Criteria for Appointment and Promotion
Department of Family Medicine
Clinical Faculty – UW Medicine Employed
Approved by Full-Time Clinical Faculty Committee 9/19/01

General Criteria from the University of Washington Faculty Code

A clinical appointment in the appropriate rank is usually made to a person who holds a primary appointment with an outside agency or non-academic unit of the University, or who is in private practice. Clinical faculty make substantial contributions to University programs through their expertise, interest and motivation to work with the faculty in preparing and assisting with the instruction of students in practicum settings. Clinical appointments are annual, the question of their renewal shall be considered each year by the faculty of the department (or undepartmentalized college or school) in which they are held.

School of Medicine Criteria

Clinical faculty appointments are renewed annually as provided in the Faculty Code, on the basis of continued involvement in the academic mission of the relevant departments of the School of Medicine, including teaching, research, patient care, or administration related to the relevant department’s missions. At the time of initial appointment, the specific scope of responsibilities will be established by mutual agreement between the clinical faculty member and the department. These mutually agreed upon responsibilities will be reviewed annually and if necessary, updated to form the basis for renewal or non-renewal of the clinical faculty appointment. Promotion decisions will be based upon the quality of an individual’s contributions to the academic missions of the relevant department. Time in rank alone is not sufficient for promotion.

Department of Family Medicine Criteria

The term “Clinical Faculty – UW Medicine Employed” refers to a second clinical track within the University's clinical faculty ranks that exists in addition to the traditional track that comprises volunteer teaching faculty and faculty in the Affiliated Family Practice Residency Network.

Definition: Clinical Faculty—UW Medicine Employed is defined as a person;

- Whose appointment is 0.5 full time equivalent (FTE) or greater
- Whose sole employer for clinical practice is the University of Washington through either the Department of Family Medicine, or the University of Washington Physicians Network (UWPN)
- Whose primary responsibility is to provide direct clinical service and clinical teaching

Definition: Teaching

Teaching includes any activity in teaching or teaching administration that is of importance to the Department of Family Medicine or UW Medicine. In some of the descriptions of the faculty ranks below, a teaching commitment of 0.10 FTE is noted, but the Department recognizes that the ability to meet this level of commitment may be
limited by opportunity in some sites. Faculty in more junior ranks who are new in theiroles may have less teaching commitment than those faculty in senior ranks who have
had time to develop substantial teaching roles. The Department's faculty, however,
emphasize that teaching is expected in this clinical track, and becomes progressively
more important in promotion decisions to senior levels.

Definition: Clinical Care
Clinical care includes any activity in direct patient care or in the supervision of patient
care provided by residents.

UWPN faculty
Many of the clinicians employed in this clinical faculty track work at UWPN sites of
practice. Clinical competence is regularly monitored in UWPN using peer review,
monitoring of indicators, monitoring of medical records, monthly review of sentinel
events, review of new providers, supervision of trainees, patient satisfaction and
complaint review, review conducted at the time of recredentialing, and measures of
clinical productivity. When a clinician in UWPN is being considered for faculty
promotion, the Department will request from UWPN a report on the candidate's clinical
competence, based on the above information.

Non-UWPN faculty
When a clinician who is not based primarily at a UWPN site of practice is being
considered for faculty promotion, the Department chair or his designate will appoint a
committee to review clinical competence. This evaluation may include peer review,
monitoring of indicators, monitoring of medical records, review of sentinel events,
review of new providers, supervision of trainees, patient satisfaction and complaint
review, review conducted at the time of recredentialing, and measures of clinical
productivity. The evaluation will be tailored to match the systems in place within the
practice site, augmented by specially-solicited peer evaluations and other data on a case-
by-case basis.

The following represent the usual criteria for appointment and promotion with examples that
illustrate the expected level of achievement at each level.

Teaching Associate—University Employed

Teaching Associate will be the appointment title of non-physicians such as nurse practitioners,
physician assistants, social workers, and others practicing in UW Medicine clinical settings.

Clinical Instructor—University Employed

Clinical Instructor will be the usual initial appointment title for physicians. Clinical Instructor
rank requires completion of residency training or experience sufficient to meet Board
requirement or their equivalent. The appointee should begin to develop a role in teaching, with
the goal 10% FTE.
An example of a Clinical Instructor would be an individual who is hired upon completion of their residency training, or may be hired with previous experience but is in the first one or two years of employment with the University.

**Clinical Assistant Professor—University Employed**

Appointment or promotion to the rank of Clinical Assistant Professor will require sustained and substantial service to the University in the provision of high quality clinical care and teaching. Typically at least two years of service, documentation of sustained, high quality clinical care, and a teaching contribution of approximately 10% FTE time would be expected.

In general, Board certification in the relevant discipline (or an equivalent recognition) will be required for appointment or promotion to the rank of Clinical Assistant Professor or above. In rare circumstances, because of unusual qualifications or experience, the requirement for Board certification may be waived.

**Clinical Associate Professor—University Employed**

The rank of Clinical Associate Professor is reserved for those who have made high quality contributions of a substantial nature to the mission of the Department and the School over a prolonged period. There should be evidence of continued high quality clinical care, and local or regional recognition by peers and colleagues as evidenced by referrals from colleagues or requests as an information source within the discipline. The teaching contribution should be sustained at a minimum of 10% FTE over a prolonged period and there should be documentation of teaching excellence. Scholarly contributions, administrative responsibilities, and leadership will be considered at this rank.

An example of the level of achievement expected at this level would be a person who has served six years at the Clinical Assistant Professor level, consistently receives excellent evaluations for teaching contributions, maintains a high quality clinical practice, is referred patients by specialists in the region, and serves as a local expert in a particular aspect of family medicine. The person may be making an administrative contribution to the clinical operation, may be involved in scholarly presentations/publications, or may be providing leadership at the local or regional level.

**Clinical Professor—University Employed**

Appointment or promotion to this rank is based on national or international recognition as a leader in the discipline or exceptional levels of involvement, recognition and leadership at the regional level in patient care and teaching. Distinguished and substantial professional activity in teaching, patient care, service to the community and/or region over an extended period of time, and dedication to the programs of the Department and the School will be expected.

Examples of national or international recognition and leadership include scholarly publications, service in national or international professional societies, and national or international awards for
clinical care or teaching excellence. An example of an extended period of time would be a person who has spent six years or longer at the Clinical Associate Professor level.

**Emeritus**

Emeritus status will be considered for a clinical faculty member who has retired from clinical activities and whose scholarly teaching and clinical service record has been highly meritorious. Emeritus appointments will be reserved for those clinical faculty who have made sustained and substantial contributions to the mission of the Department and School. This rank requires at least ten years of prior service and achievement of the rank of Clinical Professor or Clinical Associate Professor.

**Appointment and Promotion Process**

A committee shall meet as often as it deems necessary to make recommendations on new appointments, annually review reappointments, and consider proposals for promotion. Membership of the committee will be:

- The Department Chair (committee chair)
- The Medical Director of the UWPN
- One clinical chief from the UWPN
- One representative from the UWMC Family Practice Residency Program
- One member at large appointed by the Department Chair

Appointments and promotions recommended by the committee shall be submitted to the regular voting faculty in the Department for review and decision.