

CE Track Guidelines

Clinician Educators are individuals who plan to develop and sustain a record of academic productivity, which include involvement in collaborative and independent research efforts and other peer-reviewed published works. The CE track includes practicing physicians, psychologists, biostatisticians, epidemiologists, informaticians, bioethicists, clinical, laboratory, and social scientists as well as others who support clinical work in a direct manner. It emphasizes sustained scholarly productivity. Faculty on this track are expected to demonstrate excellence in teaching while those with clinical responsibilities must also demonstrate excellence in clinical care.

Individuals must hold the terminal degree in their fields to be eligible for CE track appointment. The criteria for reappointment and promotion will reflect the relative proportions of patient care, scholarship and education as outlined in their academic plan.

Annual academic reviews must be conducted to evaluate the quality of a faculty member's contribution to patient care, scholarship and education.

Clinical Effort:

Faculty with Clinical Privileges

It is expected that MDs and other clinicians engage in patient care with enough clinical effort to maintain competence in one's field, generally at least 20%.

Faculty without Clinical Privileges

Non clinical CE faculty usually directly support clinical care in some way through the following roles:

- Clinician Administrator – Holds substantial administrative responsibility for a clinical service program of major academic importance at the departmental or Health System level; are often a Department Vice Chair, Associate Chair, Division Chief or a Clinical Laboratory Director.
- Biostatisticians and Clinical Epidemiologist –Contributes broad expertise in study design and data analysis and provide essential leadership to clinical research programs in PSOM.

Education Effort:

Education effort should be at least 5 % of total effort. Faculty may have substantial teaching and medical education leadership commitments including:

- Leadership roles: decanal positions, program directors, course directors, etc.
- Large teaching roles: such as Clinical Bioethicists heavily involved in teaching medical students, residents, masters students and pre-med undergraduate students.

Scholarly Effort:

The main criteria for promotion in the CE track is evidence of continuous scholarly productivity reflecting a defined focus resulting in the appropriate impact of a candidate's body of work. Impact includes an assessment of scholarly productivity defined as original peer reviewed publications, editorials, chapters, and reviews as well as other metrics. Collaborative and interdisciplinary research, and team science is

expected and encouraged and will be strongly considered but the candidate's role must be clearly described. Extramural funding is not required for promotion for those with clinical activity.

Requirements for All CE Assistant Professor Appointments:

- Research training
 - Advanced research experience/training required (Could be met by an additional degree, certificate program, post doc experience, mentored research experience during fellowship, year out for research such as Sarnoff, HHMI, etc.)
- Prior research productivity
 - All candidates must have demonstrated prior peer reviewed research publications. First or last authorship is not necessary but viewed favorably.
 - All candidates must have a clearly stated and achievable research plan as part of their Academic Plan.
- Start Up time and resources
 - A minimum of 30% of non-clinical (protected) academic effort for scholarly and educational activities for a minimum of 3 years is required.
 - In select cases, most commonly in surgical departments, 10% of clinical effort may be counted towards protected effort if aligned with research objectives.
 - Administrative time is not academic time.
- Non-salary resources to facilitate scholarship should be provided at the time of appointment, commensurate in size to the field and the proposed research.
- Mentoring
 - Mentoring teams should be created with at least one member of the team from outside their division/ department.
- Guidelines for K awardees
- Grantees will not be expected to make up salary shortfalls with clinical effort.
- Maximum clinical effort should strictly adhere to K award guidelines.

Research support beyond the first reappointment:

In general, unfunded research effort can be allocated to academically productive faculty and supported from nonoperational sources (gifts, endowments, designated funds). Academically productive faculty should have sustained scholarly efforts including publications in peer reviewed journals and invited lectures nationally/internationally.

CE faculty with clinical privileges

Funding for scholarly effort should be from extramural (NIH, other federal/state agencies, foundation, endowments, private, and industry support) or nonoperational (i.e. unrestricted CPUP or PSOM funds, gift funds, endowment) sources. Effort devoted to teaching, grant preparation, and administration can be covered by operational sources. If adequate funding is not available, then a commensurate increase in clinical activity is expected. Additionally, salary can be reduced per CPUP and PSOM policies.

CE faculty without clinical privileges

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enter a one-year period of observation with clear written expectations set by the department chair (and reviewed by the Dean's office) regarding the need to generate salary support. Additionally, salary can be reduced per CPUP and PSOM policies. Failure to meet expectations will lead to a terminal year appointment per Section II.B.9 of the University handbook.