refers to participation in governance through work on committees and task forces. While this should not be the primary focus of effort for any faculty member, participation demonstrates good citizenship and

engagement in issues of importance to the school, university, and hospital. To the extent possible, faculty should indicate the frequency of meetings and overall time commitment of this committee service. Service on national and international committees is most important if that service helps you contribute (directly or indirectly) to the mission, recognition and reputation of the school. For example, service on study sections may enhance the institutional knowledge and understanding of the funding process and priorities of organizations such as NIH; service for accrediting agencies may enhance our own program accreditation; and service on national or international professional societies may enhance the dissemination of scholarship by other faculty members. Finally, community service is most valuable if it promotes the institution in the eyes of the public at the local, state or national level.

Academic administration refers to defined leadership roles in the school, health sciences center, or hospital. These roles can also be at the department, school, or university level. Leadership roles can be in areas of education (e.g. course director, program director, etc.), research (e.g. oversight of a research center or significant research initiative), or clinical service (e.g. director of a hospital service, implementation of a significant clinical initiative). Major administrative roles in the school (e.g. Department Head or Section Chief, Assistant or Associate Dean) may constitute the major focus of one's effort. In these cases, exceptional leadership (evidenced by programmatic innovations) may supplant criteria in other areas such as research and scholarship or teaching, education, and/or mentorship.

### **Excellence in Service and Administration can be recognized by:**

#### **A. Clinical Service**

Faculty can document their clinical service by providing evidence of the following:

1. Clinical productivity and RVUs. Providing RVUs may be particularly important for faculty on the Clinical Practice or Clinician Scientist pathways. Other metrics can be provided as evidence for the quantity and quality of clinical care provided.
2. Documentation of how the faculty member built a new clinical program or expanded an existing program.
3. Clinical care outcomes and performance metrics.
4. Reputation as a clinician and consultant, including recognition as local or regional "Best Doctor" publication, etc.
5. Numbers of referrals from local or regional physicians.
6. Special clinical skills or competencies that fill a need and enhance the school's clinical operation or training programs.
7. Introduction of new clinical skills or techniques to the institution.
8. Implementation of innovations, as a participant or leader, that enhance patient care, such as quality improvement initiatives, chronic disease management programs, critical pathways, medical homes projects, and interprofessional practice.
9. Development of new quality improvement initiatives or clinical programs that serve to fulfill the mission of the Health Sciences Center.
10. Leadership or substantive involvement in planning and implementing health care delivery during unexpected medical crises or natural or other disasters.

### **III. Institutional Service (Department, School, University, or Clinical Partners)**

Leadership roles in committees and special initiatives are important. If faculty reference a leadership role, narrative description of major achievements can be included. In all cases, an estimate of the time commitment should be included with institutional service. Faculty can provide evidence of their institutional service by documenting the following:

1. Leadership of a departmental, school, health sciences center, or hospital committee.
2. Participation in a departmental, school, health sciences center, or hospital committee.
3. Leadership role in a special initiative, such as strategic planning, community engagement, or preparation for accreditation.
4. Participation in a special initiative such as strategic planning, community engagement, or preparation for accreditation.
5. Service as a medical staff officer for clinical and/or hospital partner.
6. Advising for student organizations.
7. Formal leadership role in career counseling for students outside of teaching responsibilities.
8. Formal role in mentoring for faculty.
9. Formal role in recruitment and selection of residents, graduate students or post-docs.

### **IV. Regional, National, or International Service**

Faculty should include brief narrative descriptions of the service, and the time commitment involved. Having a national/international reputation is important for promotion from the rank of assistant/associate professor and national/international service is good evidence of a faculty member's reputation. Faculty can provide evidence of their regional, national, or international service by documenting the following:

1. Appointed or elected leadership role in professional organizations or societies or governing boards at a regional, state, national, or international level.
2. Service on a work group or task force or planning committee for professional organizations or societies at a regional, state, national, or international level.
3. Service for a regulatory agency or accrediting body.
4. Organization of programs at state or national/international meetings of professional organizations.
5. Participation in or consultation for health care-related committees, organizations, or workshops and/or symposia locally, regionally, or beyond.
6. Participation on site visit committees for funding and/or accrediting agencies.
7. Service on a governmental advisory committee.
8. Contribution to board examinations such as question writer, reviewer, or examiner.
9. Honors/Acknowledgment for national or international service.
10. Invitation to participate in local, regional, and national meetings, etc.
11. Membership in major scientific or specialty societies.
12. Invited participation in professional society-related committees and/or governing boards.
13. Participation in national and international symposia, courses, and teaching programs.

### **V. Administration**

Faculty may list formally created administrative roles under 'academic appointments' if they are positions such as Section Chiefs or members of the Dean's Staff. Faculty should list and briefly

describe all administrative roles in the service and administration section of the CV.

Documentation of quality in leadership includes a concise description of projects, including dates, context, identified problems, goals established, and outcomes. Faculty may demonstrate engagement with the academic community by including whether they drew on available literature to advise their administrative advancements. If the administrative achievements are disseminated, those presentations may be included as scholarship. Faculty can document service in administration by listing the following:

1. Defined and formally appointed leadership role in the department, school, health sciences center, or a partnering hospital, clinic or agency. Provide a brief description of the associated duties, percent effort devoted to the role, and major accomplishments.
2. Defined and formally appointed leadership role in education (educational administration) such as course director, clerkship director, program director or curriculum director. Provide a brief description of the associated duties, percent effort devoted to the role, and major accomplishments.
3. Development, initiation, and implementation of special projects, policy initiatives, or programs within the school or health sciences center. These may include new training programs, major revisions of existing educational programs or curricula, community engagement and outreach programs, faculty development initiatives, etc.
4. Initiation or implementation of new clinical services, health care delivery policies, projects, or programs within a partnering clinical or hospital entity.
5. Leadership in initiatives to change policy or legislation.
6. Leadership or substantive participation in the school, health sciences center, hospital partner, or other regulatory accreditation activities, such as LCME, SACSCOC, ACGME/RRC, etc.

## **VI. Community Service**

Community service is most valuable if it enhances and promotes the institution's reputation in the eyes of the local community and public at large. Faculty can document community service by listing the following:

1. Participation in community service or other volunteer activities that promote the school or health sciences center and increases the institution's visibility in the state and local.
2. Participation in educational outreach projects targeting underserved communities.
3. Participation in volunteer clinics such as the Student Run Homeless Clinics.
4. Participation in health fairs and community screening activities.
5. Lectures and informational talks to local community groups.
6. Organizing and leading community health efforts, particularly those that address health equity.
7. Serving on advisory boards or committees for community organizations that try to improve physical and mental health in the community.
8. Other community service activities, such as work with schools, neighborhood organizations, youth development groups, and community sports are evidence of good citizenship, but are less highly valued compared to those activities that promote the institution's visibility directly.

**Appendix D**  
**General Comments about the Research and Scholarship Criteria of**  
**Boyer, 1990 and Glassick, et al., 1997**

For faculty on several tracks and pathways, there are expectations for traditional measures of research and scholarship. As articulated in contemporary conceptualizations of research and scholarship, this range of activities includes the scholarship of discovery, application, teaching, and integration. The scholarship of discovery, teaching, and application relate directly to LSU-SOM's major missions in research, teaching, and service. The scholarship of integration is related to all three areas and should be considered relative to contributions in the three primary areas.

While overlap may exist, a distinction exists between scholarly activity and scholarship. For example, delivering a good lecture in a medical school course is expected of a faculty member and is an example of scholarly activity. To qualify as scholarship in teaching, it is expected that the faculty member publicly disseminates the development of new courses, curriculum, and/or approach to teaching through publication or website posting. In service, a distinction can be made between a faculty member who provides competent clinical service as scholarly activity and one who is viewed as an authority in a specific area of clinical medicine as scholarship. Scholarly activity in research includes delivery of scientific presentation at regional, national, and international meetings or universities. Scholarship in research is achieved through peer reviewed publication of newly developed techniques, methods, or novel scientific discoveries. Application of the same method in support of the research mission might be an example of scholarship in service if this method was judged by the faculty member's peers to be integrally important to the research mission.

**Scholarship of Discovery**

"... the scholarship of discovery ... comes closest to what is meant when academics speak of "research". No tenets in the academy are held in higher regard than the commitment to knowledge for its own sake, to freedom in inquiry and to following, in a disciplined fashion, an investigation wherever it may lead ... Scholarly investigation ... is at the very heart of academic life, and the pursuit of knowledge must be assiduously cultivated and defended." <sup>1,2</sup>

**Scholarship of Teaching**

"When defined as scholarship ... teaching both educates and entices future scholars. As a scholarly enterprise, teaching begins with what the teacher knows ... Teaching is also a dynamic endeavor involving all the analogies, metaphors, and images that build bridges between the teacher's understanding and the student's learning ... Further, good teaching means that faculty, as scholars, are also learners ... In the end, inspired teaching keeps the flame of scholarship alive ... Without the teaching function, the continuity of knowledge will be broken and the store of human knowledge dangerously diminished." <sup>1,2</sup>

**Scholarship of Application**

"The third element, the application of knowledge, moves toward engagement as the scholar asks, 'How can knowledge be responsibly applied to consequential problems? How can it be helpful to individuals as well as to institutions?' ... To be considered scholarship, service activities must be

tied directly to one's special field of knowledge and relate to, and flow directly out of, this professional activity. Such service is serious, demanding work, requiring the rigor-and the accountability-traditionally associated with research activities." <sup>1,2</sup>

### **Scholarship of Integration**

"By integration, we mean making connections across the disciplines, placing the specialties in larger context, illuminating data in a revealing way, often educating non-specialists, too ... Today, interdisciplinary and integrative studies, long on the edges of academic life, are moving toward the center, responding both to new intellectual questions and to pressing human problems. As the boundaries of human knowledge are being dramatically reshaped, the academy surely must give increased attention to the scholarship of integration." <sup>1,2</sup>

#### References:

1. Boyer, E. L. (1990). *Scholarship reconsidered: Priorities of the professoriate*. Princeton University Press, 3175 Princeton Pike, Lawrenceville, NJ 08648.
2. Glassick, C. E., Huber, M. T., Maeroff, G. I., & Boyer, E. L. (1997). *Scholarship assessed: Evaluation of the professoriate*. San Francisco: Jossey-Bass.