UNIVERSITY OF MINNESOTA
MEDICAL SCHOOL

DEPARTMENT OF UROLOGY
CLINICIAN TRACK STATEMENT
Appointment and Promotion Criteria and Standards

I. INTRODUCTORY STATEMENT

This document describes the specific criteria and standards which will be used to evaluate whether faculty meet the general criteria for promotion on the Clinician Track. Clinician Track appointments are annually renewable and are not in the tenure stream. Criteria and standards described in this Statement are used for appointment at all ranks and for promotion of faculty on the Clinician Track. The Clinician Track Statement also defines the criteria for annual performance review of faculty at all ranks, and where appropriate, post-promotion review.

This document contains Criteria and Standards pertaining to:

a) Appointment to the Clinician track as an Assistant Professor.
b) Promotion from Assistant Professor to Associate Professor and from Associate Professor to Professor.
c) The process for the annual faculty performance review.

The criteria, standards and procedures are applied without regard to race, color, creed, religion, national origin, gender, age, marital status, disability, public assistance status, veteran status, sexual orientation, gender identity, or gender expression.

All departmental Clinician Track Statements must be reviewed and approved by the Associate Dean for Faculty Affairs.

II. MISSION STATEMENT

Committed to innovation and diversity, the Medical School educates physicians, scientists, and health professionals; generates knowledge and treatments; and cares for patients and communities with compassion and respect.

The Medical School strongly encourages and values interdisciplinary work, including scholarship, public engagement, and teaching, as well as interprofessional collaboration in clinical sciences.

III. APPOINTMENT AND ANNUAL PERFORMANCE REVIEW OF FACULTY

A. Appointment of Faculty

Clinician Track appointments may be made on all University of Minnesota Medical School campuses and affiliated sites, following the processes described in the *Medical School Policy on Faculty Appointments*. Each department must add specialty-specific criteria for appointment in a departmental addendum.

1. Assistant Professor

   In the Medical School, the entry level rank for faculty is at the Assistant Professor level. The minimal, general criteria for initial appointment at this rank include:

   a. Possession of a either an M.D. or D.O.

b. Board eligibility or certification.
c. Documentation of competence in the skills of communication, including effective communication with students, colleagues, and patients.

2. Associate Professor and Professor

The criteria for appointment as Associate Professor or Professor are the same as the criteria for promotion to the rank and can be found in Sections IV.C. and IV.D.

B. Annual Performance Review of Faculty

1. Process

All Clinician Track faculty, at all ranks, undergo an annual performance review. The process for this review is described in the *Medical School Faculty Review Policy: Annual Review*. The department defines the criteria for annual performance review. The head of each department or his/her designee annually reviews the progress of each faculty member. The Department Head prepares a written summary of that review and discusses the faculty member's progress with the faculty member, giving him/her a copy of the report. In considering proposals for promotion in rank, the Medical School and its Departments comply with the procedures described in this Statement.

2. Criteria

The criteria for satisfactory performance for the annual review are the same as those for the appropriate rank, as defined in this Clinician Track Statement.

IV. CRITERIA AND STANDARDS FOR PROMOTION IN RANK

A. Definition of Excellence for Clinical Practitioners

1. The ACGME competencies provide a framework for the education and training of our residents as well as an expectation of how faculty members should conduct themselves to achieve high quality, empathetic patient care that not only diagnoses and treats illness, but also aids in improving patient health and wellness. Faculty members being considered for promotion on the Clinician Track must demonstrate sustained excellence in all six of the ACGME competencies acting as a role model for medical students, residents, fellows and colleagues. The ACGME competencies include:

    a. Practice-Based Learning and Improvement – The ability to investigate and evaluate an individual's patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices.
    b. Patient Care and Procedural Skills - Provision of patient care that is compassionate, appropriate and effective for the treatment of health problems and the promotion of health.
    c. Systems Based Practice – Demonstration of an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.
    d. Medical Knowledge – Demonstrated knowledge about established and evolving biomedical, clinical, and cognate sciences and the application of this knowledge to patient care.

e. Interpersonal and Communication Skills – Demonstration of interpersonal and communication skills that result in effective information exchange and teaming with patients, patients' families and professional associates.
f. Professionalism – Demonstration of a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

2. Mentoring
3. The Department of Urology values contributions to research by those on the Clinician Track. These are detailed in the "Medical Knowledge" Section above.

B. To Assistant Professor

Not applicable in the Medical School (entry level rank is Assistant Professor)

C. To Associate Professor

A recommendation for promotion to Associate Professor is made when an eligible faculty member has a regional reputation as a leader in the field and has fulfilled the specific standards for promotion to Associate Professor as stated by this Clinician Track Statement. Time in previous rank does not influence the final decision when considering promotion.

1. Practice Based Learning and Improvement

Continued self-assessment of one's own practice and efforts to improve patient care practices is required for promotion in the Clinician Track.

Examples include, but are not limited to:

a. Participation in Maintenance of Certification (MOC) or Multi-specialty MOC Portfolio Program through participation in quality improvement efforts in one's local practice that may be sponsored by the institution or hospital Quality Improvement department.
b. Participation in an AUA-approved structured, well-designed Quality Improvement project that has demonstrated improvement in care and are based on accepted improvement scientific and methodology (e.g., AQUA).
c. Participation in AUA approved simulation training. Such activity must provide advanced hands-on clinical education experiences for the individual.
d. Authorship or co-authorship in published articles relating to QI activities in health care.
e. Mentor senior residents through their QI project.
f. Partner with the clinic director or hospital on an approved QI initiative defined by MHealth.
g. Managing the reporting for departmental quality outcomes, such as Epic Dashboard.
h. Providing guideline concordant care
i. Promoting evidence-based care
j. Leading M&M (Quality improvement and quality assurance conference)
k. Meeting or exceeding VA Quality of Care Metrics

2. Patient Care and Procedural Skills

Evidence of recognized high quality patient care and procedural skills is required for promotion the Clinician Track. Examples include but are not limited to:

a. Award for recognition of excellence in clinical service.

b. Hard evidence of excellent clinical outcomes (provide statistics).
c. Development of patient education materials that are used on a local/regional level.
d. Development of decision-making models or materials that are used on a local/regional level.
e. Innovations in delivery of care (e.g., inventions, tools) that are used on a local/regional level.
f. Invitation to teach skills or patient care at regional-level courses.
g. Participation in global medicine or outreach to underserved area initiatives.
h. Testimony of excellence in patient care: e.g., letters to the chair from a patient or referring physician
i. Deliver a unique service that no one else in the area delivers or one that patients consistently travel for from outside the region.
j. Development of a new multi-disciplinary service line

3. Systems Based Practice

Evidence of appropriate use of system resources to provide quality care that is optimally valued is required for promotion in the Clinician Track. Examples include but are not limited to:

a. Creation or participation in division/departmental-level conferences.
b. Lead or participate in hospital and UMN committees.
c. Service – serve the mission of the department, medical school, university or practice group in ways that might not be recognized by committee membership; examples might include managing the call schedule
d. Volunteering to proctor students or residents in teaching labs or volunteering for community service events sponsored by our organization.
e. Participate in faculty/staff/resident recruitment process
f. Serve as proctor for resident testing in service exams

4. Medical Knowledge

Basic medical knowledge is required for provision of safe, effective patient care. Evidence of medical knowledge above and beyond that required for simple patient care is required for promotion in the Clinician Track. Examples include but are not limited to:

a. Presenting at Departmental Grand Rounds.
b. Regular participation in medical student/resident lectures.
c. Presentation at other departments' grand rounds or other invited lecture events.
d. Author scientific article
e. Participate in OKAT beyond that required
f. Advance medical knowledge through participation in research (e.g., recruiting for clinical trials).

5. Interpersonal and Communication Skills

Key to success as a physician is the ability to effectively communicate with patients and fellow members of the health care team. Failure to effectively and clearly communicate with others can hinder and even adversely affect outcomes. Examples of effective interpersonal and communication skills include but are not limited to:

a. No serious issues or concerns regarding care delivery, quality of care or safety concerns over the period under consideration for promotion.
b. High patient satisfaction or resident evaluation scores
c. Participation or leadership in entity culture and safety grand rounds, lectures, seminars.

6. Professionalism

Evidence of professionalism is based on a demonstrated commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to our diverse patient population. Examples of professionalism include:

a. Leads or participates in diversity initiatives, studies, or care models (e.g., Comprehensive Gender Care team).
b. Service to the Department, School, or University on governance-related or policy-making committees.
c. Roles in discipline-specific regional and national organizations.
d. Service to the community or state, and public engagement.
e. Fundraising, community service

7. Mentoring
   Additionally, faculty seeking promotion to Associate Professor are expected to provide effective mentoring and/or advising to residents, fellows or other junior faculty and learners at other levels, in compliance with collegiate and University policies. Mentoring includes activities that advocate for the professional development of learners. This may be recognized by awards such as a teaching award.

D.To Professor

A recommendation for promotion to Professor is made when an eligible faculty member achieves national and/or international visibility of their clinical skills. This includes evidence of effective mentoring of other faculty members, and fostering a culture that enhances diversity. Additional academic, scientific, scholarly, and/or professional achievements, which include but are not limited to the following, recognizing that not all standards will apply to all faculty:

1. Practice Based Learning and Improvement
   While quantity and type of practice based learning and improvement is highly variable for Clinician Track faculty, continued and sustained effort is required for promotion to Professor. Continued evidence of high-quality contributions to quality improvement efforts is required. Examples include but are not limited to those that are listed in section IV.C.1 above.
   Participation in guidelines panels for AUA or SIU or other national/international society

2. Patient Care and Procedural Skills
   While quantity and type of patient care and procedural skills is highly variable for Clinician Track faculty, continued and sustained effort is required for promotion to Professor. Continued evidence of high-quality contributions to quality improvement efforts is required. Examples include but are not limited to those that are listed in section IV.C.2 above. Additional examples include:
   a. Development of patient education materials, decision-making models or materials and innovations in delivery of care that are recognized and/or used on a national level.
   b. Invitation to teach skills or patient care at national-level courses.
   c. Hard evidence of excellent clinical outcomes (provide statistics).
   d. Lead an ongoing program in global medicine or outreach to underserved area initiatives.
   e. Award for recognition of excellence in clinical service.
   f. Leading or participating in courses to teach skills or patient care at the national-level.

g. Leadership in global medicine or outreach to underserved area initiatives.
h. Testimony of excellence in patient care: e.g., letters to the chair from a patient or referring physician
i. Deliver a unique service that no one else in the area delivers or one that patients consistently travel for from outside the state.
j. Development of a new multi-disciplinary service line

3. Systems Based Practice
While quantity and type of examples for systems based practice is highly variable for Clinician Track faculty, continued and sustained effort is required for promotion to Professor. Continued evidence of high-quality contributions to systems improvement efforts is required. Examples include but are not limited to those that are listed in section IV.C.3
   a. Creation or participation in regional/national-level consensus conferences.
   b. Lead or participate national-level committees.

4. Medical Knowledge
While the quantity and type of examples for medical knowledge is highly variable for Clinician Track, continued and sustained effort is required to promotion to Professor. Additional efforts include but are not limited to those that are listed in section IV.C.4 above.

5. Interpersonal and Communication Skills
While the quantity and type of examples for interpersonal and communication skills is highly variable for Clinician Track, continued and sustained effort is required to promotion to Professor. Additional efforts include but are not limited to those that are listed in section IV.C.5 above. Further examples include:
   a. National-level courses or presentations on communication skills.

6. Professionalism
While the quantity and type of examples for professionalism is highly variable for Clinician Track, continued and sustained effort is required to promotion to Professor. Additional efforts include but are not limited to those that are listed in section IV.C.6 above. Further examples include:
   a. Leadership roles in discipline-specific national organizations, including but not limited to: committee chair, symposium organizer, session chair, grant reviewer, member of editorial board
   b. Leadership roles in the service to the Department, Medical School, or University on governance-related or policy making committees (e.g.: committee chair).
   c. Evidence of skills in ongoing mentorship for advancing the careers of early career professionals (e.g., continuing mentorship of pre-doctoral students, medical students, and residents, advancement of post-doctoral associates, junior faculty members, and other professional colleagues).
   d. Service to the community, or state, and public engagement.

7. Mentoring
Additionally, faculty seeking promotion to Professor are expected to provide effective mentoring and/or advising to early career faculty and learners at other levels, in compliance with collegiate and University policies. Mentoring includes activities that advocate for the professional development of learners.

V. PROCEDURES

A positive vote by more than 50% of eligible faculty who vote in the Department of Urology will be considered favorably for promotion in the Medical School. All full-time faculty holding appropriate appointment and rank, including those at affiliated sites, are eligible to vote on recommendations for promotion of candidates in the Clinician Track.

VI. PROCESS FOR UPDATING THIS STATEMENT

The Medical School will review its Clinician Track Statement at least every five years, or more frequently as needed. Revisions will be made by the Associate Dean for Faculty Affairs. The revisions will be presented to the Faculty Advisory Council. All Medical School faculty will be invited to review and give input on the Statement.

Departments will review their specific criteria at least every five years, and more frequently as needed. Approval will be obtained through a simple majority vote of the Department faculty and the date will be noted on the Department Clinician Track Statement.

History of Revisions:

Approved by the Department of Urology - November 2018
Approved by the Office of Faculty Affairs - December 2018
Updated by the Office of Faculty Affairs - October 2020