

Guidelines for Appointment, Reappointment and Promotion of Clinical Track Faculty

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I. Clinical Track Appointments

Clinical track faculty hold term appointments through which they contribute to the service, teaching, professional productivity, and/or outreach missions of the College, and hold faculty rank at the instructor, assistant professor, associate professor, or professor level. All clinical track faculty are expected to further public health practice which is defined as the application of public health knowledge, skills, and techniques in addressing actual problems and opportunities in governmental and private organizations, at the community level and in the area of health management and policy. It involves assisting a wide range of organizations and groups in defining, analyzing, and resolving issues that affect the health status of individuals, communities, and society-at-large. The clients of public health practice and health management consequently include individuals, communities, and organizations.^{1 2}

II. Qualifications for Specific Ranks

The general qualifications for appointment, reappointment, and promotion to specific ranks are stated in the Collegiate Guidance for Clinical Track Appointments:

1. *Assistant Professor (Clinical)*
 - a. S/he must hold a doctorate, its equivalent, or suitable professional degree.
 - b. S/he must show evidence of ability as a teacher.
 - c. S/he must show promise of excellent public health practice and professional productivity.
2. *Associate Professor (Clinical)*
 - a. S/he must hold a doctorate, its equivalent, or suitable professional degree.
 - b. S/he must have an acknowledged record of teaching success, which may include a record of successful direction of the work of graduate students where applicable.
 - c. S/he must demonstrate a substantial record of professional productivity and public health practice.
3. *Professor (Clinical)*
 - a. S/he must hold a doctorate, its equivalent, or suitable professional degree.
 - b. S/he must have an acknowledged record of sustained teaching success, including a record of successful direction of the work of graduate students where applicable.
 - c. S/he must have an established record of professional productivity and public health practice, and unmistakable evidence of national recognition.

¹ Collegiate Guidance for Clinical Track Appointments, Appendix F.

² UI Human Resources Policy [Par. 10.9(c)(1)] details options for duration of clinical track appointments.

III. Reappointment

In accord with UI policy, a review of clinical faculty members in the Department of Health Management and Policy will be done prior to the completion of their current term of appointment. This review will provide the basis for determining whether or not the faculty member will be reappointed and, if so, the length of the term. This review should take into account the faculty member's demonstrated effectiveness in fulfilling teaching and professional productivity. It should also consider departmental, collegiate and University goals and the likely role of the faculty member in contributing to those goals.³

The review ordinarily will involve the following steps:

1. Reappointment requires both the faculty member and the department head to desire contract renewal. At least eight months prior to completion of the current term of appointment, the faculty member and department head will meet to determine whether or not reappointment will be pursued.
2. If the faculty member does not want to be reappointed, his or her appointment in the department will conclude at the end of their current term.
3. The following process will be initiated for consideration of reappointment:
 - a. The faculty member will prepare a self-assessment of accomplishments and contributions in relation to his or her responsibilities in teaching, service, and professional productivity beyond clinical service. This report will be completed at least seven months before the end of the faculty member's current term, with copies provided to the department head and dean.
 - b. Letters regarding the faculty member's performance will be obtained from at least five persons selected jointly by the department head and faculty member. These will include at least three persons from outside the College of Public Health who are familiar with the faculty member's performance in teaching, service, and/or professional productivity including clinical service. The letters will be requested by the department head to be available at least seven months before the end of the faculty member's current term.
 - c. At least seven months before the end of the faculty member's current term, the department head will appoint a Departmental Consulting Group (DCG) consistent with collegiate policy. They will review pertinent documentation including teaching evaluations, the annual review reports required both by UI and College of Public Health policies, the faculty member's self-assessment, and the letters obtained as part of this process. The DCG will prepare a summary report for the department head regarding their views on the faculty member's accomplishments and contributions during his or her current term.

³ Operations Manual III-9 Appointments

- d. At least five months before the end of the faculty member's current term, the department head and faculty member will meet to review the materials outlined in Paragraph 2(c)(3) and the ad hoc committee's report. The department head and faculty member may decide jointly to obtain additional input.
 - e. At least four months before the end of the faculty member's current term, the department head will prepare a report and recommendation to the dean. This report will be reviewed in advance with the faculty member, who will be given the opportunity to offer comments and suggestions before the report is finalized. The report will include the department head's recommendation regarding reappointment and, if another term is recommended, the recommended length of that term and an outline of the faculty member's role and responsibilities.⁴
 - f. The faculty member may also provide a letter to the dean, with a copy to the department head, indicating his or her position on the department head's report and recommendation.
 - g. At least three months before the end of the faculty member's current term, the dean will indicate his or her position regarding the department head's report and recommendation. If there is agreement, the department head and faculty member will be advised and, in accord with UI Human Resources Policy [Par. 10.9(d)(1)], a report and recommendation will be forwarded to UI Central Administration for review and approval.
 - h. If the faculty member does not concur with the collegiate report and recommendations, s/he may elect to employ UI Faculty Dispute Procedures.
 - i. If the faculty member is reappointed, the new term begins immediately upon final action by UI Central Administration; if the faculty member is not reappointed, his or her appointment in the department will conclude twelve months after formal notification.⁵
4. The reappointment process outlined above ordinarily will be followed upon completion of the faculty member's initial and subsequent terms. In the case of second and later terms, the standard process may be modified with mutual consent of the faculty member, department head, and dean.

IV. Termination and/or Non-renewal

Termination during the term of the appointment must be for failure to meet written standards of competence and performance established by departments and approved by the College. A decision not to renew an appointment may be for failure to meet the written standards of competence and performance, or for changed economic circumstances or program needs such

⁴ In accord with UI Human Resources Policy [Par. 10.9(d)(1)], after a positive review, instructors will receive two-year reappointments; assistant, associate, and full professors will receive three to seven year reappointments.

⁵ UI Human Resources Policy [Par. 10.9(h)(1)] sets forth standard procedures for termination and non-renewal of salaried clinical faculty appointments.

that the position itself is terminated. Non-renewal may only occur at the conclusion of an appointment. Notice of non-renewal must carry appropriate notice, as defined in *Operations Manual* III.10.9.h.(1).(c).

V. Promotion

Clinical track faculty who desire to be promoted must meet the requirements that would apply for appointment to that rank (see section II of this document). Promotion for clinical track faculty will follow the usual faculty review procedures for promotion.

Promotion for clinical track faculty will be based on teaching and professional productivity. Professional productivity encompasses activities utilizing the faculty member's professional expertise. The categories of activities to be considered include:

- Professional service
- Public health practice
- Scholarship

Promotion can be supported by a variety of professional productivity profiles. For example, some faculty may be involved primarily in a single area, such as education or public health practice. Other faculty may pursue activities in multiple areas. In all cases, a recommendation for promotion should be based upon the quality of the activities, not just the quantity.

It should be noted that while there is no maximum period of time by which promotion must be achieved in this track. However, an assistant professor may request consideration for promotion at any regular yearly promotion cycle after, in general, the fourth year of appointment. An associate professor may request consideration for promotion at any regular yearly promotions cycle.

A. Teaching

Traditional teaching responsibilities at the University are focused on formalized for credit programs. However, the University establishes a number of audiences for the teaching responsibility of clinical faculty including students, residents, or fellows of the University at the undergraduate, graduate, professional, or postgraduate level. Clinical faculty engage in a variety of teaching responsibilities in a variety of formats which may include: teaching for credit courses; providing non-credit programs and workshops, distance and online - learning programs, seminars, and continuing education. In addition some faculty may direct graduate projects, internships, and serve on master and doctoral committees, as well as mentoring graduate students.

Therefore a variety of supporting materials can be used to judge the faculty member's effectiveness as a teacher. The process might include a review of syllabi, student course evaluations, online course evaluations, peer evaluations and administrator evaluations.

Key indicators of teaching performance may include but are not limited to:

- Faculty evaluation of the objectives, methods, and materials of courses that have been designed and taught by the individual.
- Student evaluations of the performance of the individual.
- Evaluations from short courses or “workshops” for students, residents and fellows, postgraduate professionals, and the lay public.
- Peer evaluations of teaching.
- Graduate exit interviews or alumni feedback.
- Teaching awards or other recognition of teaching excellence.
- Evaluation concerning the performance of students, residents, and fellows taught by the individual whenever possible and appropriate.

B. Professional Productivity

Members of the clinical track are expected to contribute significantly to professional productivity. Professional productivity is defined to include three components: Public health practice; professional service; and scholarship.

1. Public Health Practice

The Association of Schools of Public Health (ASPH), the Council on Education in Public Health (CEPH) and the Association of University Programs in Health Administration (AUPHA) characterize degrees in public health and health administration as applied fields which support the need to identify and develop faculty who are involved in practice. Furthermore, the engagement of such faculty should also help the College apply and evaluate research and theories in public health and health management.

Clinical practice activities are revenue generating and may include:

- Providing services to external organizations on a contractual basis whereby UI is compensated for the faculty member’s time and efforts.
- Performing duties within UIHC, VA Medical Center, the College of Public Health, or other UI units that involve application of faculty member’s professional expertise and for which compensation is provided.
- Serving as members of organizational governing boards or committees. Where compensation is provided for these roles, a proportion agreed upon by the faculty member and department head will be used to offset the faculty member’s salary.
- Arrangements whereby a faculty member participates in community activities, including consultation and/or technical assistance, in accordance with UI policies and procedures.

2. Professional Service

General criteria as stated in the operations manual:

“From time to time, a faculty member is called upon to render major professional services to the University or to society in general. Such contributions should be evaluated in terms of the effectiveness with which the service is performed, its

relation to the general welfare of the University and its effect on the development of the individual.”

Key indicators of service performance may include, but are not limited to:

- Advising student organizations.
- Contributing to professional growth and development of junior colleagues.
- Serving on Department, College of University committees (indicate if chair).
- Serving as an administrator within the Department, College of University.
- Reviewing grant proposals.
- Serving on accrediting agencies or boards.
- Serving on committees of professional academic organizations.
- Serving on professional/technical committees.
- Performing academic service to the community (should be professionally related). Examples would include presenting guest lectures and preparing materials for paraprofessionals.
- Service to the State of Iowa

3. Scholarship

In its landmark 1990 report, Scholarship Revisited: Priorities for the Professoriate, the Carnegie Foundation for the Advancement of Teaching defined scholarship as having four separate but overlapping dimensions: the scholarship of discovery, the scholarship of teaching, the scholarship of integration, and the scholarship of application.⁶ Clinical track faculty are expected to contribute to and advance the field of public health and health-related practice through scholarship. Scholarship activities are broadly defined to include but are not limited to:

- Developing and/or implementing new models for improving public health or health care practice;
- Developing and/or implementing new models for improving education and training.
- Formal presentations to members of the practice and/or academic communities at local, state, regional and national meetings.
- Written works including both peer and non-peer reviewed articles, text book chapters, policy documents, publications in trade journals, and technical reports; and
- Practice-based research and/or translational research.

It should be noted that while the scholarship of discovery may help satisfy this requirement it is not required for promotion in this track.

⁶ This hierarchy of scholarship was subsequently endorsed by the Association of Schools of Public Health, Council of Public Health Practice Coordinators in *Demonstrating Excellence in Academic Public Health Practice*. The Department of Health Management and Policy faculty endorses this paradigm of scholarship as especially appropriate for colleges and departments that include clinical-track faculty and should guide the implementation of faculty evaluations for promotion and retention.