

**RUSH MEDICAL COLLEGE  
COMMITTEE ON SENIOR FACULTY APPOINTMENTS AND PROMOTIONS (COSFAP)  
MANUAL OF POLICIES AND PROCEDURES**

**APPROVED BY:  
FACULTY COUNCIL  
RUSH MEDICAL COLLEGE  
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## **INTRODUCTION**

The Committee on Senior Faculty Appointments and Promotions (COSFAP) is one of the standing committees of the Rush Medical College. This Committee reviews faculty nominations for appointment or promotion to senior faculty ranks (i.e. Associate Professor or Professor) and is instrumental in creating and updating the policies, procedures, and criteria for these senior faculty appointments and promotions.

This document details, in depth, the workings and governance of COSFAP, the criteria for senior faculty appointment and/or promotion, the mechanism for presenting candidates for promotion, and the process of candidate evaluation.

As COSFAP reviews only senior faculty ranks, it does not review appointments or promotions of instructors, assistant professors, lecturers, visiting faculty, adjunct faculty, and joint appointments.

### **I. GOVERNANCE**

#### **A. Membership**

1. The membership of COSFAP is nominated and elected by the Committee on Committees (COC). COSFAP membership is composed of Rush Medical College faculty from all academic ranks and both the basic science and clinical disciplines. In general, the annual membership should include: 10 Professors, 4 Associate Professors, 4 Assistant Professors, and 2 students (one each from year 2 and year 3). The committee term of members will generally be 3 years, but may be longer on an individual basis at the discretion of the Committee on Committees.
2. A representative (aka adjunct member) from the office of Academic Affairs whose duties include the direct oversight of faculty affairs will also hold a position on the committee. This member monitors promotion trends and advancements both nationally and within Rush Medical College and Rush University and acts as an adjunct, non-voting, member of COSFAP. The responsibilities of this member are detailed in the "Officers" Section of this document (Section I, B, 4).
3. If a voting member repeatedly fails to attend meetings without previously informing the Chair or the Secretary, the Chair will issue a written notice of concern to that member. Continued unexcused failure of the member to attend the meetings shall result in Committee Chair requesting the member's resignation

from the Committee. Copies of the written notices of concern regarding attendance and requests for resignation shall be sent to the Committee on Committees and the Dean.

4. All other requests for resignation from the Committee must be addressed to the Chair, who will in turn notify the Committee on Committees.

B. Officers and Adjunct Member from Office of Academic Affairs

1. General

- a. Officers of the Committee shall consist of a Chair and Secretary.
- b. The outgoing Chair of the Committee or the Dean shall convene the Committee at the last meeting of the academic year (June) for the nomination of and vote for a new Committee Chair and Secretary. Nominees for Chair must hold the senior faculty rank of Professor. Nominees for Secretary may be of any faculty rank. Term of Chair and Secretary is for 1 year with option for renewal for another term as determined by the Committee. There is no cap on term renewals. Vote is by secret ballot of COSFAP members. A majority vote identifies the new Committee Chair and Secretary.

2. Chair

- a. The Chair (or in his/her absence, the Secretary) is charged with reviewing the packets of those nominated for senior faculty rank PRIOR to their presentation to the Committee. This ensures that packets contain all appropriate documentation and are appropriately prepared. See Section IV for candidate packet inclusions.
- b. The Chair is responsible for keeping the Dean informed of all actions of the Committee. Recommendations for APPROVAL of a candidate for promotion and/or appointment shall be reported to the Dean and the candidate's department chairperson by the Chair via written letter within 1 week of the Committee decision.
- c. The Chair is responsible for informing the appropriate department chairperson and the Dean of a

recommendation to DISAPPROVE a candidate for promotion and/or appointment by letter outlining specific reasons as recorded in the confidential executive minutes.

3. Secretary

- a. The Secretary will serve as Chair of the Committee in the absence of the COSFAP Chair.
- b. The Secretary is responsible for recording the general and executive meeting minutes.
  - i. The general meeting minutes are an overview of the month's meeting and contain the following items:
    - Name of Committee
    - Date of Meeting
    - Place of Meeting
    - Members present
    - Members absent
    - Meeting agenda items
    - Name of faculty nominated for promotion / appointment, proposed rank, and the assigned reviewers
    - Signature of Secretary or Chair
    - Date of submission of minutes

ii. The executive minutes are a confidential addendum to the general meeting minutes. They are a summary of the recommendations for approved or disapproved promotions/appointments. This executive addendum will summarize the reason for the negative recommendation and a breakdown of the vote. No copies of the addendum will be made or sent to Faculty Council or other committees/persons. These minutes are for internal COSFAP use only.

4. Adjunct Member from Office of Academic Affairs

The adjunct member's role is solely related to understanding current themes in Rush's promotion processes and in identifying areas for possible improvement, clarification, and revision of such policies. This member does not offer specific opinions about a

candidate's "promotability" or appointment during executive sessions; however the adjunct member may aid in discussions for clarification of general promotion's criteria, rules, and policies. This member is held to the same confidential standards of the committee

Additionally, this member may make recommendations to the committee for potential revisions to the promotions policies at Rush. The committee may decide if they will consider, evaluate, and vote on such recommendations. See section V on "COSFAP Policy Revision Guidelines" for further details on this process.

### C. COSFAP Meetings

1. Meetings are held on the fourth Wednesday of every month, unless there is advance notification of date change for holiday or other extenuating, COSFAP member conflicts (i.e. not enough COSFAP members able to attend meeting to achieve quorum). Additionally, meetings of the Committee can be called by the Chair or at the request of a majority of the Committee membership as needed.
2. The agenda and all pertinent documents will be sent at least one week prior to the meeting. Three to four primary reviewers, chosen by the Chair (or Secretary), will be assigned to each nominee for appointment or promotion. However, every Committee member is encouraged to be thoroughly familiar with all relevant information.
3. COSFAP meetings are divided into 2 sessions: general session and executive session. Both sessions are confidential.
  - a. The General Session is a working meeting for discussion of varied promotions' policies and procedures items. Additionally, this session is open to invitees who are non-committee members who are participating in COSFAP business as well as to department chairpersons who are invited to present details in support of a candidate.
  - b. The Executive Session is a closed forum for Committee members only and is a working session for detailed deliberations and evaluations of promotion/appointment candidates.

4. Conflict of Interest: A member of the Committee may not evaluate a candidate if a conflict of interest exists. A conflict of interest is present if the committee member's objectivity is impaired (in any way) by a direct or perceived relationship with the promotional candidate (i.e. research collaboration, close colleague in department or division, etc.). If a conflict exists, the committee member must step out of the room.

However, if the committee member is the COSFAP Chair or Secretary, then he/she may remain in the room for administrative purposes only and must abstain from evaluating or voting on the candidate.

5. A Committee member may write a letter of Endorsement for a candidate's promotion packet; however, the Committee member must not deliberate or vote on this candidate's packet. Participation in the candidate's review would represent a conflict of interest (see above).
6. Written opinions submitted by Committee members who are unable to attend are admissible and will be read by the Chair during executive session. Vote by mail, however, is not valid since the absent members do not have the benefit of the broadest possible information developed during the Executive Session Committee deliberations.

D. Process for Reviewing and Voting on Faculty Candidates for Senior Faculty Promotion or Appointment during Executive Session

1. During Executive Session, candidate packets are reviewed and presented to the Committee by the assigned reviewers. At least two of the three - four assigned primary reviewers must be present to consider a given nomination. An open discussion of the candidate occurs after the assigned reviewers provide their summaries and evaluations. Evaluation of all candidates for appointment and promotion are performed without bias via a careful, comprehensive, and objective review. Discussions are held in strictest confidence.
2. Votes on nominees for senior faculty appointment or promotion will not be taken unless a quorum of more than fifty percent of the voting members of the Committee is present. A simple majority will be required for approval or disapproval of a proposed promotion. In the event that less than 50%, but at least 1/3 of the membership is present, reports may be given

and discussed, but no formal decisions or recommendations may be made.

3. After discussion of a nominee for promotion/appointment, the COSFAP Chair will call for one of 2 possible actions per given candidate:

1. Proceed with a vote to approve or disapprove the candidate's application for promotion/appointment

OR

2. Table the packet and proceed with an action plan outlined below

4. To vote each committee member submits, via secret ballot, an approval, disapproval, or abstention vote. The Secretary tallies the votes and simple majority dictates decision.

IF there is a tie vote, there are 2 possible options:

- i. An immediate re-vote to achieve majority decision, if Committee decides this is appropriate. Simple majority dictates approval or disapproval as above.

- ii. Tabling of the packet (see below).

5. Tabling (i.e. pending) the applicant's packet until future sessions is utilized for candidate packets that the Committee believes need further clarification in order to assess if a candidate clearly does or does not satisfy the criteria for senior faculty promotion. If the Committee votes to table a candidate, the Committee will specify what items and evidence they require to make a complete assessment of the candidate. Then, the COSFAP Chair will contact the candidate's department chairperson to request the additional items. Additionally, the department chairperson may be invited to the following month's general session in order to provide further insight into the candidate.

IF the tabled candidate's department chairperson is a member of the current COSFAP committee and is present at the meeting, the Committee may decide to solicit insight from the chairperson at that time OR may decide to invite the chairperson to answer outstanding issues at the next COSFAP meeting.



6. If the Committee votes to approve a candidate's application for promotion, then the nomination is forwarded to the Faculty Council and the Dean for ultimate approval of promotion.
7. If the Committee proceeds with a vote to disapprove a candidate's promotion/appointment, a clear reason for such decision (not just the vote tally) has to be documented in the Committee's executive minutes and then communicated to the candidate's department chairperson and the Dean via written letter from the COSFAP Chair.
8. Any and all written or discussed information relevant to a recommendation for appointment or promotion must be held in strictest confidence by all Committee members. All confidential materials must be destroyed via Rush shred boxes and all electronic files and emails deleted after the committee meeting.

E. Appeal to the Committee

1. In the event the department chairperson wishes to appeal the committee's decision (disapproval or tabling of the promotion), he/she can resubmit the candidate's promotion packet with additional information and clarifications that address the concerns identified in the letter from the Committee Chair. This should be done within 60 days of receipt of the letter. In addition, the department chairperson may ask to attend the general session in order to provide additional information and answer questions of the Committee prior to re-evaluation/re-vote of a candidate.

F. Candidate Declined for Promotion

1. A candidate declined for promotion may:
  - a. Have their chairperson appeal the decision and proceed as above in Section E, Item 1.
  - b. Resubmit an application for promotion if and when they satisfactorily address all the concerns of the Committee and provide clear documentation remedying the Committee's concerns.

## **II. RUSH MEDICAL COLLEGE FACULTY ORGANIZATION**

This section is a brief outline of the faculty organization at Rush University and Rush Medical College. Precise definition of faculty organization can be found in the Rules for Governance for the Faculty and Students of Rush University and in the Policies and Procedures of the Rush Medical College.

### **A. Active Faculty**

1. The active faculty of Rush Medical College consists of physicians, scientists, educators, and other members of the institutions of the Rush University Medical Center system. Faculty's endeavors must directly contribute to or relate to the mission of Rush Medical College and/or its health care system. All members of the faculty of Rush Medical College shall be appointed in a department in accordance with the Rules for Governance of Faculty and Students of the Rush University and the Policies and Procedures of the Rush Medical College.
2. Ranks for Active Faculty
  - a. Instructor and Assistant Professor – are the first of the professorial faculty ranks. Faculty members must hold the title of assistant professor for a minimum of five years prior to pursuing promotion to senior faculty rank. However, under extraordinary circumstances and for exceptional progress, a faculty member may pursue promotion to senior faculty rank prior to the five-year minimum. Criteria must be clearly and easily met for this exception to be considered.
  - b. Associate Professor and Professor – are the senior professorial faculty ranks. These ranks are reflective of a faculty member's demonstration of marked growth and scholastic accomplishment in the educational, research, clinical, and/or service arenas. The basis for these ranks should, in large part, be based on the individual's total present and anticipated future output and commitment to their field of expertise in the biomedical sciences and to the Rush community. (Detailed criteria for promotion or appointment to senior rank are described in Section III).

**B. Joint Appointments of Active Faculty**

1. Joint appointments may be either:
  - a. Appointments made jointly to different departments of Rush Medical College.
  - b. Appointments made jointly to different colleges within Rush University.
2. Academic ranks in the secondary department should correspond to an individual's rank in his or her primary department.
3. Joint faculty appointments for Rush faculty members at the same rank from another department or college in Rush University DO NOT require COSFAP committee approval providing they have the approval of both the chairperson(s) of the department(s) and the Dean(s). These approvals are provided by Faculty Council.

**III. GUIDELINES FOR APPOINTMENTS OR PROMOTIONS TO SENIOR FACULTY RANK**

**A. General**

Any faculty member being nominated for a promotion to senior faculty rank should hold an advanced doctoral degree, including, but not limited to, a PhD, MD, DO, DDS or equivalent.

COSFAP will evaluate proposed promotions and appointments to senior faculty rank based on the criteria set forth below (Section III, Items B - E). Promotions are not granted simply as a result of time in service, and appointments of senior faculty rank at other institutions may be considered in assessing a proposed faculty appointment at Rush, but will not be the sole determinant in achieving a specific rank.

Additionally, and quite notably, all candidates for senior faculty promotion, regardless of the path chosen for one's promotion/appointment, are expected to demonstrate scholarly productivity (See Section for C for explicit definitions, rationale, and expectations).

**B. The Four Criteria Upon Which Senior Faculty Promotion/Appointment are Determined**

In general, appointment or promotion to senior faculty rank will be based on the performance and demonstration of academic excellence in four possible

criteria (as applicable). These criteria are central to Rush's mission as an academic institution. They are:

- 1) Research
- 2) Education
- 3) Clinical Excellence
- 4) Service (administrative leadership, community engagement, etc...)

The remaining sections in this document detail and itemize the specific criteria for senior faculty promotion and are divided into three main sub-sections (III,C & III,D & III,E). The first sub-section provides the definition and expectations of scholarly work, the second outlines the general requirements for promotion to Associate Professor and to Professor, and the third sets forth clear and specific definitions of the four criteria for promotional evaluation.

C. Scholarly Work and Productivity: Rationale, Definition, and Examples

All candidates for senior faculty promotion, regardless of the combination of criteria chosen for one's promotion/appointment, are expected to demonstrate evidence of scholarly productivity. This section details Rush's definition of scholarly work, Rush's rationale for why such work product is required, and some of the many examples of how a faculty member may fulfill this expectation (many more specific examples are provided throughout this document in the remaining sub-sections).

1. Scholarly activity is the work product produced by a faculty member in each of the four possible promotional criteria and is the way a faculty member demonstrates excellence in Education, Research, Clinical Excellence, and Service. It is defined as the synthesis of knowledge and the accompanying dedicated effort(s) to convey this knowledge to the local, regional, national, and/or international community. Scholarly activity does NOT necessitate production of original research or research projects. However, it does require the dissemination of synthesized ideas in a thoughtful and uniform approach both within Rush and beyond. This expectation is rooted in the philosophy that academic medicine /healthcare is a platform for and from which a faculty member will influence the medical/healthcare community, not only at Rush, but also well beyond its walls.
2. Organized dissemination of synthesized ideas from one's academic pursuits (e.g. scholarly work) encompasses many different forms. Examples are: presentations at meetings, peer reviewed publications, lectureships, peer reviewed abstracts, book chapters, white papers, position statements, online educational modules, institutional guidelines, monographs, quality

improvement protocols, clinical efficiency projects and protocols, safety reviews and guidelines, educational videos, etc.

3. Additionally, at Rush, there is an expectation that at least ONE of a candidate's scholarly work products/achievements is in the form of the written word (e.g. peer reviewed publications, peer reviewed abstracts, book chapters, white papers, position statements, online educational modules, institutional guidelines and/or protocols, quality improvement protocols, safety guidelines, etc....). This expectation is rooted in the philosophy that the written word is a valued part of the academic process and is a thoughtful and rigorous way to disseminate academic work product.

To be clear, it is NOT expected or anticipated or necessary that candidates for promotion need to have an extensive publication record (unless one of your criteria for promotion is research); however, it IS expected that a candidate, as part of their productivity, demonstrates some effort toward dissemination of thought, expertise, and ideas by the written word.

4. Examples of scholarly activity:
  - a. Authorship of scholarly publications in the general area of education, research, clinical excellence, and service
  - b. Authorship or editorship of books and other educational materials (e.g. books, chapters, reviews, non-peered reviewed articles, editorials, etc.)
  - c. Participation and active work in invited scientific or medical academic symposia, meetings, and lectures at the regional, national or international level (course creation, symposia organization, meeting oversight and synthesis, etc.)
  - d. Participation and leadership on health care quality, safety, and outcomes projects and initiatives (institutional, local, regional, national, international)
  - e. Participation and leadership on public health and community projects and initiatives (institutional, local, regional, national, international)
  - f. Participation and leadership on health care information technology creation, integration, and problem solving (i.e. software, hardware, electronic medical records, etc)

- g. Participation and leadership on health care education
- h. Participation and leadership in health care strategy and policy affecting institutional, local, regional, national and/or international forums
- i. Participation and leadership in health care economics and business modeling affecting institutional, local, regional, national and/or international forums
- j. Extramural review courses taught, directed or developed and the organization of regional, national or international conferences
- k. Election to prestigious scientific societies via peer review process
- l. Election to an organizational post or office in a professional society which requires service to the professional society
- m. Presentations at regional, national or international professional meetings, courses or seminars. There should be evidence of first or senior authored presentations in this area or explanation of the contributions in the multidisciplinary work.
- n. Participation in the peer review process by membership on institutional, regional, national or international scientific review boards (e.g. NIH study sections, DoD or NSF panels, foundation/funding agency review boards, etc), or review of scientific manuscripts for professional journals
- o. Membership on editorial boards of scientific or healthcare professional journals
- p. Media interviews
- q. Production of guidelines, policies, procedures for institutions, government agencies, health care/research societies, etc.

D. General Criteria for Appointment or Promotion to Associate Professor or Professor

1. Associate Professor

In general, candidates for the rank of Associate Professor should satisfy / pursue the following:

- a. Hold an advanced doctoral graduate degree. Special consideration for applicants with a master's degree will be evaluated on a case-by-case basis.
- b. Undergo and receive approval to pursue promotion to senior faculty rank from an internal departmental advisory committee, a division/section chief, if applicable, and the department chairperson. Chairpersons will present the potential candidates' packets to the Dean of Rush Medical College. The Dean will determine if packets will be advanced for promotion or appointment and evaluated by COSFAP. Packets will be reviewed by COSFAP and the Committee will make a recommendation for promotion, no promotion or tabling as discussed in section I, Items C - F. When a candidate is approved by COSFAP for appointment or promotion, the COSFAP recommendation for approval will be sent to the Faculty Council, and then, upon approval by the Dean, the Dean will forward the recommendation to the University Provost for final review and promotion/appointment.
- c. Hold the title of assistant professor at Rush Medical College or similar institution for a minimum of five years prior to pursuing promotion to senior faculty rank. However, under extraordinary circumstances and for exceptional progress, a faculty member may pursue promotion to senior faculty rank prior to the five-year minimum. Criteria for promotion must be clearly and easily met for this exception to be considered.
- d. Have demonstrated superior performance, growth, and the promise of leadership in at least **TWO** of the following four criteria: <sup>1</sup>education, <sup>2</sup>research, <sup>3</sup>clinical excellence, and <sup>4</sup>service, as applicable. Strong performance in the remaining criteria not identified as

the candidate's TWO main criteria must be demonstrated as well, if applicable.

- e. Although service is required of every faculty member pursuing senior faculty rank, it cannot be the SOLE criteria for promotion. However, in exceptional instances, it can be one of the 2 main criteria in a path to promotion. In this case, the faculty member must demonstrate outstanding achievement and mastery in management and leadership (i.e. building a division or program within the medical center or medical college OR building a program, society, or division outside of the Rush system that provides direct benefit to the Rush community or the regional, local, national or international health care community).
- f. Possess significant potential for leadership in academic activities and should, therefore, have achieved, at least, regional recognition in their chosen area(s) of expertise.
- g. Must meet the basic standards of Rush's expectation for faculty professionalism. This is defined by the ICARE values. These five values, Innovation, Collaboration, Accountability, Respect, and Excellence, convey the philosophy behind every decision made by a Rush employee and set the standard for an employee's professional behavior within and on behalf of the Rush University healthcare system.

## 2. Professor

In general, candidates for the rank of Professor should satisfy / pursue the following:

- a. Must hold an advanced doctoral graduate degree.
- b. Undergo and receive approval to pursue promotion to senior faculty rank from an internal departmental advisory committee, a division/section chief, if applicable, and the department chairperson. Chairpersons will present the potential candidates' packets to the Dean of Rush Medical College. The Dean will determine if packets will be advanced for promotion or appointment and evaluated by COSFAP. Packets will be reviewed by COSFAP and the Committee will make a



recommendation for promotion, no promotion or tabling as discussed in section I, Items C - F. When a candidate is approved by COSFAP for appointment or promotion, the COSFAP recommendation for approval will be sent to the Faculty Council, and then, upon approval by the Dean, the Dean will forward the recommendation to the University Provost for final review and promotion/appointment.

- c. Hold the title of associate professor at Rush Medical College or similar institution for a minimum of five years prior to pursuing promotion to Professor. However, under extraordinary circumstances and for exceptional progress, a faculty member may pursue promotion to Professor rank prior to the five-year minimum. Criteria must be clearly and easily met for this exception to be considered.
- d. Demonstrate superior performance, continued productivity, and proven leadership in at least **THREE** of the following four criteria: <sup>1</sup>education, <sup>2</sup>research, <sup>3</sup>clinical excellence, and <sup>4</sup>service, as applicable. Strong performance in the remaining criteria not identified as primary must be demonstrated as well, if applicable.
- e. Although service is required of every faculty member pursuing senior faculty rank, it cannot be the SOLE criteria for promotion. However, in exceptional instances, it can be one of the 3 main criteria in a path to promotion. In this case, the faculty member must demonstrate outstanding achievement and mastery in management and leadership (i.e. building a division or program within the medical center or medical college OR building a program, society, or division outside of the Rush system that provides direct benefit to the Rush community or the regional, local, national or international health care community).
- f. Demonstrate evidence of proven academic leadership and acquired national or international recognition in their area(s) of expertise.
- g. Must meet the basic standards of Rush's expectation for

faculty professionalism. This is defined by the ICARE values. These five values, Innovation, Collaboration, Accountability, Respect, and Excellence, convey the philosophy behind every decision made by a Rush employee and set the standard for an employee's professional behavior within and on behalf of the Rush University healthcare system.

E. Specific Criteria for Promotion and Appointment to Senior Faculty Ranks

The following sections describe, in detail, each of the 4 performance criteria and the evidence required to document excellence for each criteria.

1. Education

Education is one of the fundamental functions of Rush Medical College and one of the primary criteria for senior faculty rank. Excellence in education requires an objective, up-to-date, accurate and balanced command of the candidate's field coupled with expertise in communicating / disseminating this knowledge to students, trainees, mentees, and peers. Education applies to the biomedical, educational, public health, and/or clinical, health care quality, safety, and delivery fields.

Excellence will be evaluated based on quality, quantity, innovation, creativity and evidence of leadership in education. Scholarly work product as outlined and defined in Section III, C is required. Quantitative and qualitative documentation with details that demonstrate impact as well as type of derived work product is encouraged. Documentation in as many ways as possible is necessary and helpful to convey a candidate's professional story.

The following are examples of significant achievement in the criteria of education and should serve as a guide for the types of activities and supporting documents which demonstrate scholarly achievement (see Section III, item C) and a candidate's excellence in education:

- a. Creation of educational exercise(s) by the candidate that serve(s) as a model for other institutions (i.e., letters from colleagues stating this point, published educational tutorials, novel teaching approaches and/or courses/lectures developed by the candidate adapted by

- other institutions, development of on-line educational courses and resources, etc)
- b. Teaching via classroom didactics/lectures/educational sessions/medical rounds/simulation courses/bedside teaching
  - c. Development/directorship of programs, courses, classes, or clerkships
  - d. Mentorship: students/residents/fellows/trainees/peers and the number of contact hours with each mentee, and the type of mentorship relationships, mentee projects, etc.
  - e. Achievement of educational awards
  - f. Acquisition of visiting professorships at other academic institutions
  - g. Invitation for educational lectureships/workshops by professional societies, medical colleges, hospital systems, government agencies, etc.
  - h. Scholarly work in textbooks and review monographs, or reviews published in peer review journals re: educational work or educational research
  - i. Development and/or execution of web based educational forums
  - j. Publication of original papers in peer review journals based upon teaching or course development in areas related to biomedical, healthcare and/or postgraduate education
  - k. Development of novel educational resources with supporting documentation (i.e., description in letters of Endorsement or letter from the department chairperson)
  - l. Outline of achievements of former trainees and mentees
  - m. Membership in national, international, or inter-institutional educational activities and educational societies

- n. Interprofessional education of students, trainees, mentees, or peers through course work, seminars, professional society meetings, lectures, etc.
- o. Original educational research supported by intramural or extramural funding

This needs to be documented in full detail in candidate's CV (funding agency, type of the grant, years, dollar amount, role on the project, etc).

To document the above, please submit:

- a. A list of intramural or extramural educational sessions over the previous 5 years with contact hours, methods of teaching (lecture, panel, group discussion) and level of students/trainees. Include only those instructional exercises in which the candidate is the session moderator, lecturer, or content originator (must be in CV)
- b. Letters of Endorsement from colleagues, former students, residents, trainees, and mentees. Letters cannot come from individuals who are currently in a dependent position because of the potential for conflict of interest.
- c. Quantitative and qualitative performance evaluations from educational sessions
- d. Written evaluations from course directors for courses in which the candidate teaches or taught
- e. A selection of educational material(s) prepared for teaching sessions or courses.

Of note, course directorship or other administrative activities not involving direct teaching or the development of educational material by the candidate may be considered in the category of Service.

## 2. Research

Research is another primary criteria for senior faculty appointment. Research is defined as an organized scientific effort to extend knowledge with a mission-oriented investigation

or experiment aimed at the discovery and interpretation of facts, the revision of accepted hypotheses or laws in light of new facts, or the practical application of new or revised hypotheses or laws. This applies to the biomedical, educational, public health, and/or clinical, health care quality, safety, and delivery fields. This work product is then disseminated to the scientific/medical/healthcare/global community. For candidates choosing research as a promotion criteria, candidates must demonstrate scholarly work product as published, peer reviewed papers. However, several other types of scholarly work are expected as well (See Section III, item C and below for specific example).

Excellence in research is determined by:

- a. Demonstration of proven record of creative, high quality, significant work.

Candidates who are proposed for appointment or promotion on the basis of research are **required to identify by asterisk in their CV three or more of their key publications**. The publications identified should be the candidate's most important research contributions and elucidate their area of expertise and chosen career path. These publications should be from the last 5 years as these provide the best picture of the candidates continued productivity and potential for future scientific contribution and forward momentum.

- b. Independence of research accomplishments.

In cases where the candidate's bibliography contains many multi-authored articles, documentation of the independent contribution of the candidate should be provided. This documentation may be done by first authored original research articles or a delineation of the candidates unique contributions to the research team when the author has very few first authored manuscripts.

Examples of participation in multi-authored publications include description of participation (interdisciplinary/collaborative projects, multi-center studies; program projects, statistical contributions, data gathering, manuscript preparation, methodology

planning and execution, grant writing, database maintenance, experiment execution, substantial collaborative effort, unique expertise added to the project, etc...)

- c. Extramural funding to support independent research activities.

This needs to be documented in full detail in candidate's CV (funding agency, type of the grant, years, dollar amount, role on the project, etc). Faculty, for whom research is the primary promotion criteria, are required to provide evidence of independent funding from the NIH, DoD, NSF or other peer-reviewed agencies or foundations. In exceptional cases, substantial funding from industry might be considered.

- d. Issue of a patent and/or development of new or novel technology. This needs to be documented in detail.
- e. Evidence of mentorship of trainees (students, residents, colleagues, post-doctoral students) and the types of projects, activities, research projects in which mentoring occurred.
- f. Evidence of lectures and presentations to educate students, colleagues, peers, etc. on one's research endeavors

### 3. Clinical Excellence

Clinical excellence is another primary criteria for senior faculty promotion. Faculty who are put forth for promotion under clinical excellence will be evaluated on the QUALITY and IMPACT of their clinical service and its accompanying CONTRIBUTIONS to advance health care quality, delivery, safety, and outcomes. Such clinical work must reach beyond one's daily patient care duties and expand to demonstrate a mastery and achievement in care delivery projects that foster and facilitate quality care. Quality care (as defined by the National Quality Forum) is composed of the following elements:

- Beneficial Care
- Patient Centered Care

- Efficient Care
- Timely Care
- Safe Care
- Equitable Care

A faculty member who is pursuing promotion in clinical excellence must partake and exemplify success and achievement in one, or ideally, more of the above components of care. Impact and contributions may have institutional, local, regional, national, or international effects. Of note, solely providing direct patient care at Rush and/or one of its affiliates over a certain period of time is NOT sufficient as a basis for senior faculty promotion. Mastery and achievement in scholarly projects as a result of work in the clinical arena must be demonstrated as defined above and below.

The following are examples of scholarly work (see Section III, item C for complete details on scholarly productivity requirements) that demonstrate clinical excellence:

a. Participation and leadership in projects, committees, and/or research that (a brief sample of projects):

- Decrease infection rates
- Decrease readmission rates
- Improve family centered care
- Improve through-put
- Improve resource utilization
- Decrease expenditures while improving care
- Improve patient satisfaction
- Improve discharge processes
- Facilitate timely care
- Improve provider/patient communication
- Improve follow-up rates

- Improve patient compliance
- Improve clinical treatment success rates
- Diminish adverse patient care events
- Improve community engagement and outpatient management of patients and/or their families
- Safely integrate technology into health care via IT, Electronic Medical Records, patient monitoring systems, etc.
- Introduce, apply, or evaluate new or existing clinical devices, procedures, and/or treatments that may improve patient care and/or outcomes
- Develop and/or implement new or unique patient care models in the inpatient units and/or outpatient clinics that significantly impact quality care and/or outcomes
- Deliver clinical work in the community or globally (free clinics, charity care, international health) that impacts community engagement, care, etc.
- Facilitate and/or create organized and thoughtful approaches to interdisciplinary / multidisciplinary care among providers to improve upon and provide quality care and outcomes

Supporting documents must include a detailed summary of participation in above projects in addition to supporting letters from department chairpersons or section directors or from project-leader colleagues with whom the clinician collaborated. Quantitative and qualitative results of interventions should be provided and the IMPACT of the interventions, projects, or care models should be clearly outlined.

It is strongly encouraged and expected that clinical excellence candidates have produced at least some written scholarly work derived from their clinical excellence endeavors.

Additionally, any clinician who is seeking promotion under clinical excellence must, at a baseline, demonstrate superior clinical care skills in their chosen field as evidenced by the practice of safe, quality, and professional care. Examples to demonstrate such care are:



- Unsolicited commentary from patients, including thank you letters for excellent clinical care
- Letters from colleagues or former trainees attesting to one's clinical acumen and expertise
- Letter(s) from division chief, department chairperson attesting to one's skills and evidence based practices
- Commendation from division or department for excellence in clinical care
- Clinical care awards
- Evaluations from members of the clinician's multidisciplinary team including resident, nurse practitioners, nurses, colleagues, etc.

#### 4. Service

Service is defined as management and/or leadership in the administrative and/or infrastructural workings of an institution, community, and/or regional organization that aims to further health care, health policy, biomedical education, research, etc. Leadership within the Rush health care system and outside the Rush system are a necessary and important part of a senior faculty member's role as mentor and influencer in the health care community. Major commitment to leadership roles must be documented clearly with responsibilities. Supporting letters from committee chairs, the Dean or President of the Medical Staff or colleagues on committees, professional societies, etc. are encouraged.

Although service is required of every faculty member pursuing senior faculty rank, it cannot be the SOLE criteria for promotion. However, in exceptional instances, it can be one of the 2 or 3 main criteria in a path to promotion. In this case, the faculty member must demonstrate outstanding achievement and mastery in management and leadership (i.e. building a division or program within the medical center or medical college OR building a program, society, or division outside of the Rush system that provides direct benefit to the Rush community or the regional, local, national and/or international health care community).

Examples of excellence in service include:

- a. Leadership in planning and/or developing programs and policy at Rush Medical College, Rush University, and Rush University Medical Center
- b. Leadership in planning and/or developing critical strategy and/or infrastructure (divisions, departments, sections, care units, etc) essential to the growth and success of Rush Medical College, Rush University, and Rush University Medical Center
- c. Leadership and management in the above activities (a) and (b) at other medical colleges, universities, medical/professional societies, journals, governments, etc. that establish reputations for senior faculty in the regional, national, and international community
- d. Community Service / Community Health Care/ Global Health Care through creation of community health clinics and /or educational outreach to at risk patient populations
- e. Election to clinical societies or offices in health care, health policy, and/or biomedical journals, organizations, and societies
- f. Active membership on regional or national clinical advisory boards or committees
- g. Active membership on Rush Medical College and Medical Staff committees. Faculty are expected to be represented in the various Medical College and/or Medical Staff committees.
- h. Course directorships and other administrative responsibilities for activities within the Medical Center or the Rush System for Health that support the academic mission of the Institution
- i. Evidence of successful entrepreneurship essential to the growth and success of Rush Medical College, Rush University, and Rush University Medical Center

#### **IV. PREPARATION OF NOMINATIONS FOR SENIOR FACULTY APPOINTMENT OR PROMOTION**

This section of the guidelines is intended to provide a comprehensive description of the materials required for a complete promotion's packet.

The promotion packet should consist of the following clearly identified sections and subsections:

- A. Department Chairperson's letter
- B. Letters of support
  - 1. Letters of Evaluation
  - 2. Letters of Endorsement
- C. Curriculum Vitae
- D. Identified by asterisk key peer-reviewed publications (required if promotion includes research excellence)
- E. Educational documents (required if promotion includes educational excellence)
- F. Clinical excellence documents (required if promotion includes clinical excellence)
- G. Service excellence documents (required if promotion includes service excellence)

Of note, it has been the experience of COSFAP that most delays in evaluating nominations for senior faculty rank stem from incomplete promotion packets or inadequate documentation of the candidate's excellence and achievements in their chosen criteria. Each candidate's packet and CV should be put together in a way that clearly highlights the candidate's areas of expertise and reputation, and clearly demonstrate scholarly productivity in the candidate's chosen combination of promotional criteria. Incomplete packets will be returned to the department chairperson. An itemized list of missing items will be provided to the candidate / department chairperson to help facilitate completion of the packet. The candidate has up to one year to complete the packet, and if it is not completed within a year, it will be considered out of date and a new application packet will need to be submitted.

A. Department Chairperson's Letter

This letter should originate with the nominee's department chairperson and should be addressed to the Dean of the Medical College. It should begin with the candidate's name, present rank, and proposed rank. The next sentence should clearly state the 2 or 3 main criteria on which the candidate is being put forth for promotion (i.e. Education, Research, Clinical excellence, Service).

The next paragraph of the letter should describe the candidate's area(s) of expertise, their role in the department, and the over-arching trajectory of their career and its development. Subsequent paragraphs will speak to each promotional criteria, the supporting evidence to demonstrate excellence in that criteria, and then clearly state the case for the candidate's scholarly success/productivity in that criteria. His/her regional, national, and/or

international reputation should be noted as applicable. The current percentage of effort devoted to each criteria should be noted as it helps the committee form a contextual and informed assessment of a candidate's scholarly productivity and contributions within each criteria.

1. Education

The nominee's educational responsibilities, courses in which he/she has participated, contact hours, and the types of students and/or residents/fellows/trainees/peers/mentees taught in the last five years should be described. The letter should communicate the quantity, quality, originality, significance, impact, and continuity of the nominee's educational activities. Additional documentation of the merit and value of nominee's performance should be provided in the letters of Endorsement and letters of Evaluation that accompany the nomination.

2. Research

The quality, originality, significance, impact, and continuity of the candidate's research should be provided. In those instances where a significant fraction of the nominee's research involves collaborations with other investigators, the extent and nature of his/her contribution should be indicated. When deemed significant, a description of work in progress may be included. The department chairperson should also provide an overall assessment of the nominee's regional, national or international recognition.

3. Clinical Excellence

Faculty who are put forth for promotion under clinical excellence will be evaluated on the impact and quality of their academic clinical endeavors and its accompanying contributions to advance health care quality, safety, delivery, and outcomes. Such clinical work must reach beyond one's daily patient care duties and expand to demonstrate a scholarly approach to clinical care with a mastery and achievement of care delivery projects that foster and facilitate quality care. The chairperson's letter must clearly summarize these projects and contributions to quality care.

4. Service

Service is defined as management and/or leadership in the administrative and/or infrastructural workings of an institution, community, and/or regional, national, and/or international organization that aims to further health care, health policy, biomedical education, clinical excellence, research, etc. Leadership within the Rush health care and outside of the Rush system is critical. Major commitment and leadership roles must be documented clearly with responsibilities.

5. Letters of support

This paragraph should provide a short summary of the letters of support, and clearly delineate which letters are Evaluations and which are Endorsements. For the letters of Evaluation, this paragraph must also include a brief statement of the qualifications of the individuals that make them an authority in their field and eligible to provide such an evaluation.

6. Summary

The final paragraph of the department chairperson's letter must include the recommendation for promotion and make note that the applicant meets Rush's professionalism standard (see Section III, item D. 1, g or Section III, item D. 2, g)

B. Letters of Support (Letters of Evaluation and Letters of Endorsement).

Supporting letters provide essential documentation in evaluating nominations for senior faculty rank. Letters of support are of two types:

- Letters of Evaluation
- Letters of Endorsement

All letters should be signed or contain electronic signature.

1. Letters of Evaluation

The letters of Evaluation are a key part of the material used to evaluate a nomination for senior faculty rank. COSFAP uses these letters to provide an independent assessment of the nominee's past and potential future academic contributions to Rush Medical College. The letters must, therefore, come from individuals outside of Rush and its affiliated institutions and not from collaborators or mentors with whom the candidate has worked in the past five years. In the case of individuals who

have been at other institutions within the past five years, letters of Evaluation cannot be solicited from colleagues or trainees from that institution.

Letter writers should be individuals who are recognized authorities in the nominee's discipline and can verify the exemplary performance and impact of the nominee in his/her chosen pathway/criteria for promotion. Letters should come from individuals with a senior faculty rank or equivalent rank, as may be the case with letters from experts at institutions which do not provide academic rank (e.g. NIH, CDC, international experts, etc.).

The individuals providing letters of Evaluation should indicate whether they believe that the nominee would qualify for promotion to the proposed faculty rank or its equivalent.

The department chairperson may include an example of the letter he/she sent to the evaluators so that COSFAP can better interpret the letters of Evaluation. Additionally, COSFAP may request additional letters of Evaluation.

A minimum of three letters of Evaluation for the proposed rank of Associate Professor and a minimum of five letters of evaluation for the proposed rank of Professor must be provided. It is recommended that the majority (2 of 3 for Associate Professor and 3 or more for Professor) of the letters come from institutions where the nominee has never been a faculty member. Letters from former mentors can be viewed as Evaluation letters if such letters provide an independent assessment of the nominee, if the nominee has demonstrated sufficient independence from the mentor, and if the nominee has not worked with the mentor for the past 5 years.

## 2. Letters of Endorsement

Letters of Endorsement are supportive letters that speak to the impact, quality, and professional nature of a candidate from people with whom the candidate has worked closely. These letters usually originate from close colleagues or former trainees of the nominee. In the case of nominees who have been at another institution within the past five years, letters from associates at the prior institution are considered letters of Endorsement, not letters of Evaluation. Letters of Endorsement from prior trainees, course directors, and colleagues are

especially helpful and important to evaluate a candidate's educational, research, leadership, and clinical skills as well as his/her professionalism. Additionally, letters which come from former students and mentees who are now actively engaged in academia and thriving in their own careers in the USA and abroad provide evidence of a nominee's impact on health care outside of the Rush health system.

Of note, a Committee member may write a letter of endorsement for a candidate's promotion packet; however, the Committee member must not deliberate or vote on this candidate's packet. Participation in the candidate's review would represent a conflict of interest (see Section C, 5).

C. Curriculum Vitae (CV)

**A standard template endorsed by the Committee should be used in preparing CV.** The CV is a vital component to the nominee's packet and is critical to providing specifics and details to the candidate's career and its development. It is the candidate's responsibility and the expectation of the committee that all information in the CV is up to date, detailed, inclusive of all achievements and scholarly work, and accurate. Minimum font size should be no smaller than 11.

D. Publications (as applicable)

A minimum of three peer reviewed papers or scholarly published work products, if available, identified in the CV by asterisk, that highlight the candidate's expertise and excellence in their chosen criteria

E. Educational Documents (as applicable)

Examples of a candidate's teaching syllabi, educational curricula, evaluations of teaching acumen by trainees, publications on educational efforts, etc.

F. Clinical Excellence Documents (as applicable)

Examples of protocols, publications, guidelines for clinical excellence projects and evidence of exemplary clinical care performance

G. Service Documents (as applicable)

Examples of protocols, publications, guidelines for projects that demonstrate exemplary service performance

**V. Revisions to COSFAP Manual of Policies and Procedures**

This manual may be reviewed and updated by ad hoc changes and/or amendments as proposed and voted on by the standing COSFAP Committee at any time. Proposed changes must be reviewed by the entire Committee and by the adjunct member from the Office for Academic Affairs. The Committee will vote on proposed changes and a simple majority will result in an approval of the proposed changes. The manual with its Committee-approved changes must then be sent to Committee on Committees and then to Faculty Council for review and approval. If the Faculty Council and Committee on Committee accept changes, then the proposed changes will be sent to the Dean for final approval.

Additionally, if no inter-current changes are proposed, the Committee will review this manual every 5 years in order to maintain its currency with national trends in promotions in academic medical institutions and within the Rush University and Rush University Medical Center system.

APPENDIX: TO BE PREPARED

APPENDIX A: COSFAP EVALUATION SHEETS

APPENDIX B: RUSH CV TEMPLATE (needs to be more extensive and in hyperlink to electronic format)

APPENDIX C: SAMPLE CHAIR'S LETTER (PHD, MD)

APPENDIX D: SAMPLE CHAIR'S REQUEST FOR EVALUATION/ENDORSEMENT LETTER

APPENDIX E: SAMPLE EVALUATION LETTER

APPENDIX F: SAMPLE ENDORSEMENT LETTER

APPENDIX H: CLINICAL EXCELLENCE MEETING QUALITY CARE CRITERIA DOCUMENT

Revised 6/15/2016