

**BYLAWS OF THE SCHOOL FACULTY COUNCIL**  
**UNIVERSITY OF MIAMI MILLER SCHOOL OF MEDICINE**

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Signed by:



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Joseph J. Echevarria

Interim Executive Vice President for Health Affairs  
Interim Chief Executive Officer, UHealth  
University of Miami  
Leonard M. Miller School of Medicine

Signed by:



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Henri R. Ford, MD, MHA  
Dean and Chief Academic Officer  
University of Miami  
Leonard M. Miller School of Medicine

Signed by:



768476BA5A8644F...

Sanjoy K. Bhattacharya, M.Tech., Ph.D.  
Professor of Ophthalmology  
Speaker, Medical School Faculty Council

## TABLE OF CONTENTS

PREAMBLE .....	4
SCHOOL COUNCIL STANDING COMMITTEES .....	7
FACULTY GUIDELINES FOR APPOINTMENT, PROMOTION AND TENURE .....	17
HIRING AND ONBOARDING OF RESEARCH ASSISTANT PROFESSORS .....	44
FACULTY COMPENSATION.....	46
UM CONSULTING POLICY .....	51
GUIDELINES – PART-TIME FACULTY AT UMMSM .....	55
ASSOCIATED FACULTY AT UMMSM .....	63
Guidelines for Searches for Department Chairs (and Formal Leadership Positions of Other Academic Units) at UMMSM .....	70
APPENDICES	
A. Decanal Dean Review Form.....	76
B. Faculty Assessment Form .....	78
C. UM CV Template .....	87
D. Educator Portfolio Guidelines .....	89
E. Clinical Portfolio Guidelines.....	98
F. Dean/Chair Evaluation Form .....	99
G. University of Miami Required Addendum to Faculty Consulting or Related Agreement.....	110

## Abbreviations

ACGME- Accreditation Council Graduate Medical Education  
AHRQ – Agency for Health Care Research and Quality  
EVP/CEO - Executive Vice President/ Chief Executive Officer  
EVP HA - Executive Vice President for Health Affairs  
FTE- Full Time Equivalent  
HRSA - Human Resource Service Administration  
JMMC - Jackson Memorial Medical Center  
NIH - National Institutes of Health  
NSF- National Science Foundation  
PCORI – Patient-Centered Outcomes Research Institute  
PI/MPI – Principal Investigator / Multiple Principal Investigator  
UHealth – University of Miami Health System  
UMMG – University of Miami Medical Group  
UMMSM – University of Miami Miller School of Medicine

## **PREAMBLE**

This document describes the role of the faculty in the governance of the faculty of the Miller School of Medicine. In all its aspects, it is meant to be in conformance with the policies of the University of Miami as set forth in the Faculty Manual.

### **1. DIVERSITY AND INCLUSION**

The Medical School Faculty Council and its committees concur with implicit bias and diversity training as best practice through the Association of American Medical Colleges (AAMC) and other groups, and endorse training for all faculty, as appropriate. *University of Miami Miller School of Medicine uses the Underrepresented in Medicine (URiM) definitions from the AAMC to define the specific diversity categories to guide the recruitment and retention activities for the student body, faculty, and administrative staff.*

### **2. UHEALTH**

On August 24, 2018 with the constitution of a separate board of trustees, UHealth heralded a degree of separation from the Medical School. In order to have agreement of faculty governance, an Advisory Committee has been created to ensure bilateral communication between UHealth and the Medical School. The Faculty Council remains the governing body of the Medical School Faculty, whose Bylaws will guide all activities of faculty life at UHealth and the Medical School. The Faculty Council operates by the explicit consent of all faculty, as affirmed by a yearly vote in which all voting faculty of the Medical School may participate. The Faculty Council is the Medical School's highest policy-making body empowered by section A5 of the University of Miami Faculty Manual approved by Faculty Senate. Council policies will be followed by other bodies (e.g., University of Miami Medical Group -- UMMG) to ensure that the School of Medicine, UHealth, and the Faculty Council's policies are in alignment.

### **3. DUTIES OF THE COUNCIL**

The Council shall respond to the concerns of the Faculty on all matters related to the welfare of the School. In accordance with the Faculty Manual the Council shall be established as the executive agency of the School. The Council and the institutional leadership share the responsibilities for governance. The Council shall have the following duties and responsibilities:

- (1) The Council shall act as the advisory body for oversight of academic planning, education and research policy, and the general welfare of the School;
- (2) The Council shall elect Committees of the School Faculty;
- (3) The Council shall act as confidential counsel to the Dean of the School in any matter submitted by the Dean;
- (4) The Council or its designee (Leadership of the Council) shall set the date and hour and prepare the agenda for all regular meetings of the School Faculty Council;
- (5) The Council shall include in the agenda any matter requested in writing by the voting members of the School of Medicine (SOM) faculty;
- (6) The Council may offer recommendations to the School Faculty concerning proposed actions; it may act for the School Faculty, as authorized annually by the School Faculty, and report such actions at the next meeting of the School Faculty. The authority of the Council to elect committees of the School Faculty in no way limits the authority of the Dean to appoint *ad hoc* committees from the School Faculty to advise the Dean. The Council is empowered to create *ad hoc* Committees to study issues of importance. The Council shall review issues brought to its attention regarding Policies and Procedures of the Faculty, as well as propose Guidelines to be endorsed by the Faculty and the Dean.

#### **4. COMPOSITION OF THE COUNCIL**

Members of the School Faculty Council shall be elected from among the University Faculty of the Miller School of Medicine. The Council shall consist of one representative from each department, including the Calder Library. Council members shall be elected by the departmental faculty eligible to vote. All departments will also have an alternate designated member representing the regular member in the event of emergencies. Three additional at large members will be elected via a School-wide election in which all University Faculty are eligible to vote. The term length of Council members (including alternates) shall be three years.

Nomination to membership shall be by a two-step process: All University Faculty of the Miller School of Medicine shall be polled each year, generally in February, to indicate their willingness to serve beginning the following academic year. The duties and responsibilities of Council membership will be described in connection with the polling process. A second communication, generally in March, will then solicit nominations from among those who have indicated their willingness to serve. The nomination and election process may, at the discretion of the Council and in accordance with University rules, be accomplished electronically. The election ballot will include the names of the three individuals from each department who received the highest number of nominations. The individual receiving the highest number of votes will be elected and the individual receiving the second highest will serve as an alternate member. If a Council member can no longer serve, the alternate

member from that department will complete the term. The term begins during the Council transition meeting in May.

#### **5. COUNCIL ATTENDANCE POLICY**

Members of the School Council are expected to participate in all of its activities, including attending all meetings and committee assignments. Unexcused absences from more than 50% of the meetings will be subject to removal from their position. Members must submit their request for an excused absence, in advance of the meeting, to the Speaker. Members (or designated Alternate) who do not comply with the requirement of being present for at least 50% of the meetings will be notified in writing by the Speaker they are removed from the Council. The affected member has the right to petition the Council in writing within thirty days of written notification stating the reasons as to why such a step should not be taken.

#### **6. OFFICERS OF THE COUNCIL**

In accordance with Faculty Manual section A5, subsection A5.3, the Speaker is the Presiding officer and Chair of the Faculty Council. The Medical School Dean (hereafter called the Dean) serves as ex officio member and co-chair of the Council. The Dean is a non-voting member of the Council unless called upon to break a tie vote. The EVP/CEO also serves as an ex-officio non-voting member of the Council. The Dean and EVP are expected to attend every other meeting of the Council when possible. The Dean may propose an agenda item to the Council leadership. The Dean may request urgent and/or emergency Council meetings as necessary.

The Council shall elect three officers annually: a Speaker, a First Vice-Speaker and a Second Vice-Speaker. Each officer will serve a one year-term. This election shall take place generally at the May transition meeting of the Council, after the election the incoming Council is announced. This meeting will include retiring and newly elected members, all of whom shall vote.

#### **Duties of the Speaker:**

- A. Presiding at meetings of the Council as noted in the faculty manual section A5.
- B. Administering the activities of the Council, including scheduling meetings, setting the agenda for the Meetings and, in conjunction with the Dean, setting the agenda for meetings.
- C. Assuring that minutes of the meetings are reviewed and signed by the Speaker. The minutes are maintained in the Office of Faculty Affairs. The Speaker will provide a summary of annual accomplishments of the Council during the May transition meeting.

**Duties of the Vice-Speakers:**

The Vice-Speakers shall assist the Speaker in the administrative affairs of the Council and shall assume the duties of the Speaker in the Speaker's absence. In the event the Speaker is unable to serve out the term for which s/he has been elected; the First Vice-Speaker will assume the role of Speaker. The Second Vice-Speaker shall become First Vice-Speaker and the Council shall, from among its members, elect a new Second Vice-Speaker.

**7. MEETINGS**

In accordance with the Faculty Manual, meetings of the entire Faculty of the School shall be held once each semester year as noted in the Faculty Manual B2.1. The time and agenda for this meeting will be set jointly by the Speaker and the Dean in consultation with the Council and EVP/CEO. Scheduled meetings of the Council shall be held twice monthly.

The agenda will be determined alternately by the Speaker (Speaker's meeting) or the Dean (Dean's meeting) and communicated to the Secretary of the Council for publication and distribution prior to the meeting. All meetings will be open to all faculty members, except for executive sessions, which may from time to time be necessary. Executive sessions shall be attended by members and alternates only. The Speaker in consultation with Vice-Speakers may invite others (or allow others to attend) from time to time, as needed. Meetings shall be conducted informally, with action by consensus unless a member requests a formal vote on a specific issue. The time and place of regularly scheduled meetings will be published at the beginning of each semester.

**8. ADMINISTRATIVE SUPPORT**

The Council shall receive administrative support from the Office of Faculty Affairs. A Secretary to the Council shall be appointed from the administrative staff to assist the Speaker and the Council in the conduct of their activities.

**9. REVIEW OF THE MEDICAL SCHOOL DEAN AND DEPARTMENTAL CHAIRS**

The review of the Medical School Dean and Departmental Chairs will follow the guidelines established in the Faculty Manual. The process will be conducted by the Faculty Senate.

**SCHOOL COUNCIL STANDING COMMITTEES AND CHARGES**

The following table gives an overview of the different standing committees of the Faculty Council, the selection of the membership and its authority. All committees need a quorum for voting. A quorum is defined as a majority of the voting members of a committee.

Standing committees of the medical school and voting member numbers, selection, and authority. *All appointed=A, all self-nominated/peer-nominated/peer-selected (S), or both appointed and self-nominated/peer-nominated/peer-selected (B), and whether the committee is charged with making recommendations (R), is empowered to take action (A), or both (B).*

Committee	Reports to	Total Faculty Voting Members	Membership Selection (A/S/B)	Authority (R/A/B)
Committee on Committees	Faculty Council	3	A	R
U Health Advisory Committee	Faculty Council, EVP/CEO	3	A	R
Bylaws Committee	Faculty Council	3	A	R
Executive Advisory Committee	Faculty Council	9	B	R
Decanal Dean Review Committee	Faculty Council	5	A	R
Animal Resources Committee	Faculty Council	15	A	R
Administrative Services Committee	Faculty Council	15	A	R
Admissions Committee	Faculty Council	30	B	A
Academic Promotions and Tenure Committee	Faculty Council	20	A	R
Executive Curriculum Committee	Faculty Council	21	B	A
Promotions and Professionalism and Committee	Faculty Council	15	B	A
Faculty Issues Committee	Faculty Council	15	A	R



Information Resources Committee	Faculty Council	25	A	R
Legislative Oversight Committee	Faculty Council	6	A	R
MD/PhD committee	Faculty Council	28	B	B

The School Council will constitute from among its members the following Standing Committees:

**A. *Committee on Committees***

The Committee shall consist of three members of the Council to be appointed by the Speaker. The Speaker will appoint a Chair to this committee. The Committee is responsible for presenting to the Council slates of proposed members of the Standing Committees and revised committee charges at least annually. Members of the Committee on Committees will be appointed for a 3-year term.

**B. *UHealth Advisory Committee***

UHealth Advisory committee will consist of three members, appointed by the Speaker. Faculty with significant clinical duties will be members of the Committee, and the Speaker and Vice Speakers will serve as ex-officio members. This committee will serve as liaison to the EVP/CEO of the UHealth.

**C. *Bylaws Committee***

The Committee will consist of three members of the Council to be appointed by the Speaker and will be charged with examining and evaluating the Bylaws of the Council. This committee is responsible for reviewing, updating and revising, as necessary, the Approved Medical School Council Bylaws at least every 3 years. Bylaws committee members are selected by the Speaker in consultation with Vice Speakers and the Chair of Committee on Committees. The roster of the Bylaws committee membership is confidential. At least one member selected should also be a member of Faculty Senate. Members of the Bylaws Committee will be appointed for a 3-year term.

**D. *Executive Advisory Committee to the Speaker***

The Committee will consist of the Speaker, the two Vice-Speakers, the three at-large representatives of the Council, one member from UMMG, one Medical School Senate Representative and one additional member appointed by the Speaker. This Committee will meet at least twice each year. This Committee will be advisory to the Speaker, reviewing Bylaw revisions and annual Council Committee reports, establishing and approving *ad hoc* committees of the Council, and other business, as necessary, at the request of the Speaker. Members of the Executive Advisory Committee will be appointed for a 3-year term.

**E. Decanal Dean Review Committee**

This Committee will consist of five members at the rank of Professor from Clinical and Basic Science departments, appointed jointly by the Speaker and Dean of the UMMSM. The Dean in consultation with Speaker will appoint a Chairperson for this Committee. Faculty Council concurrence of the Chairperson will be sought when there is a change. The Chairperson does not have a fixed term. The Medical School Faculty Ombudsman will serve in an advisory role. The charge of this Committee is to oversee the evaluation of the Decanal Deans in the Medical School. The following proposals should be applied to all decanally titled Deans:

1. Decanal Deans must have a departmental appointment as full time faculty in the UMMSM.
2. Decanal Deans must have significant and continuing teaching, research and/or clinical responsibilities.
3. New Decanal Dean positions (with proposed job descriptions) require review and approval of the School Council.

Adhering to these principles will protect and legitimize individuals who serve in decanal offices, with the expectation that they may eventually return to the faculty-at-large, with only a finite term as dean. This will promote freshness of perspective and outlook, which are important to all decanal positions. As a policy of the School of Medicine, the evaluation process will expand in scope to anyone with a decanal title. All Decanal Deans will have a formal quadrennial review by an appropriately identified constituency in the way that Chairs and Deans are currently evaluated as defined in the Faculty Manual. The roles and responsibilities of individuals with decanal titles will also undergo regular review. The steps followed for the review process are outlined below:

**Dean Review Committee Process:**

The Decanal Dean(s) selected for review must have served in that role for at least 4 years. For a given round of review, the Committee selects Decanal Deans who do not have overlapping constituencies so as not to overburden the reviewers.

An email is sent to the selected Decanal Dean to invite him/her to a meeting with the Decanal Dean Review Committee to discuss the process, and to identify groups of individuals appropriate to review his/her job performance. Decanal Deans are requested to bring a statement of their job description to the initial Committee meeting, and key components of their role are briefly summarized on the ballot.

Within a week, the Committee sends the Decanal Dean an email with a draft list of reviewers and a preliminary evaluation form based on the job description highlights

provided by the Decanal Dean. The Decanal Dean is requested to review the evaluation form and list of reviewers and to submit any suggested changes within 1 week of receipt.

The evaluation form and list of reviewers is sent to the Faculty Council Speaker for final approval.

The evaluation form is built on an electronic platform system and a link is activated for reviewers to vote anonymously. The evaluation form asks reviewers to vote on the Decanal Dean's overall performance and permits reviewers to comment concerning the Decanal Dean's strengths and weaknesses, significant accomplishments within the past four years, and suggestions for improvement.

Each potential reviewer receives an email describing the charge of the Committee and instructions with a link to the customized evaluation form. Responses are requested within two weeks. Reviewers are provided an opt-out option if they consider themselves unqualified to evaluate that Decanal Dean's performance.

The evaluation platform is closed after two weeks. The Faculty Senate Office is able to access the complete, anonymous results of closed evaluations.

Committee members each receive a confidential, hand-delivered packet with the full results for each of the Decanal Deans reviewed. The Committee meets to discuss the results and redact any comments that may identify an individual evaluator.

A print version of the redacted evaluation comments is hand-delivered to the respective Decanal Dean.

The Decanal Dean Review Committee Chair prepares a copy of the review and delivers it to the Faculty Council Speaker for presentation to the Dean of the Medical School and the Appointing/Supervising Authority for that Decanal Dean.

Results are summarized and presented to the Faculty Council Executive Advisory Committee by the Chair of the Decanal Dean Review Committee at the end of each academic year.

Decanal Deans with an overall performance review below 75% for (Excellent + Good) ratings will be subject to re-review at the discretion of the Dean of the Medical School prior to the quadrennial review.

For review of the Decanal Dean Evaluation Form- See Appendix A.

## **F. Administrative Services Committee**

This Committee is entrusted with facilitating research, learning, and clinical activities so they can be accomplished in the most expeditious manner. The Committee obtains information from the Research Faculty as to their needs and concerns. The committee then meets with administrative heads and service directors to discuss the various issues and possible resolutions. Areas that might be considered for review include, but need not be limited to: Accounts Payable, Animal Research, Biomedical Communications, Human Subjects Research, Library Services, Medical Instrumentation, Purchasing, Personnel Office, Radiation Control, Receiving, Research Accounting, Research Administration, Safety Procedures, Statistical Services and Technology. The purpose of the Committee is not to duplicate the efforts of any existing committee, but rather to discover problems developing in areas where Faculty find themselves stymied or unable to receive adequate response through normal channels. The Committee can then try to forestall such problems by meeting with the appropriate administrators or through discussions with the appropriate Dean. Matters of particular concern to the faculty are discussed with the Speaker, and if necessary, added to the Council agenda for discussion during regularly scheduled Council meetings. This committee meets at least quarterly.

#### **G. Admissions Committee**

The Admissions Committee is charged with the responsibility of evaluating, selecting and admitting to the University of Miami Miller School of Medicine (UMMSM) the most academically proficient, emotionally mature and experientially and personally qualified applicants. The scope of the Committee includes admission to the regular MD program, the MD portion of all joint degree programs, and the MD portion of any special pathway programs such as the Medical Scholars Program. The UMMSM is committed to matriculating a diverse and inclusive student body, representative of the population we serve.

The final authority to accept an applicant into the UMMSM will rest exclusively with the Admissions Executive Committee (AEC). The decisions of the AEC will be final and free of any influence of external parties such as senior University leadership, the Deans of the Medical School, the Provost, the President, the Development Office, or the Board of Trustees.

#### Structure of Committee

The Admissions Committee seeks members who actively participate in critical tasks that will result in the selection of optimal matriculants to UMMSM. The Committee will have a balanced representation of faculty from both Basic Science and Clinical Departments, as well as other members who broadly

represent a range of relevant stakeholders. Membership of the Committee should be inclusive to reflect the diversity of our South Florida community.

Except student and resident members, each member of the Admissions Committee is appointed for a five-year term with one possible five-year renewal.

All committee members must annually participate in training/retraining specific to their role(s), as well as attest to their commitment to engage in committee work in a manner aligned with confidentiality expectations, conflict of interest and external influence mitigation efforts, and other ethical and professional standards of conduct. All committee members must be in good standing regarding their role (e.g., faculty or student) at the time of appointment and throughout their service.

The Admissions Committee will be structured with the goal of most efficiently carrying out the important time- and labor-intensive activities necessary to evaluate and admit each class of medical students. There will be four standing subcommittees and ad hoc committees as needed.

The four standing subcommittees are The Admissions Executive Committee (AEC), the File Evaluation Committee (FEC), The Interview Committee (IC) and the Medical Scholars Program Committee (MSPC).

#### **A) Admissions Executive Committee (AEC)**

##### AEC Charge:

**AEC is the sole authority charged with rendering the final decisions for admission to the medical school.** AEC members evaluate candidates for possible interview invitations, interview candidates, vote on ballots of candidates, vote on admissions procedures and policies, and collaborate with the Admissions Office and other medical school committees on various continuous quality improvement efforts. The AEC will be led by a Chair, or by two Co-Chairs.

##### AEC Membership

- a. Current, full-time faculty members, evenly distributed among basic science, clinical, and teaching faculty and with a variety of faculty ranks (minimum 60%)
- b. Current medical students in their final year of medical school, current volunteer or adjunct faculty, UMMSM alumni and emeritus faculty members (no more than 40%)
- c. (Non-student members) To be eligible to serve on the Executive Committee, members must evidence exemplary performance as an interviewer or file evaluator for at least one admissions cycle.
- d. (Student members) Student members will be appointed following a formal process determined by faculty members of the AEC. To be eligible to be a voting member, students must evidence proficiency

with file evaluations and interviews as determined and overseen by Admissions Office leadership.

- e. For all committee business matters, a quorum will be achieved with the minimum presence/participation of 51% of voting members. Of the quorum, the majority of members must be current faculty.
- f. In case of a tie, the Chair/Co-chairs are eligible to vote.

### AEC Responsibilities

- Responsibilities: File Evaluations (FE), Interviews, Balloting, Ballot Meeting Attendance/Voting, Policy Recommendations
- Minimum 50 FE over 7-month file evaluation phase (~August-February)
- Minimum 15 interviews over 7-month interview phase (~September-March)
- Vote on minimum 70% of ballots
- Attend minimum 70% of admissions committee meetings

### **B) File Evaluation Committee (FEC)**

#### FEC Charge:

Members of the File Evaluation Subcommittee are charged with evaluating complete application materials, scoring applicants, and making recommendations to Admissions Office leadership regarding possible interview invitations.

#### FEC Membership

- Current, full-time faculty members
- Current medical students in their final year of medical school, current volunteer or adjunct faculty, UMMSM alumni
- Current UMMSM administrators, professional staff members, and residents and other UM healthcare personnel

#### FEC Responsibilities

- Minimum 100 file evaluations and submission of reviews over 7-month file evaluation phase (~August-February)

### **C) Interview Committee (IC)**

#### IC Charge:

Members of the Interview Subcommittee are charged with interviewing candidates, completing interview reports within 72 hours of the interview, and making

recommendations to the Admissions Executive Committee regarding the final disposition of interviewed candidates.

#### IC Membership

- Current, full-time faculty members
- Current medical students in their final year of medical school, current volunteer or adjunct faculty, UMMSM alumni
- Current UMMSM administrators, professional staff members, and residents and other UM healthcare personnel

#### IC Responsibilities

Minimum 30 interviews and completed reports over 7-month interview phase

### **D) Medical Scholars Program Committee (MSPC)**

#### MSPC Charge:

Members of the Medical Scholars Program Subcommittee are charged with collaborating with Admissions Office Leadership and University of Miami Pre-Health Office leadership to develop procedures and policies for the evaluation of UM undergraduate students seeking early assurance of admission/early matriculation to the medical school.

MSPC members have voting authority to conditionally accept MSP students to the medical school. For MSP students not meeting conditions of their formal acceptance, MSPC members are charged with making determinations regarding deferral requests.

#### MSPC membership

- Current, full-time faculty members
- Current medical students in their final year of medical school, current volunteer or adjunct faculty, UMMSM alumni
- Current UMMSM administrators, professional staff members, and residents and other UM healthcare personnel
- To be eligible for membership, members must be current or past AEC members in good standing.

#### MSPC Responsibilities

- Review applications of University of Miami undergraduate students applying for early acceptance/early matriculation to the medical school and make recommendations for interview invitations.
- With members of the Interview Committee, conduct interviews of MSP candidates.
- Attend balloting meeting and vote on MSP students for conditional acceptance.

### **E) Ad-hoc Subcommittees as needed**

Members who are part of any of the above committees may participate as members of limited-time ad hoc subcommittees, task forces, and work groups.

### **H. Animal Resources Committee**

Members from the UMMSM are appointed by the Dean on recommendation of the School Council. Members from other divisions of the University are appointed by the Vice President for Medical Affairs. The Committee assures compliance with existing regulations and policies regarding the care of all vertebrate animals in research. The Committee advises the University Veterinarian and the UMMSM administration on the policies dealing with the care, housing and use of research animals. This committee meets at least quarterly. Much of the routine work is performed by the Chairperson and the Director, Division of Veterinary Resources.

### **I. Appointments, Promotions and Tenure Committee**

This Committee undertakes detailed reviews of candidates proposed for appointment, promotion and award of tenure as full-time faculty members of the School and advises the Dean of the Committee's recommendations. Meetings are held throughout the year to review annual considerations of faculty members which are usually one to two full days or one to three half days. Initial appointments of faculty members made throughout the year are reviewed in short meetings typically convened three times a year. This Committee will consist of at least eight Tenured Professors elected in staggered four-year terms. In addition, at least three members are selected from the Professor rank in the Clinical Educator, Educator, or Research tracks. These non-tenured members participate fully in Committee deliberations, but do not vote on the award of tenure. Departmental chairpersons are not eligible for membership. The Speaker of the Council will work with the Dean of the Medical School or Dean's Designee and the Senior Associate Dean for Faculty Affairs to ensure that the membership of the Appointment, Promotion, and Tenure Committee reflects diversity of perspective in terms of track (research, basic, clinical, translational, educational), gender, ethnicity, and type of department. The Chair and co-Chair of the committee are appointed by the Dean of the Medical School in consultation with the Senior Associate Dean for Faculty Affairs. The roster of Committee membership is confidential.

### **J. School Of Medicine Executive Curriculum Committee (ECC)**



The SOM ECC shall oversee the educational program leading to the M.D. degree. This committee is responsible for the overall design, management, integration, and evaluation of a coherent and coordinated curriculum that is consistent with accreditation standards established by the Liaison Committee on Medical Education. The Faculty Council has delegated authority to the ECC to design and implement any changes it deems necessary in the medical curriculum in order for the School to fulfill its undergraduate medical education mission. The SOM ECC may designate relevant subcommittees (eg: Phase sub committees, Learner Assessment and Curriculum Evaluation subcommittee) to conduct its business effectively. The SOM ECC will consist of a total of 21 voting members- two thirds (14) nominated by the Faculty Council and one third (7) by the Dean of the Medical School with final appointments made by the Dean of the Miller School. A reasonable representation of basic, clinical and educator faculty will be members of the Committee. Members are expected to have demonstrated a professional interest and accomplishments in medical education. The Committee will also include deans involved in medical education and other individuals with relevant expertise and responsibilities, who shall all serve as non-voting ex officio members. Voting members shall serve a three-year term that is renewable once.. The SOM ECC will have two co- chairs appointed by the Dean from the members of the Committee, one from among the voting members and one from among the ex officio members.

#### **K. Promotions and Professionalism Committee**

Members of this Committee hear and evaluate medical student's academic and professional performance and recommend a course of action. Committee members also hear appeals to sanctions and recommendations made by the Medical Education Administration. The Committee also reports their findings to the Dean, particularly when students appeal recommendations/sanctions made by this committee. Committee review focuses not only on the propriety of academic and/or professional performance, but on personal circumstances as well. Committee members are persons with extensive medical school teaching experience and frequently are former course coordinators. Meetings are held on a monthly basis (on average).

#### **L. Faculty Issues Committee**

This Committee provides the Medical School Faculty Council with a mechanism to bring forward complaints or issues related to academic, clinical, compensation, research, or administrative responsibilities. Issues addressed by this committee are presented by the Speaker. At least 5 members serve on the Faculty Issues Committee. The roster of Committee membership is confidential.

#### **M. Information Resources Committee**

This Committee was established to determine the computing and technology needs of the Faculty; identify the equipment and services currently available to the Faculty; compare the information resources and systems at other institutions with those available at the UMMSM, determine the needs of the School; determine budgetary requirements to meet acceptable standards; make recommendations concerning access to resources; make recommendations concerning academic and clinical links and coordination; and educate the Faculty. Meetings are at least twice per year.

#### **N. Legislative Oversight Committee**

The Committee will consist of up to six members appointed by the Council Speaker, serving three-year appointments. Three members are a minimum for this committee. The Committee will be responsible for reviewing all proposals for new departments, centers/institutes, and research, educational or clinical programs, and for name changes to any of the previously listed prior to formal submission to the Council for review. The roster of Committee membership is confidential, with the exception of the Chair.

#### **O. MD/PhD PROGRAM COMMITTEE**

The MD/PhD Program Committee is charged with the oversight of the school's MD/PhD Program and evaluation, selection, and recruitment of the most qualified candidates for MD/PhD training at the UMMSM. The Committee is involved in development and implementation of program content and curriculum, evaluation of MD/PhD student academic performance and research progress, approval of dissertation mentor selection, and student affairs and advising. The Committee also plays a role in setting program policies in consultation with the MD/PhD Program Directors, the Deans of Medical Education, Admissions and Graduate & Postdoctoral Studies, and the Dean of the Medical School. Each student's dissertation advisory committee includes a representative from the MD/PhD Program Committee, and Program Committee members lead sessions of the MS1 & MS2 MD/PhD student journal club.

For admissions, this Committee works with the Program's Directors to review applicant files, select candidates to interview, interview candidates, write interview reports, and rank applicants based on candidate applications and interview reports. Final admissions decisions are made at regular MD/PhD Program Committee meetings. MD/PhD Program Applicant interviews are held on three Fridays, usually one each in November, December and January/February. Committee members interview 3-5 applicants, 30-minute interviews each.

The MD/PhD Program Committee meets monthly (~10 x per year) for about one hour. The Committee includes faculty representatives from all of the PhD

granting graduate programs available to MD/PhD students and seeks balanced representation of PhD and physician scientists (MD or MD/PhD) and faculty from both Basic Science and Clinical Departments.

The Committee seeks a diverse membership that reflects the diversity the Program strives for in its student body. Ideal Committee members have PhD or MD/PhD student training and mentoring experience and active research programs. Candidate members are usually nominated by the Directors and the current MD/PhD Program Committee, although faculty may nominate themselves to serve. A faculty representative from the Medical School Council also attends meetings and may play a full role on the MD/PhD Program Committee. The Committee members serve three-year terms, and can be re-appointed.

#### **P. Medical Library Committee**

This Committee meets twice per year, once each semester. The Committee membership includes faculty from the clinical and basic science departments, volunteer alumni, and a student representative. Each year, one committee meeting will be devoted to a "state-of-the-library" report and one to gathering client service information.

The Committee functions in collaboration with the librarian faculty to provide direct input and feedback on library collections, services and policies; gather input and feedback from represented constituencies; disseminate information from the library to represented constituencies; advocate for the Calder Library and the Calder Library faculty; help assure that the Calder Library administration is aware of campus and community programs, initiatives, and plans that might have an impact on library services; and help identify opportunities for collaboration between the Calder Library and other UM campus and community organizations. The Chair of the Calder Library Committee serves as an ex-officio member of the Information Resources Committee. The Committee members serve three-year terms, and can be re-appointed.

#### **Q. Scientific Awards Committee**

This Committee is composed of senior faculty members (Associate and Full Professors) who are active, productive researchers. Most of these individuals have served as consultants for national funding agencies and have been Principal Investigators of funded grants from national agencies. The Committee includes faculty members with expertise in clinical research as well as those with expertise in basic research. The Committee is responsible for recommending to the Executive Dean for Research the distribution of research funds including the Emergency Fund and the Stanley Glaser Awards. In addition to these specific activities, the Committee also serves as an advisory body to the Dean of the School of Medicine and the Executive Dean for Research on all matters relating to

research and researchers at the UMMSM. The Committee meets on a monthly basis for approximately one hour. At the time of grant reviews, the Committee holds longer meetings of 4-5 hours. From time to time, it is necessary to appoint subcommittees for specific projects. These duties are shared among Committee members, and do not represent a substantial time commitment. This is a working committee, and a firm commitment of time must be made by the Committee members.

#### **R. Faculty Council Research Awards Committee**

The committee meets to discuss the candidate's proposed for the Junior Research Award and the Junior Clinical Educator Award given by the Medical School Faculty Council. The members of the Awards Committee are the Senior Associate Dean of Faculty Affairs, the Senior Associate Dean of Graduate Medical Education, the Executive Director of the Calder Medical Library and two senior members of the basic science faculty and clinical faculty. The Chair of the Medical School Faculty Council will serve as an ex officio member.

Eligible faculty include assistant professors on the research or tenure track who have been a faculty member for more than one year and less than five. Eligible faculty include assistant professors on the clinical educator track who have been a faculty member for more than one year and less than five. Candidates for the Junior Research Award are selected through a data-driven process rather than by nomination. Information is compiled by the Medical School Faculty Affairs office of a list of all faculty members who hold the rank of assistant professor and have been at the Miller School for at least one year and no more than five years. Eligible candidates must have been the corresponding author for at least one paper published in a peer-reviewed journal during the prior year. The list of papers is compiled using PubMed and other databases and sorted by impact factor. The papers are then carefully reviewed to ensure that a majority of the research was conducted at UM. In the event of a tie, the committee members conduct further investigation into the contribution by the candidate and the quality of peer review to determine the winner.

Candidates for the Junior Clinical Educator Award are nominated by residents and/or medical students, who participate in the evaluations and selection of the winner. The Awards Committee, in conjunction with nominating residents or students, reviews candidates' published papers in peer-reviewed journals. The number of papers, combined with the impact factors of the journals, is used to create a composite index for each candidate. The candidate with the highest index score receives the award.

The key feature of the awards is that they are driven by data, which is carefully evaluated to select award winners. An award winner is ineligible to be renominated for a period of 3 years.

## **10. PARTICIPATION IN MEDICAL SCHOOL COUNCIL COMMITTEE ACTIVITIES**

A minimal level of participation in committee activities will be expected of each individual appointed. For all committee participation, if there is an actual or perceived conflict of interest in a specific situation for a committee member to participate, s/he will recuse herself/himself from participation. The minutes of that meeting shall reflect such recusal. If a person does not attend at least 50 percent of the regularly scheduled meetings, or if the committee Chair indicates lack of participation in the other required work, the Chair will communicate with the Speaker of the Council to recommend removal from the membership list. The Speaker will send a letter stating their participation on the committee in question will no longer be required. A replacement will be recommended and appointed by the Speaker.

## **11. COMMITTEE CHAIRS AND APPOINTMENTS**

The Chair of the Committee on Committees will recommend to the Speaker individuals for appointment as Chair and Vice-Chair of each committee. The term for the Chair will vary with individual committees. If not specifically detailed, the term will be for three years. The term for Chairs of Admissions, Executive Curriculum Committee, Promotions and Professionalism Committee, Animal Resources, Medical Library and MD/PhD Committees will be for three years. The Chairs for Appointment, Promotions and Tenure, and the Scientific Advisory Committee will serve for a one-year term. The terms of the Chairs can be extended with the recommendation of the Committee on Committees and the approval of the Speaker. Upon approval by the Council, a letter of appointment will be prepared and signed by the Speaker immediately following the transition meeting in May. Faculty Affairs will notify the Chair of the Committee on Committees if any faculty member serving leaves the university. If a vacancy or membership change is necessary during the academic year, the Chair of Committee on Committees will consult with the Speaker to appoint members or replace Chair/Vice Chair positions after presentation to the School Council. The composition of the committees will reflect the diversity of the faculty at the Medical School if possible.

## **12. COMMITTEE RECORDS**

Committee Chairs will record minutes for all meetings. By April 15<sup>th</sup> or after the last meeting of the academic year (whichever occurs first) the Committee Chair will submit an annual written report to the Executive Advisory Council Committee consisting of actions taken and recommendations for future/pending issues. Each Committee will communicate issues of importance

to the Council in a timely manner. At the request of the Speaker, Committee Chairs will be invited to present Committee reports to the full Faculty Council.

## **FACULTY GUIDELINES FOR APPOINTMENT, PROMOTION AND TENURE**

### **Introduction**

The Faculty Manual of the University of Miami designates three distinct full-time faculty tracks. The Miller School of Medicine University of Miami (hereafter called the School) has modified two of these tracks to address unique aspects of a clinical faculty. In addition to the Faculty Manual defined Educator Track, the School designates a distinct Clinical Educator track. As such, the School has four full-time faculty tracks:

- (1) the TENURE-EARNING or TENURE track. The Faculty Manual refers to the faculty in this track as the regular faculty;
- (2) the CLINICAL EDUCATOR track;
- (3) the RESEARCH track;
- (4) the EDUCATOR TRACK

Faculty appointments may be made at the rank of:

- a. INSTRUCTOR (CLINICAL EDUCATOR Track) shall consist of i) Instructors appointed before June 1, 2013 and ii) those faculty with professional titles engaged primarily in professional practice, and in teaching associated with that practice (Consistent with the Faculty Manual A2.1e) This rank is restricted to:
  - i. Fellows or senior residents who have completed all terminal degree requirements but are engaged in advanced clinical and/or research training and educational activities. The faculty designation of Instructor is a requirement for these individuals to be credentialed as a member of the University of Miami Hospitals and Clinics medical staff.
  - ii. Advanced practice clinicians (non-physicians) who have obtained terminal degrees (e.g., Advanced Practice Registered Nurse, Physician Assistant, Physical Therapist, Dieticians) and show evidence of significant contribution to the education mission of the School.
- (2) ASSISTANT PROFESSOR (All tracks; Tenure appointments are TENURE-EARNING prior to the AWARD of TENURE).
- (3) ASSOCIATE PROFESSOR (All tracks; Tenure appointments may be TENURE-EARNING prior to award of TENURE).
- (4) PROFESSOR (All tracks; For TENURE track, award of tenure is a requirement for appointment to the rank of Professor).

## TERM OF APPOINTMENTS

- (1) **TENURE Track:** Reviews and appointment terms for tenure-track faculty are defined in the Faculty Manual, and occur at the following points in time:
  - a. A midpoint review occurs in the third year of appointment to review progress toward tenure. If the review is positive, then the appointment is renewed for an additional three years. If not, the faculty member receives a one-year terminal appointment.
  - b. A review for promotion to associate professor occurs in the sixth year. If successfully promoted, the faculty member receives an additional two-year contract. If not successfully promoted, the faculty member receives a one-year terminal appointment.
  - c. A final review for the Award of Tenure must occur by the eighth year of the appointment. If successful, the Award of Tenure is made. If unsuccessful, the faculty member receives a one-year terminal appointment.
  - d. Faculty on the Tenure-Earning track may request review for the Award of Tenure during any year within the eight-year period provided they are at the rank of Associate Professor.
  - e. Review for promotion to Associate Professor with Award of Tenure may occur concurrently.
  - f. Candidates who request tenure review prior to the eighth year and are unsuccessful may be considered again until the eighth year, unless the case is initiated by the Dean (C5.5(b)).
  - g. Untenured faculty in the tenure-earning track may seek a one-year extension of their probationary period for child care or other reasons as specified in the Faculty Manual (C5.5).
- (2) **AWARD OF TENURE:** The Award of Tenure is a lifetime appointment, with several qualifications:
  - a. The Faculty Manual designates a “limited financial commitment” for tenured faculty in the Miller School of Medicine. This is determined by a formula equal to 50% of (a) highest compensation from all sources following the AWARD of TENURE plus (b) \$10,000, not to exceed \$160,000 (i.e.  $X = (\text{highest compensation})/2 + \$10,000$ , limit \$160,000). This is also referred to as the Tenure Base.
  - b. Tenured faculty who elect part-time status of less than 50% effort (with exceptions for medical issues or family situations approved by the Dean and Provost) lose tenure status, and will be appointed on the alternative non-tenure track for their part-time appointment at the same rank.
  - c. Tenured faculty who elect to retire may be designated Emeritus Faculty pursuant to the procedures set forth in Section C2.6 of the University’s Faculty Manual.
- (3) **EDUCATOR, CLINICAL EDUCATOR, and RESEARCH Tracks:** Appointments on the EDUCATOR, CLINICAL EDUCATOR, and RESEARCH tracks are one-year, annual renewable appointments.
  - a. Instructor appointments on the Clinical Educator track for chief residents or fellows are annually renewable, correspond with the duration of training program, and may not exceed a three-year (36-month) period. For Instructor

appointments beyond the completion of residency or ACGME or approved non-ACGME fellowship that involve advanced clinical or research experience, a time-limited educational and/or skills acquisition plan is required for appointment (may not exceed a two-year (24-month) period).

- b. Instructor appointments for licensed health practitioners are annually renewable and correspond with assignments that involve significant, continued contribution to the research, clinical and/or education missions of the School.
- c. The President may be petitioned for the award of emeritus status to retired members of the Clinical Educator, Educator, Research track and Academic Administrative personnel who have not held tenure (Faculty Manual C2.6)
- d. Faculty with three or more years of faculty service at the University and who are at the rank of associate professor are eligible to receive appointments of up to three years. Faculty with more than three years of faculty service at the University at the rank of professor are eligible to receive appointments of up to five years. Multi-year appointments must be recommended by the Chair of the Department and approved by the Dean. Upon approval the multi-year contract begins at the beginning of the academic year.

Written performance and productivity guidelines for the award of multi-year appointments to faculty shall be developed by the faculty and Chair of each department, based upon general guidelines recommended by the School Council and approved by the Dean. These guidelines shall take into account the criteria established by the Appointment, Promotion and Tenure Committee for use in evaluating candidates for promotion.

During the annual evaluation of faculty members in each department, eligible faculty may request consideration for award of multi-year appointments. Upon request the Chair will arrange for departmental review of the candidate, which will include consideration of the performance and productivity guidelines and of a written summary prepared by the faculty member describing his or her activities, achievements and contributions to the academic programs of the School and the profession. Consideration of such appointments shall thereafter proceed as for nominations for promotion and tenure, with a formal vote of the department faculty and recommendations by the Chair and by the Appointment, Promotion and Tenure Committee to the Dean, who will make the decision on the appointment within the same promotion cycle. If the request for a multi-year appointment is denied, the Department Chair and the Senior Associate Dean for Faculty Affairs shall inform the faculty member of the reason(s) for the denial.



Recommendations for promotion in rank will be considered independently of requests for multi-year appointments and undergo consideration as already prescribed by the Faculty Manual and the procedures of the School.

**General Appointment and Promotion Guidelines**

For the progressive advancement of faculty within each track, evaluation of merit is undertaken at the Department, School and University level (**Table 1**). Evidence is required for significant and continuing growth, productivity and excellence in the activities relevant to the candidate’s track during the candidate’s time at his/her present rank. Review of these accomplishments and growth occurs at multiple levels. Appointment or transfer to a Tenure-Earning Track requires prior approval of the UMMSM Dean (see Transfer of Tracks section for further details). Faculty who request promotion to Professor within any track and are denied will be required to wait a minimum of two years for reconsideration of promotion to Professor. The faculty member will need to have new evidence of contributions that would result in a favorable review in accordance with the Faculty Manual A14.3

<b>Table 1</b>	Prior Approval of Dean	Department Vote of Eligible Faculty <sup>1</sup>	Department Chair Review	APT Committee Review	Dean Review	APB Review	Provost Approval	President Approval	Board of Trustees Approval
Instructor, CE Track		X	X						
Assistant, Professor, all Tracks		X	X		X				
Associate, Professor, Professor, all non-tenure tracks		X	X	X	X	X	X		
*Initial Appointment Associate Professor, non-tenure tracks		X	X	X	X		X		
Tenure-Earning (Assistant & Associate Professor)		X	X	X	X	X	X	X	X
Award of Tenure (Associate Professor & Professor)		X	X	X	X	X	X	X	X

<sup>1</sup>Eligible voting faculty for all tenure-related decisions include all tenured faculty at or above rank of the candidate in the department, or tenured faculty designated by the Dean from other departments if the Department has fewer than five (5) tenured faculty. Eligible voting faculty for non-tenure related decisions will be determined by the department. In large departments, the eligible voting faculty may be at the division level with the approval of the Chair and Dean.

**CANDIDATE PORTFOLIO FOR APPOINTMENT, PROMOTION, OR TENURE REVIEW**

Faculty being considered for initial appointment, or promotion at the rank of Associate Professor or Professor on any track are required to prepare an academic profile (See **Table 2** for Summary) consisting of the following:

### All Tracks and Ranks

- (1) Current curriculum vitae (CV) in the University of Miami format. **Failure to use the approved format will result in the CV being sent back for revision.** A template of this format is available from the Office of Faculty Affairs.
- (2) A personal statement (maximum 2 pages in not less than 11 point font) that describes the key accomplishments of the applicant, short- and long-term goals, and factors that may have affected (positively or negatively) the trajectory of achievements that should be considered as part of the review
- (3) The candidate will provide the Department Chair with a list of five or more external referees. The Chair will identify a list of additional external referees that were not on the candidates list. A total of five external letters is required for promotion review, at least two recommended by the Chair and not the Candidate. External referees will be provided with the School criteria and scoring matrices for promotion (and tenure, if applicable) along with the candidate's CV, two-page personal statement, and clinical and educator portfolios (as required). The Department Chair must certify that all evaluation letters received are included in the candidate's file.
  - a. External referees should be leaders in the candidate's field who can fairly and accurately evaluate the candidate's performance and academic recognition.
  - b. Each of the external referees shall hold an academic rank (or equivalent) at or above that of the rank for which the candidate is being considered.
  - c. External referees should be neutral to the candidate and at arm's length. The following are NOT considered arm's length:
    - i. Previously or currently employed by the University of Miami.
    - ii. Former or current mentors, supervisors, or preceptors.
    - iii. Former students, fellows, residents, or other trainees, including those for whom the candidate has served on a masters or doctoral dissertation committee.
  - iv. Colleagues from the same division or department at prior or current institutions.
  - v. Collaborators on grants, contracts and publications. An exception includes individuals who are site principal investigators, co-investigators, or co-authors on multi-center grants or publications and the investigators are not part of a steering committee and interaction is limited to contributing to, editing, or reviewing project outcomes and/or manuscripts.
- (4) Individuals who have interacted **substantially** with the candidate on regional or national panels, task forces, study sections, or professional organization leadership teams (e.g., executive officers). The same external referees may be used for both promotion and tenure review. An Educator Portfolio (Appendix D)

that documents the candidate's teaching/training activities. Teaching is an essential core activity for appointment to the Faculty, and documentation of teaching and training activity and accomplishments is required for all tracks and all ranks. The type and extent of teaching varies across tracks. An Educator Portfolio must be completed by faculty on the Educator track, the regular Tenure Earning tracks and by faculty on the other tracks who have significant responsibilities in education.

The Educator Portfolio should be no more than 6-8 pages. Starting with an educational philosophy statement, faculty should address their achievements in the following seven domains of educator activities: 1) Teaching, 2) Assessment of Learners, 3) Curriculum Development, 4) Advising and Mentoring, 5) Educational Leadership and Administration, 6) Scholarly Approach to Education, and 7) Educational Scholarship. Appendix D has been adapted from a published rubric, and provides the template faculty should use.

- (5) A Faculty Assessment Form (Appendix B) that documents the candidate's matrices information as stated below within each track is available from the Office of Faculty Affairs and online.

### **Clinical Educator-and Tenure-Earning/Tenure Track with Clinical Responsibilities**

- (1) A Clinical Portfolio will be completed by Faculty whose responsibilities include direct clinical care. This portfolio will document all aspects of clinical activity, including:
  - a. Clinical effort, adjusted productivity target, and clinical productivity compared to the target for the average of the previous 3 fiscal years.
  - b. Clinical service requirements (e.g. number of clinics covered per week, number of weeks on inpatient service, on-call requirements).
  - c. Medical director responsibilities.
  - d. Participation on clinical committees (e.g., Peer Review, Interdisciplinary Rounds, Quality and Safety).
  - e. Description of innovations in clinical care initiated by the candidate (with outcomes).

### **PROCESS FOR APPOINTMENT, PROMOTION, AND TENURE REVIEW PROCESS**

All faculty except Tenured Professors receive an annual email notification of the opportunity to be considered for promotion by the end of January. Faculty are to inform their Chair and the Office of Faculty Affairs of their interest in being considered for promotion by **February 15**. The timeline for the candidate review process is in **Table 3**. While consideration for promotion does not require approval of the Chair, faculty are strongly encouraged to meet with their Division Chief and/or Chair to review their accomplishments prior to initiating the promotion process, and to take advantage of the input of the Department Promotion and Tenure Committee (if one exists) about accomplishments, trajectory and likelihood of successful promotion.

If the division chief/department promotion and tenure committee/chair advise against applying for promotion the faculty member may request a meeting with the Dean of the Medical School or the Dean’s Designee to review accomplishments and the criteria established in this policy.

**Table 2:** Requirements for Candidate Review Portfolio (Department Review)

	Summary of Achievements	CV in UM Format	Personal Statement	External Letters (at least 2 recommended by Chair)	Faculty Assessment Form	Educator Portfolio	Clinical Portfolio
<b>Research</b>	X	X	X	X	X	X	NA
<b>Clinical Educator</b>	X	X	X	X	X	X	X
<b>Educator</b>	X	X	X	X	X	X	NA
<b>Tenure-Earning or Award of Tenure</b>	X	X	X	X	X	X	Clinical Faculty Only

***Review of a candidate for initial appointment, promotion, or tenure cannot be initiated until all components of the Candidate Review Portfolio are complete.***

**Table 3:** Timeline for Candidate Review Process

	Candidate Informs Department, Office of Faculty Affairs of Intent	Department Vote of Eligible Faculty	Documents due in Faculty Affairs Office	APT Committee Review	APB Review	Provost, President, Board of Trustees Approval	Effective Date of Promotion and/or Award of Tenure
Approximate Dates for Review Process	February 15	No Later Than July 1	One month prior to APT meeting	September/October or as needed	January	February - May	June 1

\*Initial Appointments at the rank of Associate Professor in the non-tenure earning tracks are reviewed by the APT committee and the Dean, and then proceed directly to the Provost for approval.

(1) Department Review

The evaluation process for all tracks requires the Chair to oversee a Department review that includes review of the candidate’s portfolio materials, a discussion of the candidate by the voting faculty, and a department vote by eligible voting faculty.

- a. Department Vote.
  - i. Mechanism of Voting. The department vote is conducted in person or electronically, by means that protect the identity of the individual voting faculty.
  - ii. Eligible Voting Faculty. Eligible voting faculty must be at or above the rank that the candidate aspires to obtain. A minimum of five eligible faculty are required for the vote to be valid.
  - iii. Eligible Voting Faculty for Tenure-Related Decisions. For candidates on the tenure-earning track or being considered for the Award of Tenure, there must be at least five tenured faculty members at or above the rank the candidate aspires to obtain.
  - iv. If a department does not have five eligible faculty for either the non-tenure or tenure-related votes, the Dean is responsible ((Faculty Manual C13.4(b)(ii)) for constituting the “ad hoc” review committee and notifying the candidate and the Provost’s office of its appointment. The Department can provide the Dean with a list of tenured faculty at the appropriate rank from other departments to participate in the vote for his/her selection.
- b. Chair Evaluation Letter. Following the department vote, the chair will prepare a letter about the candidate that includes:
  - i. An evaluation of the candidate (research, education, clinical and administrative service) and recommendation;
  - ii. The results and explanation of the departmental vote, addressing reasons for negative votes or abstentions;
  - iii. A review of the external evaluation letters. An attachment to the Chair’s letter will include:
    1. Copies of the letters soliciting reviews from the external referees;
    2. An explanation of the relationship of the referees to the candidate;
    3. An assessment of the stature and qualifications of each referee.
- c. Timing of Reviews. The Department review of existing faculty should be completed no later than July 1 of each year. Department review of initial appointments should be completed at least 4 weeks prior to an Initial Appointment review by the Appointment, Promotion, and Tenure Committee (APT), with dates determined by the Office of Faculty Affairs.

Once completed, the Chair will provide the necessary documentation to the School’s APT Committee through the Office of Faculty Affairs.

## (2) Miller School of Medicine Review

The APT Committee of the School Faculty Council (See Section 14 of the Faculty Council Bylaws for APT composition) is responsible for reviewing the Candidate Review Portfolio and recommendations of the Department, then advising the Dean of

the UMMSM on decisions regarding appointments, promotion and tenure. The APT Committee is appointed by the Medical School Faculty Council in consultation with the Dean and Senior Associate Dean for Faculty Affairs and is composed of Faculty at the rank of Professor from all tracks. The appointment will be for four years in staggered terms with an opportunity for renewal at the discretion of the Dean of the Medical School in consultation with the Senior Associate Dean for Faculty Affairs. The chair and co-chair of APT will be appointed by the Dean and the Senior Associate Dean for Faculty Affairs.

a. APT Review Process

- i. Each candidate is reviewed by two (Primary and Secondary) members of the APT using the criteria established by the School Faculty Council for the aspired rank and track of the candidate.
- ii. The recommendations of the APT reviewers and the Candidate Review Portfolio are then reviewed and discussed by subcommittees of the APT (5-6 members) or the full APT committee. A subcommittee or full committee vote is taken for each candidate.
- iii. Non-tenure track Candidates who are recommended by both APT reviewers and unanimously recommended by the APT subcommittee are reviewed as part of a consent vote of the entire APT Committee with no further discussion, if this process is employed.
- iv. Faculty reviewed on the Tenure-Earning Track for Award of Tenure and Candidates who are not recommended by both APT reviewers and/or not unanimously recommended by the APT subcommittee, if employed, are reviewed and discussed by the entire APT Committee. Members of the same department as the candidate or who have another conflict of interest are recused from the discussion and subsequent vote of the APT.
- v. The APT Committee then conducts a vote on each candidate. Only tenured members of the APT Committee vote on tenure-related considerations.
- vi. Department Chairs or their designees will be present at the APT meetings to present their cases if called on and be available to appeal unfavorable recommendations if necessary, prior to review by the Dean and Chief Academic Officer of the School.
- vii. The Vote and Recommendation of the APT Committee are then forwarded to the Dean and Chief Academic Officer of the School for his/her recommendation, which is forwarded to the Academic Personnel Board (APB) of the University for Review.

b. Timing of Reviews.

- i. The APT Committee reviews Initial Appointments several times each year.
- ii. Promotion and tenure reviews for faculty with existing faculty appointments are conducted in August/September of each year or as needed.

**(3) University Academic Personnel Board Review****a. Timing of APB Reviews**

i. The APB reviews Initial Appointments several times each year following APT reviews. Promotion and tenure reviews for faculty with existing faculty appointments are conducted by the APB in January following the Department and APT review. The APB committee is appointed by the Provost of the University and is composed of tenured Professors.

ii. An APB review is not required for initial appointments at the rank of Associate Professor on the non-tenure earning tracks.

**(4) Provost, President, and University Board of Trustees Review**

a. Recommendations from the APB are reviewed by the Provost of the University. Decisions about non-tenure earning faculty are made by the Provost, including the initial appointment at the rank of Associate Professor on the non-tenure earning track, reviewed at the School level.

b. Recommendations related to the Award of Tenure and progress toward Tenure are forwarded to the President of the University by the Provost.

c. The President of the University makes recommendations related to the Award of Tenure to the Academic Affairs Committee of the University of Miami, Board of Trustees. The Academic Affairs Committee considers recommendations for the Award of Tenure one time per year in the spring following APB, Provost, and President reviews and recommendations.

**(5) Notification of Faculty.**

The Provost of the University notifies the Dean of all promotion and tenure decisions no later than June 1 following the Board of Trustees Academic Affairs Committee decisions. Promotions and Awards of Tenure become effective June 1 of that year.

**CRITERIA FOR APPOINTMENT, PROMOTION AND TENURE****Initial Appointments**

New appointments at the rank of Instructor and Assistant Professor from an academic institution require:

- (a) a vote of the Department,
- (b) support of the Chair, and
- (c) approval of the School Dean and Chief Academic Officer.

New appointments at the rank of Associate Professor or Professor and/or new appointments with the Award of Tenure require:

- (a) a vote of the Department,
- (b) support of the Chair,
- (c) review by the APT Committee,
- (d) recommendation of the School Dean and Chief Academic Officer, APB, Provost, and, in cases involving tenure, President and Board of Trustees.

Faculty hired before approval of this rank or tenure by the University may not use this rank, but may indicate Pending Rank in their title until final decisions are made. All faculty are subject to the criteria established for each track and rank at the University of Miami. **Thus, holding a rank or tenure at a prior institution does not guarantee that the same rank and/or tenure will be awarded at the University of Miami.**

For those individuals who are joining the University of Miami Miller School of Medicine as faculty from a non-academic position, he or she will be appointed initially as an Assistant Professor on the appropriate track as requested by the Department. This appointment does not require an initial review by the APT committee.

The following guidelines for appointment, promotion and the awarding of tenure were written and are practiced by the APT committee.

## THRESHOLDS FOR CONSIDERATION

Faculty on the different tracks in the School have different sets of responsibilities, and the expectations for successful trajectory for promotion are reflective of these responsibilities. Each of the tracks includes expectations in the areas of scholarship, funding for academic activities, teaching, reputation, and for clinical faculty, significant contributions in the area of clinical care. For the different tracks, and for different ranks within tracks, the relative importance of the kinds of contributions differ, and therefore require a “weighting” approach. To address this heterogeneity of expectation, the Faculty Council has established a matrix of weights reflecting the impact of the contribution in the expectation areas (Faculty Assessment Form, Appendix B). **For each track, and for each rank, the Faculty Council has established minimum point thresholds for each expectation area, along with specific activities that must be included in reaching the point total. It should be clear that the point totals represent minimum thresholds. Faculty who are below these thresholds, described below for each track, will not have approval by the APT, but meeting the minimum threshold will not guarantee promotion, since the decision to promote is based on an evaluation of the entirety of the contribution, not just selected components.**

### Team Scholarship

Team Scholarship has a key role in the future of scholarly endeavor, and it is explicitly valued at the University of Miami. Team Scholarship is defined as interdisciplinary inquiry/team science/team scholarship with a focus on teams of scholars from multiple disciplines in collaborative, problem-based inquiry to address important and complex challenges. The University of Miami Miller School of Medicine recognizes and acknowledges the efforts and contributions of faculty who also deploy their individual expertise in collaborative efforts in the same manner that we have historically acknowledged as first or senior-authorship or Principal Investigator status.



### Time at Rank

The University of Miami does not have a fixed requirement for time at rank before promotion or tenure can be considered. As a general guideline, using the 5-year requirement for promotion to Associate Professor on the Tenure-Earning track, evaluation of faculty and the metrics described in this policy are based on a five-year period for all faculty. Faculty with exceptional accomplishments may be considered prior to five years at rank, but must meet or exceed the educational, research, scholarship, reputational, and service expectations that would typically be met in a five-year period.

### Clinical Productivity and Administration

Clinical productivity and Administration are significant contributions, but by themselves are not sufficient for promotion. Meeting clinical productivity targets is a requirement for consideration for promotion on tracks involving clinical activity, but promotion is based on evidence of **innovation** in clinical care. Similarly, administration is considered as part of the contribution to clinical care, research, and education contributions, but having an administrative role is not sufficient for promotion. Thus, clinical faculty with high productivity are valued members of the School, as are talented administrators, but these individuals are nonetheless expected to meet the scholarship, funding, teaching, clinical innovation, reputation, and service requirements for their relevant track for successful promotion.

Contributions and achievements vary by rank and track. **Table 4** below provides general guidance for the weighting of each area of contribution/achievement by track. These weights are provided for guidance for faculty seeking promotion. Departments, the School, and the University may consider exceptional contributions in one area balanced against weaker contribution/achievement in another area in individual and notable cases.

	Scholarship	Funding	Education	Clinical Impact	Reputation	Service
<b>Tenure-Earning-Research</b>	25%	25%	20%	NA	20%	10%
<b>Tenure-Earning-Clinical Component</b>	20%	20%	20%	10%	20%	10%
<b>Educator</b>	20%	0%	60%	NA	10%	10%
<b>Research</b>	30%	30%	10%	NA	20%	10%
<b>Clinical Educator</b>	10%	0%	30%	30%	20%	10%

**Faculty on any track who are in violation of the Zero Tolerance Policy for Mistreatment of Learners or other citizenship requirements of the Department, School, or University will not be considered for promotion.**

## **A. TENURE-EARNING (TENURE) TRACK**

Faculty members in this track are expected to demonstrate a continued trajectory of excellence in teaching, make significant contributions to the advancement of the body of scientific and applied scientific knowledge through funded research and original, scholarly publications, and contribute to the well-being of the UMMSM and the local, regional, national, and/or international community through service. Clinicians on the Tenure-Earning track are also expected to make a significant contribution to the advancement of clinical care through innovations in diagnosis, treatment, or health system delivery.

**Minimum** threshold expectations (Faculty Assessment Form, Appendix B) for promotion to Associate Professor on the Tenure-Earning Track include:

### (1) Scholarship

- a. An overall point total since the last appointment of at least 6 using the rubric in the Scholarship Matrix of AA
- b. A minimum of five (5) peer-reviewed publications (average one (1) per year) since the initial appointment to the tenure-earning track.
- c. At least four of the publications contributing to the total points will be as first or senior author and/or as an integral member of team science publications in journals with an impact factor of >3.0.
- d. Team Science publications will require at least 2 letters from collaborators indicating the faculty members contribution to the findings.
- e. The H-Index will be used to measure the productivity and citation impact of the publications of the faculty member.

### (2) Research Funding

- a. An overall point total of at least 6 using the rubric in the Research Funding Matrix BB with at least one grant as PI or MPI and the other as Co-I.
- b. The grant contributing to the point total as a principal investigator or MPI can be a NIH R35, SP0RE, R01, U01, U54, Program Project Grant or equivalent federal or state grant (Department of Defense, HRSA, PCORI, NSF, AHRQ, Florida Department of Health Biomedical Research Grant, or major national foundation (e.g., American Cancer Society, American Heart Association, American Lung Association) peer-reviewed research grant.
- c. At least 65% of the faculty member's research effort will be funded using extramural research funding. This may include serving as a principal investigator, co-investigator on other projects, as site-Principal Investigator on a multi-center trial, or as director of an extramurally funded research core. Confirmation of funding effort will be documented in the Chair's letter.

### (3) Teaching/Education/Training/Mentoring

- a. Evidence of active teaching in the clinical/research setting, as part of a formal teaching program, or as a mentor for undergraduate, graduate, or post-graduate learners.
- b. Average learner evaluations of teaching >3.6 on a 5 point scale if available.
- c. Peer-evaluations of teaching made by the appropriate voting faculty on the basis of observation, and a summary and interpretation of the results of the student evaluations.. Peer evaluations of teaching include, but are not limited to:
  1. Direct observation of small group facilitation, didactics, or clinical teaching;
  2. Faculty evaluations of University or School-sponsored continuing medical education (CME) programs, such as departmental Grand Rounds or faculty development programs.

#### (4) Reputation

Evidence of a **national** reputation supported by at least one of the following:

- i. Participation on federal or state or foundation study sections for research funding review.
- ii. Leadership in a national professional society.
- iii. Invited platform presentations, symposia, or workshops at national meetings.
- iv. Participation as an author on national practice guidelines.
- v. Participation in at least one national advocacy initiative that results in measurable policy change.

#### (5) Service, Diversity and Inclusion

Evidence of service to the University, local community, or national community supported by at least one of the following:

- i. Active, documented participation on at least one Department, School, or University Committee.
- ii. Active documented participation on a local, regional, state or national policy board.
- iii. Active documented participation on a regional or national not-for-profit foundation or agency board.
- iv. Active documented work in promoting diversity and inclusion at the University, local community or national community level.

**Minimum** threshold expectations (Faculty Assessment Form, Appendix B) for promotion from Associate Professor to Professor with or without the Award of Tenure include:

#### (1) Scholarship

- a. An overall career point total of at least 22 using the rubric in the Scholarship Matrix of AA.
- b. A point total of 12 over since the last appointment using the rubric in the Scholarship Matrix of AA.
- c. Ten (10) peer-reviewed publications over the past five years (average of two per year).

- d. At least eight (8) peer reviewed publications as first or senior author and/or as an integral member of team science publications since the last appointment in journals with an impact factor of >3.0.
  - e. Team Science publication will require at least 2 letters from collaborators indicating the faculty members contribution to the findings.
  - f. The H-Index will be used to measure the productivity and citation impact of the publications of the faculty member.
- (2) Research Funding
- a. An overall point total of at least 8 using the rubric in the Research Funding Matrix BB with at least one grant as PI or MPI and the other as Co-I.
  - b. The grant contributing to the point total as a PI or MPI can be a NIH R35, SPORE, P01, R01, U01, U54, or Program Project Grant. A second grant as PI or MPI or Co-I will be from one of the above or an equivalent federal grant (Department of Defense, HRSA, PCORI, NSF, AHRQ), Florida Department of Health Biomedical Research Grant, or major national foundation (e.g., American Cancer Society, American Heart Association, American Lung Association) peer-reviewed research grant.
  - c. At least 65% of the faculty member's research effort will be funded using extramural research funding. This may include serving as a principal investigator, co-investigator on other projects, as site-Principal Investigator on a multi-center trial, or as director of an extramurally funded research core. Confirmation of funding effort will be documented in the Chair's letter.
- (3) Teaching/Education/Training/Mentoring
- a. Evidence of teaching in the clinical/research setting, as part of a formal teaching program, or as a mentor for undergraduate, graduate, or post-graduate learners.
  - b. Average learner evaluations of teaching >3.6 on a 5 point scale if available.
  - c. Peer-evaluations of teaching rated excellent, outstanding, or exemplary if available.
- (4) Reputation
- a. Evidence of an **international** reputation supported by at least one of the following:
    - i. Participation on international research or policy panels (e.g., World Health Organization).
    - ii. Leadership in an international professional society.
    - iii. Invited platform presentations, symposia, or workshops at international meetings.
    - iv. Participation as an author on international practice guidelines.
    - v. Participation in at least one international advocacy initiative that results in measurable policy change.
- (5) Service, Diversity and Inclusion
- a. Evidence of service to the University, local community, or national community supported by at least one of the following:

- i. Active, documented participation on at least one Department, School, or University Committee.
- ii. Active documented participation on a local, regional, state or national policy board.
- iii. Active documented participation on a regional, state, national or international not-for-profit foundation or agency board.
- iv. Active documented work in promoting diversity and inclusion at the University, local community or national community level.

## **B. CLINICAL EDUCATOR (CE) TRACK**

This track may be selected for full-time members of the faculty (physicians or licensed healthcare providers) whose primary professional activities are teaching and clinical service with an expected tangible contribution to academic scholarship. Individuals with clinical responsibilities are often appointed initially to the CE track even though they may have a significant commitment to research. Faculty on the CE track may subsequently transfer to the tenure-earning track, with appropriate agreements and evaluations.

Promotions in the CE track are based on evaluation of the candidate's contributions toward advancement of clinical knowledge through (a) significant contributions to clinical care through innovations in diagnosis, treatment, or healthcare delivery, or healthcare administration (b) scholarly contributions, including published clinical reviews, reports of innovative treatment, case reports, outcome studies and authorship of reports by major commissions or committees on health-care issues, (c) outstanding clinical teaching, and (d) service to the University and/or community.

Promotion in the CE track signifies that the candidate has made significant contributions in the area of clinical and/or administrative service and teaching. A tangible contribution in clinical and/or education research is desirable.

Candidates for promotion on the clinical educator track will not be eligible for promotion if (a) they have not met clinical productivity targets for their level of clinical effort and (b) are not in full compliance with documentation needed for billing compliance and patient safety.

Minimal threshold expectations (Faculty Assessment Form, Appendix B) for promotion to Associate Professor on the Clinical Educator Track include:

(1) Clinical Service

- a. Exceeds clinical productivity targets for clinical effort as established by the compensation plan.
- b. Exceeds accepted benchmarks for patient satisfaction
- c. Provides clinical administrative leadership as an associate or full division chief, associate medical director or similar role.

(2) Scholarship

- a. Faculty with a clinical effort of <70%
  - i. An overall point total since the last appointment of at least 5 using the rubric in the Scholarship Matrix AA.

- ii. No fewer than 4 total publications over the past five year period or since last promotion if <5 years.
  - iii. At least two of the publications contributing to the total points will be as first or senior author and/or as an integral member of team science publications in a peer-reviewed, indexed journal.
  - iv. Team Science publications will require at least 2 letters from collaborators indicating the faculty members contribution to the findings.
  - v. The H-Index will be used to measure the productivity and citation impact of the publications of the faculty member.
- b. Faculty with a clinical effort of  $\geq 70\%$
- i. An overall point total of at least 3 using the rubric in the Scholarship Matrix AA.
  - ii. No fewer than 3 total publications over the past five year period or since last promotion if <5 years.
  - iii. At least one of the publications contributing to the total points will be as first or senior author and/or as an integral member of team science publications in a peer-reviewed, indexed journal.
  - iv. Team Science publications will require at least 2 letters from collaborators indicating the faculty members contribution to the findings.
  - v. The H-Index will be used to measure the productivity and citation impact of the publications of the faculty member.
- (3) Teaching/Education/Training
- a. Evidence of teaching in the clinical setting, as part of a formal teaching program, or as a mentor for undergraduate, graduate, or post-graduate learners.
  - b. Average learner evaluations of teaching >3.6 on a 5 point scale, if available.
  - c. Peer-evaluations of teaching made by the appropriate voting faculty on the basis of observation, and a summary and interpretation of the results of the student evaluations. Peer evaluations of teaching include, but are not limited to:
    - 1. Direct observation of small group facilitation, didactics, or clinical teaching;
    - 2. Faculty evaluations of University or School-sponsored continuing medical education (CME) programs, such as departmental Grand Rounds or faculty development programs.
  - d. Serves on Department, School, or University educational committee or task force or holds educational administrative/leadership position.
- (4) Reputation
- a. Evidence of a **regional** reputation supported by at least one of the following:
    - i. Participation on local, state, or regional research boards.
    - ii. Leadership in a regional professional society.
    - iii. Invited platform presentations, symposia, or workshops at regional meetings. Participation as an author on regional policy.
    - iv. Participation in at least one local or regional advocacy initiative that results in measurable policy change.

## (5) Service, Diversity and Inclusion

- a. Evidence of service to the University, local community, or national community supported by at least one of the following:
  - i. Active, documented participation on at least one Department, School, or University Committee.
  - ii. Active documented participation on a local, regional, state or national policy board.
  - iii. Active documented participation on a regional or national not-for-profit foundation or agency board.
  - iv. Active documented work in promoting diversity and inclusion at the University, local community or national community level.

Minimal threshold expectations (Faculty Assessment Form, Appendix B) for promotion from Associate Professor to Professor on the Clinical Educator track include:

## (1) Clinical Service

- a. Exceeds clinical productivity targets for clinical effort as established by the compensation plan.
- b. Exceeds accepted benchmarks for patient satisfaction.
- c. Provides clinical administrative leadership as a division chief, medical director or similar role.
- d. Provides evidence of innovation in clinical care in improved diagnostic, treatment, or care delivery documented by measurable outcomes.

## (2) Scholarship

- a. Faculty with a clinical effort of <70%
  - i. An overall point total since the last promotion of at least 7 using the rubric in the Scholarship Matrix AA since their last appointment.
  - ii. No fewer than eight total publications over the last 5 years or since last promotion if <5 years.
  - iii. At least four of the publications contributing to the total points will be as first or senior author and/or as an integral member of team science publications in a peer-reviewed, indexed journal.
  - iv. Team Science publications will require at least 2 letters from collaborators indicating the faculty members contributions to the findings.
  - v. The H-Index will be used to measure the productivity and citation impact of the publications of the faculty member.
- b. Faculty with a clinical effort of  $\geq$ 70%
  - i. An overall point total of at least five using the rubric in the Scholarship Matrix AA since their last appointment.
  - ii. No fewer than five total publications over the past 5 years or since the last promotion if <5 years.
  - iii. At least two of the publications contributing to the total points will be as first or senior author and/or as an integral member of team science publications in a peer-reviewed, indexed journal.

- iii. Team Science publications will require at least 2 letters from collaborators indicating the faculty members contributions to the findings.
- iv. The H-Index will be used to measure the productivity and citation impact of the publications of the faculty member.

(3) Teaching/Education/Training/Mentoring

- a. Evidence of active teaching in the clinical setting, as part of a formal teaching program, or as a mentor for undergraduate, graduate, or post-graduate learners.
- b. Average learner evaluations of teaching >3.6 on a 5 point scale if available.
- c. Peer-evaluations of teaching rated excellent, outstanding, or exemplary.
- d. Evidence of innovation in clinical teaching (e.g., development of a clinical curriculum for residents or fellows, clinical toolkits for learners, questions for board review).

(4) Reputation

Evidence of a **national** reputation supported by at least one of the following:

- i. Participation on federal or state or foundation study sections for research funding review.
- ii. Leadership in a national professional society.
- iii. Invited platform presentations, symposia, or workshops at national meetings.
- iv. Participation as an author on national practice guidelines.
- v. Participation in at least one national advocacy initiative that results in measurable policy change.

(5) Service, Diversity and Inclusion

Evidence of service to the University, local community, or national community supported by at least one of the following:

- i. Active, documented participation on at least one Department, School, or University Committee.
- ii. Active documented participation on a local, regional, state or national policy board.
- iii. Active documented participation on a regional, state, national or international not-for-profit foundation or agency board.
- iv. Active documented work in promoting diversity and inclusion at the University, local community or national community levels.

## C. RESEARCH TRACK

Faculty members in this track should be those who devote virtually their entire effort to research. Additional contributions in the areas of teaching and service are also desired.

Minimal threshold expectations (Faculty Assessment Form, Appendix B) for promotion to Associate Professor on the Research Track include:



(1) Scholarship

- a. An overall point total of at least 8 using the rubric in the Scholarship Matrix AA since their last appointment and a minimum of 1 paper per year over the prior five (5) year period.
- b. At least two (2) of the publications contributing to the total points will be as first or senior author and/or as an integral member of team science publications in journals with an impact factor of >3.0.
- c. Team Science publications will require at least 2 letters from collaborators indicating the faculty members contribution to the findings.
- d. The H-Index will be used to measure the productivity and citation impact of the publications of the faculty member.

(2) Research Funding

- a. An overall point total of at least 4 using the rubric in the Research Funding Matrix BB.
- b. At least one of the grants contributing to the point total will be as a principal investigator or Co-Investigator on a NIH R01, U01, U54, Program Project Grant or equivalent federal or state grant (Department of Defense, HRSA, PCORI, NSF, AHRQ, Florida Department of Health Biomedical Research Grant, or major national foundation (e.g., American Cancer Society, American Heart Association, American Lung Association) peer-reviewed research grant.
- c. At least 95% of the faculty member's effort will be funded using extramural research funding including directed philanthropy. This may include serving as a principal investigator, co-investigator on other projects, as site-Principal Investigator on a multi-center trial, or as director of an extramurally funded research core. Confirmation of the funding effort will be included in the Chair's letter.

(3) Teaching/Education/Training/Mentoring

- a. Evidence of teaching in the clinical/research setting, as part of a formal teaching program, or as a mentor for undergraduate, graduate, or post-graduate learners.
- b. Average learner evaluations of teaching >3.6 on a 5 point scale if available
- c. Peer-evaluations of teaching made by the appropriate voting faculty on the basis of observation, and a summary and interpretation of the results of the student evaluations. Peer evaluations of teaching include, but are not limited to:
  1. Direct observation of small group facilitation, didactics, or clinical teaching;
  2. Faculty evaluations of University or School-sponsored continuing medical education (CME) programs, such as departmental Grand Rounds and faculty development programs.

(4) Reputation

- a. Evidence of a **regional** reputation supported by at least one of the following:
  - i. Participation on local, state, or regional research boards.

- ii. Leadership in a regional professional society.
- iii. Invited platform presentations, symposia, or workshops at regional meetings.
- iv. Participation as an author on regional policy.  
Participation in at least one local or regional advocacy initiative that results in measurable policy change.

(5) Service, Diversity and Inclusion

- a. Evidence of service to the University, local community, or national community supported by at least one of the following:
  - i. Active, documented participation on at least one Department, School, or University Committee.
  - ii. Active documented participation on a local, regional, state or national policy board.
  - iii. Active documented participation on a regional or national not-for-profit foundation or agency board.
  - iv. Active documented work in promoting diversity and inclusion at the University, local community or national community levels.

Minimal threshold expectations (Faculty Assessment Form, Appendix B) for promotion from Associate Professor to Professor on the Research track include:

(1) Scholarship

- a. An overall point total of at least 10 using the rubric in the Scholarship Matrix AA and since their last appointment and a minimum of 2 papers published per year.
- b. At least four (4) of the publications contributing to the total points will be as first or senior author and/or as an integral member of team science publications in journals with an impact factor of >3.0.
- c. Team Science publications will require at least 2 letters from collaborators indicating the faculty members contribution to the findings.
- d. The H-Index will be used to measure the productivity and citation impact of the publications of the faculty member.

(2) Research Funding

- a. An overall point total of at least 6 using the rubric in the Research Funding Matrix BB with evidence of continuous research funding since the last promotion.
- b. At least one of the grants contributing to the point total will be a NIH R01, U01, U54, Program Project Grant or equivalent federal or state grant (Department of Defense, HRSA, PCORI, NSF, AHRQ, Florida Department of Health Biomedical Research Grant, or major national foundation (e.g., American Cancer Society, American Heart Association, American Lung Association) peer-reviewed research grants.
- c. Not less than 95% of the faculty member's total effort will be funded using extramural research funding, including directed philanthropy. This may

include serving as a principal investigator, co-investigator on other projects, as site-Principal Investigator on a multi-center trial, or as director of an extramurally funded research core. Confirmation of funding effort will be included in the Chair's letter.

(3) Teaching/Education/Training/Mentoring

- a. Evidence of active teaching in the clinical setting, as part of a formal teaching program, or as a mentor for undergraduate, graduate, or post-graduate learners.
- b. Average learner evaluations of teaching >3.6 on a 5 point scale if available
- c. Peer-evaluations of teaching rated excellent, outstanding, or exemplary if available.

(4) Reputation

Evidence of a **national** reputation supported by at least one of the following:

- i. Participation on federal or state or foundation study sections for research funding review.
- ii. Leadership in a national professional society.
- iii. Invited platform presentations, symposia, or workshops at national meetings.
- iv. Participation as an author on national practice guidelines.
- v. Participation in at least one national advocacy initiative that results in measurable policy change.

(5) Service, Diversity and Inclusion

- a. Evidence of service to the University, local community, or national community supported by at least one of the following:
  - i. Active, documented participation on at least one Department, School, or University Committee.
  - ii. Active documented participation on a local, regional, state or national policy board.
  - iii. Active documented participation on a regional, state, national or international not-for-profit foundation or agency board.
  - iv. Active documented work in promoting diversity and inclusion at the University, local community or national community level.

## D. EDUCATOR TRACK

This track may be selected for full-time members of the faculty whose primary professional activities are teaching, educational curriculum development, and/or educational administration. Individuals on the Educator track may have clinical or research responsibilities. These are not a requirement for promotion but may be considered as part of the evidence supporting promotion. Faculty on the Educator track may subsequently transfer to the tenure-earning track, with appropriate agreements and evaluations.

Promotions in the Educator track are based on evaluation of the candidate's contributions to education through (a) significant contributions to education through outstanding teaching (e.g., courses, graduate supervision, and continuing education), b) scholarly dissemination of education research findings and/or innovative curriculum, (c) education

administration, (d) regional and national reputation, and (e) service to the University and/or community.

Minimal threshold expectations (Faculty Assessment For, Appendix B) for promotion to Associate Professor on the Educator Track include:

(1) Scholarship

- a. An overall point total of at least 6 using the rubric in the Scholarship Matrix AA since their last appointment and minimum of 1 paper and/or book on curriculum as first or senior author and/or as an integral member of team science publications per year over the prior five (5) year period or since last promotion if <5 years.
- b. Team Science publication will require at least 2 letters from collaborators indicating the faculty members contributions to the findings.
- c. The H-Index will be used to measure the productivity and citation impact of the publications of the faculty member.

(2) Teaching/Education/Training/Mentoring

- a. Evidence of active teaching as part of a formal teaching program, or as a mentor for undergraduate, graduate, or post-graduate learners.
- b. Average learner evaluations of teaching >3.6 on a 5 point scale if available.
- c. Peer-evaluations of teaching made by the appropriate voting faculty on the basis of observation, and a summary and interpretation of the results of the student evaluations. Peer evaluations of teaching include, but are not limited to:
  1. Direct observation of small group facilitation, didactics, or clinical teaching;
  2. Faculty evaluations of University or School-sponsored continuing medical education (CME) programs, such as departmental Grand Rounds and faculty development programs.
- d. Evidence of curriculum development and/or role in educational administration (such as course coordinator).

(3) Reputation

- Evidence of a **regional** reputation supported by at least one of the following:
- i. Participation on local, state, or regional educational committees or task forces.
  - ii. Leadership in a regional professional society's educational initiatives.
  - iii. Invited platform education presentations, symposia, or workshops at regional meetings.
  - iv. Participation as an author on regional policy.
  - v. Participation in at least one local or regional advocacy initiative that results in measurable policy change.

(4) Service, Diversity and Inclusion

Evidence of service to the University, local community, or national community supported by at least one of the following:

- i. Active, documented participation on at least one Department, School, or University Committee.
- ii. Active documented participation on a local, regional, state or national policy board.
- iii. Active documented participation on a regional or national not-for-profit foundation or agency board.
- iv. Active documented work in promoting diversity and inclusion at the University, local community or national community level.

Minimal threshold expectations (Faculty Assessment For, Appendix B) for promotion from Associate Professor to Professor on the Educator track include:

(1) Scholarship

- a. An overall point total of at least eight (8) using the rubric in the Scholarship Matrix AA since their last appointment and a minimum of two (2) papers and/or books as a first or senior author and/or as an integral member of team science publications on education research or curriculum published per year over the prior five (5) year period or since last promotion if <5 years.
- b. Team Science publications will require at least 2 letters from collaborators indicating the faculty members contributions to the findings.
- c. The H-Index will be used to measure the productivity and citation impact of the publications of the faculty member.

(2) Teaching/Education/Training/Mentoring

- a. Evidence of active teaching as part of a formal teaching program, or as a mentor for undergraduate, graduate, or post-graduate learners.
- b. Average learner evaluations of teaching >3.6 on a 5 point scale if available.
- c. Peer-evaluations of teaching rated excellent, outstanding, or exemplary if available.
- d. Evidence of significant curriculum development and/or significant educational administration.

(3) Reputation

Evidence of a **national** reputation supported by at least one of the following:

- i. Participation on federal or state educational task forces.
- ii. Leadership in a national professional society related to education.
- iii. Invited platform presentations, symposia, or workshops on education at national meetings.
- iv. Participation as an author on national educational guidelines.
- v. Participation in at least one national advocacy initiative that results in measurable policy change.

(4) Service, Diversity and Inclusion

Evidence of service to the University, local community, or national community supported by at least one of the following:

- i. Active, documented participation on at least one Department, School, or University Committee.
- ii. Active documented participation on a local, regional, state or national policy board.
- iii. Active documented participation on a regional, state, national or international not-for-profit foundation or agency board.
- iv. Active documented work in promoting diversity and inclusion at the University, local community or national community level.

## **AWARD of TENURE**

The Award of Tenure may occur at any of several points in the career of a faculty member: (a) at the time of promotion to Associate Professor, (b) after promotion to Associate Professor but before promotion to Professor, (c) concurrent with promotion to Professor, or (d) after promotion to Professor for faculty on the non-tenure earning tracks. As such, the criteria for the Award of Tenure are considered separately from the rank at the time of promotion, although faculty on non-tenure earning tracks at the rank of professor must meet the same criteria specified for promotion to Professor with Award of Tenure that apply to individuals on the tenure-earning track.

### **(1) Scholarship**

- a. An overall point total of at least 12 using the rubric in the Scholarship Matrix AA, with an average of at least 2 publications per year since last appointment.
- b. At least 7 of the publications contributing to the total points will be as first or senior author and/or as an integral member of team science publications in journals with an impact factor of >3.0.
- c. Team science publications will require at least 2 letters from collaborators indicating the faculty members contribution to the findings.
- d. The H-Index will be used to measure the productivity and citation impact of the publications of the faculty member.

### **(2) Research Funding**

- a. An overall point total of at least 7 using the rubric in the Research Funding Matrix BB with at least one grant as PI or MPI and the other as Co-I.
- b. The grant contributing to the point total as a PI or MPI can be a NIH R01, U01, U54, Program Project Grant or equivalent federal or state grant (Department of Defense, HRSA, PCORI, NSF, AHRQ, Florida Department of Health Biomedical Research Grant, or major national foundation (e.g., American Cancer Society, American Heart Association, American Lung Association) peer-reviewed research grant.
- c. The other grant will be a major grant as PI/MPI or Co-Investigator from extramural funding.
- d. At least 65% of the faculty member's research effort will be funded using extramural research funding. This may include serving as a co-investigator

on other projects, as site-Principal Investigator on a multi-center trial, or as director of an extramurally funded research core. Confirmation of funding effort will be included in the Chair's letter.

(3) Teaching/Education/Training/Mentoring

- a. Evidence of active teaching in the clinical/research setting, as part of a formal teaching program, or as a mentor for undergraduate, graduate, or post-graduate learners.
- b. Average learner evaluations of teaching >3.6 on a 5 point scale if available.
- c. Peer-evaluations of teaching made by the appropriate voting faculty on the basis of observation, and a summary and interpretation of the results of the student evaluations. Peer evaluations of teaching include, but are not limited to:
  1. Direct observation of small group facilitation, didactics, or clinical teaching;
  2. Faculty evaluations of University or School-sponsored continuing medical education (CME) programs, such as departmental Grand Rounds and faculty development programs.

(4) Reputation

Evidence of a national reputation supported by at least one of the following:

- i. Participation on federal or state or foundation study sections for research funding review.
- ii. Leadership in a national professional society.
- iii. Invited platform presentations, symposia, or workshops at national meetings.
- iv. Participation as an author on national practice guidelines.
- v. Participation in at least one national advocacy initiative that results in measurable policy change.

(5) Service, Diversity and Inclusion

Evidence of service to the University, local community, or national community supported by at least one of the following:

- i. Active, documented participation on at least one Department, School, or University Committee.
- ii. Active documented participation on a local, regional, state or national policy board.
- iii. Active documented participation on a regional or national not-for-profit foundation or agency board.
- iv. Active documented work in promoting diversity and inclusion at the University, local community or national community level.

## TRANSFER OF TRACKS

The transfer to a non-tenure-earning track prior to promotion from a tenure-track has to be done prior to the Department vote. Transfer to a tenure-earning track from a non-tenure-earning track requires prior approval by the Dean of the Miller School of Medicine and the Provost. Transfer to tenure tracks will be initially reviewed by APT for track transfer followed by a review for the award of tenure. Failure to be approved for track

transfer and the award of tenure will result in the faculty member reverting back to their previous non-tenured position. Only one request for track transfer may be made.



## HIRING AND ONBOARDING OF RESEARCH ASSISTANT PROFESSORS

**Applies to Post-doctoral Fellow/Assistant Scientist/Associate Scientist/Scientist and Research Assistant Professors from UMMSM or an external institution who are being selected for a Research Assistant Professor Faculty position at UMMSM.**

**The following documents will be required to be submitted to APT for review and approval of the appointment of Research Assistant Professor.**

### **1. Curriculum Vitae –**

- Submit a current CV in UM Format
- Include samples of not more than two (2) publications representative of research focus/program.
- Demonstrate scholarship by at least one publication as first or senior author within the designated field of study.

**2. Letters of Reference - At least three (3) letters of reference**, of which no more than two (2) are from internal university faculty.

**3. Personal Statement: The nominee will submit a brief statement (1-2 pages) describing his/her research focus and career objectives.**

**4. Department Chair/Institute Director Letter of Support-** This letter should include the following:

The nominating department's chair/institute director will prepare a support and nominating letter that provides a clear indication of the nominee's ability to conduct independent research (or in the case of team efforts, his/her collaborative experience or talents), and the originality and quality of his or her work.

The nominating/support letter will also include an assessment of the individual's external funding record (or potential for funding), including the amount of funding received, when it was received, and whether the nominee was the PI or co-PI for those contracts/awards. If the nominee is a Co-PI, then the name of the PI should also be given. The departmental (or institute) vote count on the nominee's appointment.

A description of the nominee's research focus and potential, expected and planned contributions to the specific research project(s) he/she will be involved in, and the nominee's role and responsibility when he/she is a Co-PI or a participant in a team project.

Describe and appoint a **Mentorship Committee** comprised of Senior Faculty members (at least 3 members who meet at least yearly) that include Faculty independent of the hiring or nominating Faculty. Department Chair/institute director must certify that all evaluation letters received are included in the candidate's file.

If appropriate and indicated, a description of the nominee's potential instructional activities during the appointment period including classroom teaching, graduate student advising or mentorship, anticipated impact of the nominee's research/instructional activities on other units in the University, and the interdisciplinary nature of such activities.

## FACULTY COMPENSATION

### I. POLICIES AND PROCEDURES RELATING TO FACULTY COMPENSATION

The following principles should guide the development of a compensation plan for Medical School Faculty:

- Compensation for all faculty at the School should be related to a significant degree to measures of performance and productivity.,
- Specific guidelines and instruments for assessing performance should be developed by each Departmental Chair in consultation with a faculty committee in the department.
- Evaluations of faculty performance should be carried out at least annually and serve as a basis for decisions concerning changes in compensation.
- Fairness, sensitivity and consideration in implementing decreases in compensation should be assured by providing for timely evaluation of faculty, for appropriate advance notice of planned changes, and for limitations in the extent of decreases.
- Departmental fiscal constraints as a basis for decreased compensation should be imposed uniformly on all involved faculty and not selectively on individual faculty

The Dean of the Medical School and the CEO of the Health System, through a series of iterative negotiations with representatives from Faculty Council, developed Faculty Compensation Guidelines. Separate guidelines were developed for clinical and non-clinical Regular Faculty, each with a detailed formulation of fixed and variable components of compensation. This is termed the XYZ Plan. The X and Y components are based on meeting and exceeding individual productivity targets while the Z component is based on departmental targets. A Faculty Compensation Committee, with representatives from Faculty Council, as well as the Departmental Compensation Committee (see DCC guidelines on the Faculty Council website) are established to provide oversight for implementation of the Plan.

## PROCEDURES FOR IMPLEMENTING CHANGES IN FACULTY COMPENSATION

### GUIDELINES

The following principles relating to compensation and to evaluation of performance and productivity apply to faculty at the School of Medicine:

- (1) Compensation for all faculty at the School of Medicine shall be related to a significant degree to measures of performance and productivity as detailed in the current XYZ Plan. National guidelines such as provided by the AAMC may be used as a standard for comparison. The XYZ should be reviewed and revised at least annually in consultation with the appropriate Faculty Council committee on Faculty Compensation.
- (2) Specific measures of performance and productivity for implementing the XYZ Plan shall be developed by the Chair of each department, in consultation with a Departmental Compensation Committee comprising of senior and junior faculty. These written guidelines for evaluation of faculty performance and productivity shall annually be communicated to departmental faculty and be submitted by each Chair to the Dean for approval.
- (3) The X component for each faculty member is associated with productivity targets set by the Department Chair. Hence, clinical productivity targets should be set in consultation with the departmental compensation committee and re-evaluated at annual faculty reviews.
- (4) Each faculty member will annually submit to the Chair a summary of his or her activities and achievements over the prior academic year. Evaluations of each faculty member's performance shall be conducted by the Chair or division chief or laboratory chief annually in all departments, based in part on the prepared summary and may include review by the Departmental Compensation Committee. The annual evaluation will also provide a basis for the Chair's recommendations for compensation for the next fiscal year. Taking into account the department's approved performance and productivity guidelines, the summary prepared by the faculty member will also serve to establish a set of goals and objectives for the faculty member for the coming year.
- (5) Increases in faculty compensation will follow the School of Medicine XYZ Plan currently in effect.

- (6) Disputes between a faculty member and the Chair in the evaluation process or in the subsequent recommendations shall be reviewed by the Faculty Issues Committee. If the dispute involves compensation, financial data necessary for review of the dispute will be made available to the members of the Departmental Compensation Committee (DCC), who shall treat such information as confidential.
- (7) Decreases in faculty compensation for all faculty (except for non-tenured clinical faculty) shall not exceed 10% of the previous year's figure exclusive of amounts designated as 'at-risk clinical income' (bonus, incentive, etc.) or in recognition of specific administrative responsibilities. All recommendations by Chairs are reviewed by the Senior Associate Dean for Faculty Affairs. If decreases in compensation are recommended by Chairs, the faculty member may request a review by the Faculty Compensation Committee. The results of these reviews will be reported to the Dean, who will make the final decision regarding faculty compensation.
- (8) If the dispute continues and at least one of the committees DCC or FCC agrees that a further review is warranted then the faculty member will have the avenue of review by the Faculty Issues Committee on the issue. The faculty member can approach council leadership for a review by the Faculty Issues Committee.

## **A PLAN TO PROVIDE FOR COMPENSATION RECOGNITION OF FACULTY RESEARCH ACTIVITIES**

### **GOAL**

The goal of this plan is to develop sound fiscal guidelines to encourage and enhance the research activities of faculty and to reward those individuals who show high scholarly productivity.

### **POLICY**

For tenured and tenure-track non-clinical faculty in basic science or clinical departments, the X component of the XYZ Plan specifies the research funding contribution expected of each faculty member.

For tenured, tenure-track and non-tenured clinical faculty, Department policies should take into account all indices of scholarly productivity, including publications and a faculty member's efforts in support of his or her research and other academic activities in particular, teaching. In developing and

implementing these policies, departments should be guided by the consideration that an active research program in the biomedical sciences can proceed on a secure basis only with the availability of extramural funds (i.e., funds not generated within the School of Medicine), most frequently subject to a peer review process. Accordingly, the Chair should consider demonstrated ability to compete effectively for extramural support as a major component of effective scholarly and research productivity.

The allocation of funds for bonus (Y) payments to an individual in recognition of research productivity will be based on a written plan, developed by the department, approved by the Dean and supported by department-based funds. The plan must include the setting aside first, before allocation of a bonus payment, of a prudent sum to provide for interim funding for the faculty member's compensation during possible future periods of loss of support for research effort from extra-mural sources.

The (Y) component of the compensation plan for faculty members is distributed on an individual, merit basis. Distribution of funds at the end of the fiscal year will only occur upon approval by the Dean of the award, justified on a case-by-case basis. Bonus payments will not be considered in the calculations of increases in annual compensation or in the tenured salary guaranteed by the 'limited financial tenure' provisions of the Faculty Manual.

## **PROCEDURES FOR IMPLEMENTING FACULTY COMPENSATION DECREASES**

Each Chair will annually recommend in the department's budget an expected compensation figure for each of the department's faculty. This recommendation will be based on an evaluation of the performance and productivity of each faculty member, as described elsewhere, that encompasses the broad definition of scholarly achievements associated with teaching, research and service.

The Chair may recommend that compensation be decreased as a consequence of a decrease in a faculty member's productivity. Every effort will be made to avoid precipitous decreases in faculty compensation, which shall not exceed 10% (except for non-tenured clinical faculty) of the previous year X figure (exclusive of amounts designated for specific teaching or administrative responsibilities). All recommendations by Chairs for decreases will be reviewed by the Senior Associate Dean for Faculty Affairs and, if requested by the faculty member, by the Faculty Issues Committee. The results of these reviews will be reported to the Dean, who will make the final decision regarding faculty compensation. Compensation paid to a tenured faculty member may not, in any case, fall below that defined as the 'limited financial tenure' guaranteed salary.

A Chair's recommendations for compensation decreases for the next fiscal year must be discussed with the faculty member and submitted to the Office of Faculty Affairs no later than January 1, to provide an opportunity for review of such recommendations. Should there be a disagreement between the Chair and faculty member a review by the Senior Associate Dean for Faculty Affairs and Faculty Issues Committee. The results of this review will be reported to the Dean, who will make the final decision regarding faculty compensation.

If a decrease in the compensation of a faculty member is approved, the faculty member should be notified prior to February 1, so as to allow for four months 'notice time' prior to the start of the next fiscal year beginning June 1. During this notice time, the faculty member's compensation will be maintained at the pre-existing level.

If a recommendation to decrease compensation is received after January 1 or if the review of such a recommendation is delayed, faculty notification may not occur by February 1. Such delay will not preclude a decrease in compensation during the next fiscal year. Rather, the faculty member will be notified as soon as possible and, provided that notice is given before the start of the fiscal year on June 1, the annualized compensation decrease will begin four months after official notification in writing has been provided. Should the faculty member's productivity improve during the four months' notice period, the Chair may amend the prior recommendation for a compensation decrease.

## **TERMINATION**

Annual faculty appointments in the Educator and Research non-tenure track at the School of Medicine may be terminated by written notice, either by the University of Intention not to reappoint or by the faculty member not to return. A decision not to reappoint requires documentation of a review and remedial process that includes evidence that prior to non-reappointment (a) the faculty member and division chief/chair have met to discuss concerns, (b) a corrective action plan has been developed and provided to the faculty member in writing, with a specified timeline for revision and metrics for re-evaluation, and (c) a follow-up meeting with written documentation that the expectations of the corrective action plan have not been met.

Annual faculty appointments in the Clinical Educator track at the School of Medicine may be terminated by written notice, either by the University of Intention not to reappoint or by the faculty member not to return. Written notice by the University not to reappoint a faculty member in the Clinical Educator track shall be given in accordance with the following standards, as prescribed in the Faculty Manual. Because faculty appointments in the Miller School of Medicine occur on a rolling basis across

the calendar year, non-reappointments for Miller School of Medicine Faculty must meet the following standards:

- (1) For faculty with service less than 12 months, a minimum 90 days' notice of non-reappointment must be given prior to the end of the 12-month period.
- (2) For faculty with service greater than 12 months but less than 24 months, a minimum 6 months' notice of non-reappointment must be given prior to the end of the 24-month period.
- (3) For faculty with service greater than 24 months, at least 12 months' notice of non-reappointment may occur at any time in the calendar year.
- (4) Not later than December 15 of the second year of service, if the appointment is to expire at the end of that fiscal year.

Faculty members with multi-year appointments in the Clinical Educator track may be terminated for cause before completion of the term of the appointment. The definition of cause in this circumstance is as prescribed in the Faculty Manual.

## **UM Consulting Policy**

### **Policy Statement**

Consulting with industry provides unique opportunities for faculty to share their expertise and to help promote innovative technologies and therapies that could benefit our research and clinical operations while advancing novel strategies to advance science and patient care. UM should be supportive of these opportunities while safeguarding the integrity of our institution.

### **Definition of "Consulting"**

In general, consulting is defined as professional activity related to the person's field or discipline, where a fee-for-service, expectation of compensation, or equivalent relationship with a third party exists. Many types of consulting relationships and fee arrangements exist, and the precise form entered into may vary. The principle is that, in consulting, a person agrees to use his or her professional capabilities to further the agenda of a third party, in return for an immediate or prospective gain. For full-time faculty, activities or titles that constitute or imply managerial or supervisory responsibility are not permitted and are not allowable as consulting relations. Titles such as CEO, Director, Scientific Officer, Chief Medical Officer, or Vice President, etc., are designations generally assigned to people with line management responsibilities. Faculty must avoid titles that include terms such as executive, officer, director, manager, or chief as they imply or indicate management responsibilities and create real or perceived conflicts of commitment. To avoid implying a line management role, terms such as 'officer' or 'vice-president' must not be used; on the other hand, the terms 'Advisor' or 'Consultant' may be used, e.g., 'Chief Scientific Advisor', or 'Chief Technical



Consultant'. Situations may arise in which an University of Miami Miller School of Medicine faculty member is asked to serve on a Board of Directors of a company, a company's advisory council, or a scientific advisory board. These appointments and titles are different from managerial roles and titles and are permitted as consulting relationships. With respect to UM physicians, the provision of professional medical or clinical services is not considered consulting.

### **A. Publication**

Scholarly communications in the form of books, movies, television productions, art works, etc., which might earn financial profit for a faculty member and for another party (e.g., publisher), are not viewed as consultation. Faculty may not publish articles or other forms of scholarly communication under their own names in the course of their outside professional activities that are written in whole or material part by employees of the outside Entity (i.e., "ghost written"). If a faculty member is listed as an author on any publication resulting from performance of consulting services, a disclosure should be included stating that the work was done as a paid consultant and was not part of the individual's University duties and responsibilities.

### **B. Professional Services considered "non-consulting" outside activities**

Several types of faculty activity, other than regular University duty, are not "consulting." These include service to United States (U.S.) national commissions, U.S. governmental agencies and boards, U.S. federal and state granting agency peer review panels, philanthropic organizations or charities, professional societies, visiting committees or advisory groups to other U.S. universities, and analogous bodies. The fundamental distinction between these activities and consulting is that they are public or University service. Although an honorarium or equivalent sometimes is forthcoming, these professional service activities are not necessarily undertaken for personal financial gain. Therefore, such service does not fall within the consulting category as defined by UM's policy. However, federal regulations related to PHS-funded research consider income provided for service to some foundations and professional societies to be consulting and reporting is required according to PHS and NSF requirements. In addition, even activities such as *pro bono* work, U.S. government service in the public interest, and any outside employment unrelated to the faculty member's University responsibilities (therefore not included as "consulting" in the policy on outside consulting), should be managed so they do not take precedence over a faculty member's primary commitment to the University. Faculty members must disclose all outside professional activities related to and financial interests received from any foreign entity (that is, any non-U.S. entity), including but not limited to a foreign institution of higher education (either private or public) or the government of another country (which includes local, provincial, state, or equivalent government units, parastatal organizations, and any other quasi-governmental organization of another country) in the UM UDisclose system.

### **Number of Permissible Consulting Days**

Consulting is permitted provided the faculty member's full-time obligation to UM is met. The maximum number of consulting days permissible for a member of the University of Miami faculty on a full-time appointment is 52 days or 520 hours per academic year, including weekends and holidays. This limit is based on a judgment regarding incentives and is aimed at furthering UM's teaching and research objectives; it is not derived from

accounting principles. University holidays are included in each 52-day consultation limit. Fifty-two days of consulting per academic year is intended to be a liberal allocation, yet one that is fair to UM. In addition to this general policy on consulting, UM policies exist or may be instituted in individual schools or academic units, e.g., those currently applying to full-time faculty members in clinical departments of the Medical School.

### **Responsibilities of Faculty Members**

The responsibility for adhering to the limit on consulting days, and other aspects of UM's consulting policy, lies first with the individual faculty member. Faculty members should resolve any questions and/or ambiguities with their department chairperson or dean before the fact, so that the UM community is not injured by their actions.

All consulting agreements are between the consultant and/or consultant's LLC and the Entity. UM should not be mentioned nor is a party to the agreement. However, the faculty member must notify his/her clinical chair or designated representative by email of any consulting activities he/she is performing and keep his/her department chair and dean informed of the nature and extent of consulting and related activities by annual submission of an Electronic Disclosure Report. To this end, all consulting activities must be disclosed on the UDisclose portal. UM requires that all consulting arrangements fulfill the requirements of the applicable Safe Harbor to the Anti-Kickback Statute which prohibits transactions intended to induce or reward referrals for items or services reimbursed by the federal health care programs. If the consultant engages with an Entity that offers items or services that are reimbursable by federal health care programs, then there must be oversight to ensure that the compensation represents Fair Market Value (FMV) for the consultant's efforts. Such FMV assurances may be provided by the Entity and are subject to the "Procedure" detailed below.

UM has the right, and indeed the obligation, to protect itself from losses due to excess consulting and to seek reimbursement from the faculty member for salary and benefits covering time spent on consulting beyond the limits provided for by this policy, especially in cases where the faculty member failed to disclose the consulting activity, did not seek prior consultation, or follow the advice given by his or her department chairperson or dean. Faculty members have an obligation to report fully the level (i.e., number of hours or days) of their consulting activities when asked to do so by their chair so that it may be determined whether the principles set forth herein are being adhered to.

Furthermore, faculty must disclose their financial interests in outside entities that are related to their institutional responsibilities for research/scholarship, teaching/education, administration or clinical care as required by the Faculty Manual and on the UDisclose portal.

### **Guidelines for Policy Implementation**

#### **A. General**

The nature of the consulting work should in no way detract from the prestige of UM or the professional stature of the faculty member. Consulting obligations undertaken should conform to this objective.

### **B. Procedure**

A faculty member must receive written approval of the consulting relationship from his/her department chairperson. A faculty member will notify his/her department chairperson by memorandum prior to engaging in any consulting activities that he/she intends to perform. The faculty member shall disclose the names of companies—and identifying information, including the state of incorporation and tax identification number—for whom he/she proposes to consult, the general nature (as opposed to detailed technical aspects) of each consulting agreement, and the number of days committed per consulting agreement. The department chairperson may consider whether the consulting activity (1) may interfere with the faculty member's ability to perform assigned University responsibilities, and/or (2) knowingly presents the possibility of competition between the faculty member and the University in terms of the service(s) each could provide, or (3) presents a potential conflict of interest in, for example, performing services for a supplier of goods or services to the University or testifying against the University. If there is any doubt concerning potential conflicts presented by the request to consult, the appropriate Vice President or the President should be consulted, and a final determination made at that level. The faculty member may be requested to provide additional information about the proposed consulting activity. As a general matter, and to the extent practical, the department chairperson should strive to provide a response approving (or not approving with appropriate justification) the consulting request within seven (7) business days. In some instances, the department chairperson may determine that a fair market value (FMV) analysis of the proposed consulting services is needed to ensure both that the faculty member is receiving reasonable compensation for his/her services; and that these services are legally permissible. If an FMV analysis is required, the University—through its Office of Compliance—will endeavor, as is reasonably possible, to coordinate the FMV analysis within fourteen business (14) days.

### **C. Consulting While on Sabbatical Leave**

The purpose of sabbatical leave is to permit faculty members to take educational time off from normal University duties to advance their scholarly interests so that they may return to their posts with renewed vigor, perspective, and insight. A faculty member on sabbatical leave receiving full-time UM salary may consult up to the regular 52-day limit per year during the period of sabbatical. A person on sabbatical receiving less than full-time UM salary may supplement income up to the full-time equivalent salary, and in addition, may devote up to a maximum 52 days per year to consulting.

### **D. Hourly Consulting**

Some consultation is carried out by the hour and not by the day. In such cases, a total of 520 consulting hours are permitted per full-time academic year, including weekends and holidays. Stipulation of this total, as opposed to an hour-to-day conversion formula, permits faculty members added flexibility in carrying out consulting and still protects the primary interests of the University. The figure 520 hours does not derive from accounting principles but stems from subjective judgments about the length of average faculty workdays, the workdays of businesses employing consultants, and the desire to

accommodate legitimate needs of UM faculty. For those individuals who consult on both a daily basis and an hourly basis during one academic quarter, a formula of one consulting day equals 10 consulting hours should be used in calculating total consultation time and should include weekend consulting activities.

### **E. Conflict of Interest**

An implicit assumption underlying UM's consulting policy is that such outside professional activities are a privilege and not a right and must not detract from a faculty member's full-time obligation to his or her University duties.

Consulting agreements involving UM faculty should specifically address this concern by acknowledging that:

1. The primary duty of the Consultant, who is an UM faculty member, is to UM.
2. The Consultant is subject to UM's policy on outside consulting activities of its faculty.
3. Faculty are required to disclose to UM whether they (or members of the immediate family or their independent consulting LLC) have consulting arrangements, significant financial interests, or employment in an outside Entity. This disclosure will be performed through the UDisclose portal.
4. On an annual basis, and when situations arise that require disclosure as specified in the Faculty Manual, all faculty members must certify to their chairperson their compliance with UM's outside consulting policies.

### **Guidelines - Part-time Faculty at the University of Miami Miller School of Medicine**

Part-time faculty at UMMSM shall be subject to the University of Miami *Faculty Manual*. The guidelines below define policies on matters that are either not presently covered in that Manual, or that supplement or more fully explain the Manual, on part-time issues. The guidelines include key institutional considerations that may inform decisions on the initial appointment of faculty to a part-time position and requests by faculty to transition to temporary or permanent part-time employment at the University of Miami Miller School of Medicine (UMMSM) and University of Miami Medical Group (UMMG). These guidelines also provide a process for decision-making, monitoring, and conflict resolution.

## **1. PURPOSE AND SCOPE**

**1A. Guiding Principles:** The UMMSM supports flexible work options to accommodate important personal needs such as family caregiving responsibilities, changes in health status, desire to phase into retirement or pursue other personal interests. Offering part-time schedules advances the University's commitment to diversity in recruiting and retaining the highest quality faculty.

**1B. Intent:**

UMMSM's assumption is that a faculty member works full time unless he or she has been hired on a part-time basis. A reduction from full time to part-time status is not an entitlement but requires approval of the appropriate Chair and/or Dean. Decisions regarding part-time status must be properly balanced against departmental and institutional needs. As with full-time status, part-time status assumes that the persons' full professional efforts occur in their University employment (see Section 2B below).

### **1C. Qualifications for part-time appointment:**

#### **Initial Appointment:**

Initial appointment to the part-time faculty at UMMSM shall be limited to those individuals who are qualified for academic appointment under the same criteria applied to full-time faculty and whose work effort represents at least 50% of the effort of a full-time faculty member (i.e., at least 0.5 FTE). Part-time appointment of newly hired individuals may be on any of the non-tenure earning tracks: the Research track, the Clinical Educator track and the Educator track. Tenure-track faculty are not eligible for part-time appointments.

#### **Ongoing Appointment.**

Individuals who hold initial appointments as full-time faculty or whose initial appointment was at least 0.5 FTE may reduce their effort to below 0.5FTE, but not less than 0.1 FTE, with the approval of the department Chair and the Dean of the UMMSM. Part-time appointments between 0.1 FTE and 0.5 FTE are limited to:

1. Temporary changes in personal circumstances, or
2. Temporary changes in funding availability.

Ongoing part-time faculty appointment between 0.1 FTE and 0.5 FTE shall be limited to a period not to exceed three years. If the effort is not restored to 0.5 or greater within this three year period, the faculty appointment and employment will terminate. This policy serves as the notice period for these faculty. The part-time appointment may be extended beyond the three year period with justification and approval by the Dean of the Miller School of Medicine.

Part-time faculty with effort between 0.1 FTE and <0.50 are not eligible for University or UMMG benefits.

#### **Tenured Faculty**

Faculty holding the Award of Tenure at the University of Miami are not eligible for part-time status, with the exception of those eligible for workload relief under the

Family and Medical Leave Act (FMLA), parental leave policy, or other workload relief policies set forth in the Faculty Manual. Tenured Faculty who elect to transition to part-time status relinquish tenure at the time of the transition.

#### **1D. Exclusions:**

The limitations on level of effort in these guidelines do not apply to faculty:

- who are entitled to workload relief under the Family and Medical Leave Act (FMLA), parental leave policy or other workload relief policies set forth in the *Faculty Manual*.
- whose primary practice or appointment is with an affiliate organization outside the University (e.g., the Miami Veterans Affairs Health Care System).
- who are designated as Emeritus Faculty or who have otherwise retired from the University and continue to participate in research or education activities as working retirees.
- whose effort is limited to participation on a research project that is fully supported by extramural funding.

## **2. DEFINITIONS**

These definitions apply for the limited purposes of these guidelines:

**2A. Faculty:** Faculty to whom this guideline applies are those appointed at the rank of Assistant, Associate, or Professor on Educator, Clinical Educator, Research, Tenure-Earning tracks or those with the Award of Tenure. Faculty appointed at the Instructor level are governed by the policies for trainees or non-physician health care provider staff administered by Human Resources.

**2B. Full Professional Effort:** Faculty holding part-time appointments at UMMSM shall devote their 'Full Professional Effort' to their assigned duties and responsibilities in a manner that is equivalent to that of full-time faculty. For both part-time and full-time faculty, therefore, their academic careers at UMMSM shall be their sole professional focus. This means faculty members may not engage in outside work that competes with the University's interests or violates University Policies or regulations. This 'full Professional Effort' commitment of part-time faculty is a key difference between these faculty and those appointed to the voluntary or affiliated faculty of UMMSM. Circumstances under which faculty may engage in teaching at other institutions, consulting or otherwise receive compensation for non-university activities are outlined in the *Faculty Manual*. UMMG members are also subject to the policies in the practice plan regarding outside work for pay that involves patient care activities.

Faculty whose primary employment is with a formal affiliate organization of the University of Miami (e.g. the Miami VA Health System, Jackson Health System) and their University effort is a part-time percentage are exempted from the "full professional effort" requirement for their work with the affiliate organization.

For clinical faculty, this section shall be interpreted to mean that the part-time faculty member will provide clinical services for UHealth and approved University of Miami affiliate organizations. Pro-bono clinical services in the community and region are important components of the University mission; however, prior approval from the department Chair, Dean, and the University of Miami Medical Group is required before engaging in these activities. Exceptions to this sole professional effort requirement for part-time clinical faculty may be made if the exception is (a) a critical component of the mission of UHealth and the Miller School of Medicine, (b) of direct benefit to UHealth and the Miller School of Medicine, and (c) approved by the Executive Vice President for Health Affairs and the Dean of the Miller School of Medicine.

For Research and Educator faculty, exceptions to the full professional effort requirement may be made if (a) the activity benefits the Miller School of Medicine, (b) contributes to the School mission, (c) does not constitute a conflict of interest under University policy, and (d) is approved by department Chair and the Dean of the Miller School of Medicine.

### **3. Considerations**

The UMMSM supports flexible work options but does not guarantee automatic approval of requests for part-time status. An individual faculty member's needs must be properly balanced against the departmental and institutional needs. Ability to accommodate part time appointments will vary by department, by division, and over time. Factors to consider include:

#### **3A. Ability to meet mission expectations:**

- a. The faculty member is presently on track with their career trajectory and in good standing with respect to the academic educational, clinical, research and service missions of UMMSM/UMMG
- b. The faculty member shows promise to continue their academic trajectory and to meet mission expectations in a part time position, though consideration will be given to an adjusted timeline accounting for a decrease in effort.

#### **3B. Impact on organizational finances (UMMSM and UMMG):** The academic unit's organizational finances must be able to accommodate the request, giving consideration the following factors:

- a. Relative Value Unit (RVU) generation/clinical contracts/research grants and salary support.
- b. Fixed cost burden: Costs in overhead that don't vary with reduced effort including certain benefits, malpractice insurance expense, and space costs.
- c. Incremental costs: Increases or decreases in support staff needs, basic supplies.
- d. Implications for individual faculty benefits at part time status (e.g., tuition benefits, health insurance fees) and the cost to the division/department/center.
- e. Costs that may be averted. Potential impact on retention and morale if the request is or is not granted, for the faculty member making the request and other faculty in the same academic unit impacted by this request, cost of recruiting new faculty, etc.

**3C. Clinical Responsibilities:** Can the needs of the division/department for coverage of clinical responsibilities can be fulfilled?

- a. Faculty members of the division/department involved accept the call schedule and clinical coverage resulting from approval of a request to move to part-time status.
- b. Availability of clinic space, operating room time, and clinical support staff.

**3D. Research Responsibilities:**

- a. Funding and required effort for research needs are covered.
- b. The faculty member's ability to continue on his/her career trajectory (grant opportunities for part-time faculty may be restricted).
- c. Supervision of laboratory personnel and trainees (graduate students, fellows) is adequate.

**3E. Teaching, Administrative and Service Responsibilities:** The teaching, administrative and/or service responsibilities of the individual or the position are adequately covered.

#### **4. Process for Part-Time Application and Decision Making**

For any process involving decisions regarding part-time status described in the section below, approval of the Dean is required for non-clinical faculty and approval of both the Dean and the Executive Vice President for Health Affairs (EVPHA) are required for clinical faculty.

**4A. Appointment process for New Faculty Members:** Initial appointment of individuals to the part-time faculty at UMMSM shall be made by the same process as for full-time positions on the same tracks. This process includes:

- a. Permission by the Dean/EVPHA for the Department to create the faculty position
- b. Recruitment pursuant to university policies on affirmative action
- c. An advisory vote of the eligible voting faculty in the department
- d. Recommendation of the candidate by the department chair to the Dean
- e. An offer letter from the Dean/EVPHA to the candidate defining the conditions of employment, duties and responsibilities, and compensation
- f. Acceptance of the offer in writing by the candidate
- g. Approval of the candidate's rank and track by the Executive Vice President and Provost

For faculty members making a transition from full-time to part-time status (or from part-time to full-time status), only the following steps are required:

- a. Recommendation of the department chair to the Dean/EVPHA and approval by the Dean/EVPHA
- b. An offer letter from the Dean/EVPHA to the candidate defining the conditions of employment, duties and responsibilities and compensation



- c. Acceptance of the offer in writing by the candidate

**4B. Transition from Full-Time to Part-Time Status:** Approval to shift from full-time to part-time status by faculty members is not an entitlement. Full-time faculty may request a transition to part-time status on a permanent or temporary basis. The request should specifically include the desired effort commitment as well as the length of time if requesting a temporary change in status. To become effective, the faculty member's request to transition to part-time status must be approved by the Department Chair and the Dean/EVPHA

If the request is denied, the Department Chair shall inform the faculty member and the Senior Associate Dean for Faculty Affairs of the reason(s) for the denial. The Senior Associate Dean shall consult with the faculty member and the Chair and make one of three possible recommendations to the Dean/EVPHA:

1. Approval of the denial thereby keeping the faculty member in full-time status
2. Disapproval of the denial thereby permitting the faculty member to move to part-time status
3. Referral to the Faculty Issues Committee of the Medical School Faculty Council to provide peer-review of the matter to the Dean/EVPHA

If the Dean/EVPHA approves the transition denial, the faculty member may also request by the Faculty Issues Committee to review the decision and provide additional advice to the Dean/EVPHA.

**4C. Transition from Part-Time to Full-Time Status:** Unless as defined below, there is no entitlement to shift from part-time to full-time status.

Full-time faculty members requesting a transition to part-time status may, at the time of the request, seek an agreement in writing with the Department Chair which provides an entitlement to return to full-time status at or before a fixed date within 12 months. The Department Chair shall determine whether this request is in the best interest of the department and make a recommendation to the Dean/EVPHA whose approval is required. If the faculty member's request to shift to a part-time appointment is linked to the assurance of his/her return to full-time status, and the Department Chair and/or Dean/EVPHA does not agree to the latter request, the faculty member may withdraw his/her request to shift to part-time status at any time prior to the Chair's and Dean's/EVPHA's approval of the change.

An agreement to permit the return of a faculty member to full-time status may be renewed during the faculty member's hiatus from full-time employment for two additional periods up to 12 months each. Request for renewal must be made in writing to the Department Chair. Approval of this request is not an entitlement. Rather, the Chair shall determine if the request is in the best interest of the department and make a recommendation to the Dean/EVPHA, whose approval is required.

It should be noted that agreements that entitle part-time faculty to return to full-time status require that the department assure that a full-time position is available at the end date of the agreement. This likely entails the shifting of duties and other temporary changes with the expectation that the part time faculty member will return to full-time employment. If the part-time faculty member declines to return to full-time status at the end of an agreement permitting this transition, one of three possible outcomes may occur. These are:

1. The faculty member may be reappointed to the part-time faculty position under an agreement approved by the Chair and Dean/EVPHA to entitle a return to full-time status during another period of up to 12 months. This agreement may be renewed at the request of the faculty member and with the approval of the Chair and Dean/EVPHA.
2. The faculty member may be reappointed, contingent upon approval by the Chair and Dean/EVPHA, to the part-time faculty position without entitlement to return to full-time status. Thereafter, the part-time faculty member shall be subject to reappointment/non-reappointment by the policies defined in the *Faculty Manual* for others in the faculty member's track
3. The department Chair may recommend to the Dean/EVPHA and Provost that the faculty member not be reappointed. If non-reappointment is approved by the Dean/EVPHA and Provost, the faculty member shall be so notified and given notice according to same policies defined in the *Faculty Manual* for others in the faculty member's track.

Part-time faculty members may request a transition to full-time status at any time. To be enacted, such a request requires approval by the Department Chair and the Dean/EVPHA. If a faculty member's request is denied, and if a full-time position is subsequently created by the department for which the part-time faculty member is qualified by education, experience and past performance, then the part-time faculty member who had requested a transition to full-time status shall be given first consideration for appointment to the newly created position. If the part-time faculty member is not appointed to the newly created position, the department must justify to the Dean/EVPHA the reason(s) for the negative decision and so notify the faculty member. A faculty member may request the Faculty Issues Committee to review the decision and provide additional advice to the Dean/EVPHA.

## **5. Rights, responsibilities, and benefits for part-time faculty**

### **5A. Voting Rights:**

The School of Medicine extends full voting rights to part-time faculty on the Research track in any or all of the following matters:

- a. reappointment of part-time Research faculty of lower rank
- b. promotion of part-time Research faculty of lower rank
- c. evaluation of the department chair
- d. evaluation of the dean
- e. election of representatives to the School's Faculty Council
- f. election of senators and alternates to the Faculty Senate

The School of Medicine extends full voting rights to part-time faculty on the Clinical Educator and Educator tracks in any or all of the following matters:

- a. reappointment of part-time Clinical Educator and Educator faculty of lower rank
- b. promotion of part-time Clinical Educator and Educator faculty of lower rank
- c. evaluation of the department chair
- d. evaluation of the dean
- e. election of representatives to the School's Faculty Council
- f. election of senators and alternates to the Faculty Senate

Within departments, part-time faculty on the Research, Clinical Educator, and Educator tracks are entitled to vote on all matters for which they are qualified.

**5B. Information and Service:**

Part-time UMMSM faculty should be informed of Department, School, University, Faculty Council and Faculty Senate matters in same manner as full-time faculty.

Part-time faculty shall be eligible to serve on Department committees and on standing committees of the Faculty Council and Faculty Senate. They are also eligible to be nominated and to serve (if elected) on the Faculty Council and Faculty Senate, where they shall have voting privileges that are unrelated to their status as part-time faculty.

Part-time faculty may serve as principal investigators of grants as long as the granting agency requirements are fulfilled.

**5C. Contracts and Reappointments/Non-Reappointments:**

In the same manner as full-time faculty in their respective tracks, part-time faculty on the Research, Clinical Educator, and Educator tracks shall be given annual contracts. Part-time faculty on the Research and Educator tracks are subject to the same rules and processes for non-re-appointment and provision of notice as full-time faculty members in their respective tracks specified in the *Faculty Manual*.

Contracts for part-time faculty on the Research Track shall state that their appointments are of indefinite duration subject to annual reappointment and to the availability of external funds for that position. Pursuant to the Faculty Manual, if external funds are insufficient, these faculty members shall be informed in writing and they shall be entitled to one month's notice with pay for each year or part of a year of continuous service as a faculty member on the research track up to a maximum of twelve months.

Contracts for part-time faculty on the Clinical Educator and Educator tracks shall state that their appointments are of indefinite duration subject to annual reappointment. Faculty on the Clinical Educator track shall be given written notice by the University of its intention not to reappoint and shall be given 'notice time' according to the same policies as defined in the *Faculty Manual* for faculty on the Educator track. Faculty on these tracks are entitled to a three months' notice in their first year of appointment, a 180 day notice in their second year, and a 12 months' notice after this.

#### **5D. Benefits:**

Part-time faculty with at least 50% effort are eligible for benefits. In certain cases, benefits are prorated based on the percent FTE. These benefits are outlined in the *Faculty Manual*. UMMG members should also consult their practice plan for any adjustments in benefits not available to non-UMMG members when transitioning to part-time status. Part-time faculty with effort less than 50% are not eligible for University or UMMG benefits.

### **Associated Faculty, Miller School of Medicine**

The Associated Faculty of the Miller School of Medicine are qualified individuals who make a meaningful contribution to the educational and/or research missions of the departments and the Miller School of Medicine. The Associated Faculty include both the Affiliated, Voluntary, Adjunct, and Visiting Faculty.

Associated faculty are not eligible for tenure or tenure-earning status and are not voting members of departments or the School. An associated faculty appointment (voluntary faculty or affiliated faculty) does not confer compensation or benefits to the associated faculty member. Any compensation arrangement (e.g., employed UMMG staff physician, per diem employee, or consultant) between these individuals and the University is separate and distinct from the Associated Faculty appointment and does not confer any sort of faculty appointment on the individual.

The Associated Faculty include:

1. **Affiliated Faculty.** These individuals are employed by institutions that have formal affiliations with the University of Miami Miller School of Medicine and in their employment role make a meaningful contribution to the educational and/or research missions of the School. These institutions include the Jackson Health System and the Miami Veterans Administration Hospital, as well as other hospitals in Miami-Dade, Broward, and Palm Beach Counties.
2. **Voluntary Faculty.** Voluntary Faculty are individuals from the community who are not employed by an institution with a formal affiliation with the Miller School of

Medicine who make an ongoing meaningful contribution to the educational and/or research missions of the School.

3. Visiting Faculty. Individuals who hold faculty appointments at other institutions who come to the University of Miami for a time-limited period not to exceed 6 months may be appointed to the Visiting Faculty. Visiting Faculty are typically individuals who are on sabbatical from another institution or individuals who are invited by departments to provide a series of invited lectures or mentoring sessions. Visiting Faculty may be provided an honorarium for their contribution, but are otherwise not employees of the University of Miami.

### **Appointment Process**

Associated Faculty are appointed in a primary Department. Associated Faculty may hold secondary appointments in departments where they have a professional interest if the appointment is supported by the Faculty and Chair of the secondary department.

The process for appointment to the Associated Faculty involves:

1. A formal request from the designated individual to be considered for appointment.
2. The candidate's personnel data form
3. Proof of degree (official transcript)
4. Copy of current Florida license (if applicable to the appointment)
5. Consultation with and a vote of the eligible voting faculty in the proposed primary department.
6. A recommendation letter from the Department Chair to the Senior Associate Dean for Faculty Affairs requesting the appointment. This letter should include the outcome of the department vote, a summary of the qualifications of the individual, a description of the specific contributions that the Associated Faculty member will provide, and a current version of the individual's CV.
7. Upon review of the recommendation of the Chair, the Senior Associate Dean for Faculty Affairs will make the appropriate formal appointment to the Associated Faculty.

### **Eligibility**

Individuals appointed to the Associated Faculty in any category must meet several minimum qualifications.

1. US citizenship or US legal status with a valid and current visa for US residency.
2. Hold a terminal degree in their professional discipline, consistent with the requirements established by the University of Miami for appointment to the Regular Faculty.
3. Agree to comply with University, UHealth, University of Miami Medical Group, Miller School of Medicine, and Department policies, including, but not limited to:
  - a. Zero Tolerance for Learner Mistreatment
  - b. Common Purpose and Values
  - c. Relationships with Industry and Disclosure of Outside Relationships

- d. Specific expectations established by the department recommending the Associated Faculty appointment.

### **Term of Appointment**

Associated Faculty are appointed for three-year terms, with the opportunity for renewal after each term if supported by the department and in good standing with the eligibility criteria above. Appointments may be made at any time during the University's fiscal year. The effective date of the appointment shall be the date of which the candidate's written acceptance of the appointment is received in the Office of Faculty Affairs.

To standardize times for reappointment for Associated Faculty, candidates appointed between June 1 and August 31 will be credited with one full year of service on the following May 31<sup>st</sup>. Candidates appointed between September 1 and May 31 will be credited with one full year of service on May 31<sup>st</sup> of the next year after the first May 31 date.

The Associated Faculty member must maintain in the Office of Faculty Affairs an active and current file containing data pertinent to the appointment. This file will include up-to-date status of the Associated Faculty member's professional license. The Associated Faculty member bears the responsibility for notifying the Office of Faculty Affairs, within 30 days, about any changes in professional license status, as well as any legal or disciplinary action that is inconsistent with the terms of the Associated Faculty appointment.

Reappointment to the Associated Faculty requires (a) evidence of continued compliance with Eligibility criteria, (b) consultation with the faculty of the primary department and (c) a letter of support from the Chair to the Sr. Associate Dean for Faculty Affairs. The final decision for reappointment rests with the Vice Dean for Faculty Affairs.

### **Associated Faculty Academic Rank**

Departments may recommend appointments to the Associated Faculty at one of three ranks:

1. Associated Assistant Professor (with designation as Voluntary Assistant Professor or Affiliated Assistant Professor).
2. Associated Associate Professor (with designation as Voluntary Associate Professor or Affiliated Associated Professor).
3. Associated Professor (with designation as Voluntary Professor or Affiliated Professor).

Associated Faculty appointments are not made at the rank of Instructor.

### **Establishment of Department Criteria for Rank Appointment**

Each department in the Miller School of Medicine will establish the criteria for appointment (or promotion) for each of the academic ranks indicated above. These criteria shall be written, endorsed by a majority of the faculty of the appointing department, and uniformly applied to all candidates. The department criteria will require the approval of the Department Chair and the Vice Dean for Faculty Affairs. The criteria include a trajectory of expectations from the rank of Associated Assistant Professor through Associated Professor, and shall include descriptions of expectations of:

1. Teaching that may include classroom teaching (courses, lectures, seminars, laboratories, small groups, workshops), clinical teaching, regional or national specialty conferences, or research mentorship at the undergraduate, medical student, resident, graduate student, or fellow level.
2. Research that may include serving as a co-investigator or consultant on funded or unfunded research projects, research mentorship of students or junior faculty, and publication of research study findings.
3. Clinical care that may include separate employment as a UHealth employed physician, voluntary attending on inpatient rounds, clinical demonstration in the simulation program, or service on regional or national accrediting or examining boards.
4. Community Engagement and Advocacy that may include participating in policy development or legislative advocacy or engaging in activities focused on improving community capacity to address health needs.
5. Service to the Department and/or School that may include serving on committees, administrative assignments with measurable deliverables, and/or program development and administration.
6. Reputation that may include recognition, awards, service in leadership of professional societies, participation on regional, national, or international boards, committees, or task forces, or service on study sections or foundation review panels.

### **Requirements for Initial Appointment or Promotion**

***Associated Assistant Professor.*** Initial appointment to Assistant Professor requires:

1. a review of the accomplishments of the candidate to assure that these are consistent with the criteria established for this rank by the department
2. a consultative vote of the eligible voting faculty in the primary department and
3. the support of the Chair. External letters are not required.

***Associated Associate Professor.*** Initial appointment or promotion from Associated Assistant Professor to Associated Associate Professor requires:

1. a review of the accomplishments of the candidate to assure that these are consistent with the criteria established for this rank by the department that include demonstration of a local or regional reputation
2. a consultative vote of the eligible voting faculty in the primary department and
3. the support of the Chair. External letters are not required.

**Associated Professor.** Associated Professorial rank represents the highest academic achievement and requires that the candidate has demonstrated a positive trajectory of growth. Promotion to Associated Professor also requires evidence of scholarship (research, education, clinical, or advocacy).

Initial appointment or promotion from Associated Associate Professor to Associated Professor requires:

1. Demonstration that the candidate meets or exceeds the criteria for the rank of Associated Professor established by the primary department that include evidence of a national reputation. These criteria must accompany the appointment or promotion packet throughout the appointment and promotion process and be placed in the candidate's file in the Office of Faculty Affairs. The candidate may prepare a written personal statement and career assessment that describes their qualifications for the appointment/promotion, the significance of their prior contributions, and the contribution(s) they intend to make as an Associated Faculty Member.
2. a consultative vote of the eligible voting faculty of the primary department
3. a letter from the Chair that describes the departmental criteria for appointment/promotion at this rank, summarizes the accomplishments of the candidate, summarizes the vote of the eligible voting members of the department, summarizes the comments and recommendations of external reviewers, describes the significant and continuing (in the case of promotion) contributions that the candidate makes to the educational and/or research mission of the department and School, and states his/her recommendation.
4. A minimum of two external letters from reviewers at the rank of Professor or equivalent. The Chair will solicit letters from a minimum of five potential reviewers, and will supply the department voting faculty and the Sr. Associate Dean for Faculty Affairs with a list of reviewers and the rationale for how and why each was selected. While letters from recognized leaders in the candidate's field who have no conflict of interest are preferred, letters may be from former colleagues who share mentors, or former students or residents who have reached the rank of Professor at the University of Miami or other institutions. If letters were solicited from individuals recommended by the candidate, the nature of any relationship between the candidate and the reviewer must be stated. Candidates shall be permitted to identify to the Chair any persons who the candidate believes are unsuitable and explain the reasons for that belief. The Chair must certify that the letters were solicited in a neutral manner, and a copy of the Chair's solicitation letter will be included in the file. Letters of evaluation shall be confidential, but they may be reviewed by all individuals directly involved in making the appointment or promotion decision.

### **Miller School of Medicine Review**

The UMMSM APT Committee shall review the candidate's promotion materials, the department's criteria for appointment/promotion to Associated Professor, department vote, external letters, and the Chair's letter and recommendation. A vote of all eligible



voting members of the Appointment, Promotions, and Tenure committee will serve as a recommendation to the Sr. Associate Dean for Faculty Affairs and Dean of the UMMSM.

The final decision regarding the appointment or promotion to Associated Professor will be made by the Dean of the UMMSOM in consultation with the Sr. Associate Dean for Faculty Affairs.

### **Conditions of Appointment**

Members of the Associated Faculty are expected to conduct their activities in a professional and collegial manner, consistent with the Common Purpose and Values of the University of Miami. Failure to do so will be grounds for immediate termination of the Associated Faculty appointment.

### **Use of Faculty Title**

Members of the Associated Faculty are expected to represent themselves to the community in a way that is fully consistent with the appointment. The title used on all correspondence, letterhead, business cards, lab coats, statements in a public forum, publications, grant submissions, and any other situation where a professional title is used shall always include either the Voluntary (e.g., Voluntary Assistant Professor, Voluntary Associate Professor, Voluntary Professor) or Affiliated (e.g., Affiliated Assistant Professor, Affiliated Associate Professor, Affiliated Professor) title. Affiliated faculty shall also include the affiliated institution in the title (e.g., Affiliated Assistant Professor at Jackson Memorial Hospital; Affiliated Associate Professor at the Miami VA Hospital).

Associated Faculty shall not represent themselves in any manner that suggests they are members of the full-time faculty of the University of Miami. Failure to clearly denote Associated Faculty status as described above shall be grounds for immediate termination from the faculty.

University of Miami policy stipulates that Associated Faculty may acknowledge their affiliation with the University of Miami in print or other media only as it applies to work done for the Miller School of Medicine in University facilities, under University sponsorship, or in collaboration with University full-time faculty.

### **Voting Rights**

Associated Faculty are not eligible to vote on departmental, School, or University matters.

### **Faculty Appointments at Other Institutions**

Associated Faculty may hold similar appointments at other institutions and universities provided that the other appointment(s) is reviewed and approved by the UMMSM Dean and the Sr. Associate Dean for Faculty Affairs. Appointments that represent a real or

potential conflict of interest shall be avoided unless a conflict management plan is approved and monitored.

### **Termination of Associated Faculty Appointment**

Associated Faculty appointments may be terminated by the University with 30 days' notice following a non-reappointment decision by the voting members of the department and concurring decision by the Chair, except in cases identified in this document where immediate termination may occur.

### **Appeals**

Appeals of decisions on appointment, reappointment, promotion, non-reappointment, or termination may be filed by members of the Associated Faculty with the Senior Associate Dean for Faculty Affairs who will review relevant issues with the appointing department Chair. If agreement with the candidate is not reached, the candidate may request that the issue be considered by the Faculty Issues Committee of the Faculty Council. This committee shall deliberate the issues presented and recommend to the Dean who will make the final decision.

### **Benefits**

Associated Faculty are entitled to the following privileges and benefits of the Miller School of Medicine:

1. The right to participate in departmental activities such as Grand Rounds
2. Access to the Medical School library and online subscribed journals if accessed from a University of Miami facility.
3. An Associated Faculty ID badge, which should be clearly observable when on University property or in University facilities.

Departments may supplement these benefits with additional benefits and invitations. Supplemental benefits with monetary value require approval of the Senior Associate Dean for Faculty Affairs.

## **Ombuds Office at the University of Miami Miller School of Medicine**

The office of the ombudsperson is a resource for Faculty, Staff, Medical Students and Graduate Students, Residents, and Fellows to assist in resolution of problems and conflicts. The ombuds office will consist of a staff ombuds, a research faculty ombuds and a clinical faculty ombuds. The ombuds will be appointed by the Dean after discussions with the Senior Associate Dean of Faculty Affairs and the Medical School Faculty Council leadership. The staff ombuds will initially assess issues that are brought to the ombuds office and direct the person to the appropriate faculty ombudsperson or directly address the issue. The staff ombudsperson will also maintain the ombuds website for the medical school.

The office of the ombuds is a venue for addressing concerns, resolving conflicts, dealing with problems and providing advice. The ombuds are an independent, neutral and confidential resource. The role of the ombuds is to listen to concerns, evaluate the options, assists in resolving problems, mediating conflict and referring individuals to appropriate campus/university resources.

The ombuds does not adjudicate, determine guilt, participate in formal investigations or litigation, conduct investigations, provide legal advice, assign sanctions to individuals, replace the function of any university office, department or process, maintain formal records, address any issues related to sexual harassment.

Four principles guide the work of the Office of the Ombudsperson, confidentiality, neutrality, informality and independence. These principles are consistent with the International Ombudsman Associate Code of Ethics.

## **Guidelines for Searches for Medical School Dean, Department Chairs (and Formal Leadership Positions of Other Academic Units) at the University of Miami Miller School of Medicine**

The selection of leadership for the Medical School or a Department in the University of Miami Miller School of Medicine (subsequently referred to as the School), or for one of its principal academic units, can have a significant and long-lasting effect on not only the educational, research and clinical activities of the Medical School, Department and its faculty, but also on the programs of other Departments, and the University.

The principles governing the Search for the Medical School Dean or Chairs should include the following:

- (a) Selection of new leadership provides the opportunity to assess the strengths, weaknesses, future directions and needs of the Medical School and Department.

- (b) The Search should be guided by this assessment and by the goals defined and the resources made available by the President or School Dean.
- (c) Every effort should be made to assure the participation of Medical School faculty or Department faculty, if the search is for a Medical School Dean or Department chair respectively. in the assessment and Search process and to keep faculty members regularly informed of the status of the Search.
- (d) Recognize that other Departments, closely affiliated institutions and the community have interests in the outcome of the Search.
- (e) The goal of the Search should be to identify the most highly qualified candidate or candidates by a process that is timely, thorough, fair, sensitive to the potential for effective leadership in a diverse pool of candidates, and as open as discretion permits; it is also important that the search process reflect well on the School. To achieve these ends, defined procedures should be followed whenever possible, tempered by flexibility where appropriate.
- (f) The outcome of the Search process should provide the President for the Medical School Dean or Dean for a Department Chair, as the appointing authority, with one or more recommendations that will, in the most desirable circumstance, have the support of the Medical School faculty or Department faculty, as well as of other interested constituencies, so as to provide vigorous, effective and collegial leadership for the Department and the School in the pursuit of academic excellence in the years that follow.
- (g) The Search process should conform with the written provisions and the intent of the University of Miami Faculty Manual.

The following procedures and practices are recommended in support of these principles:

- I. A staff individual should be appointed by the President or Dean depending on the type of search to serve as continuing Coordinator for Searches for the School, in recognition of (a) the importance to the School of Medical School Dean or Chair Searches; (b) the desirability of an orderly, efficient and generally uniform Search process that reflects well on the School; (c) the advantage to making use of institutional experience over time with the Search process; and (d) the considerable administrative burden generated by a Search.

2. As soon as possible after the Medical School Dean position or a Chair becomes vacant, decisions should be made and announced by the President to the Medical School Faculty or the Dean to the Department and the School concerning plans for interim leadership and for a Search. Prolonged tenure of Interim (Acting) Deans or Chairs is not in the best interests of the Department and the School, and such appointments should rarely exceed two years. If such an appointment is to be extended, the President or Dean should convey the basis for this decision before the end of the second year both to the faculty of the Medical School, Department (in a meeting convened for an exchange of views on the matter) and to the School Faculty Council.
3. The announcement of a change in Medical School Dean or Chair should promptly initiate a thoughtful School-based or Departmentally- based assessment of the academic and administrative strengths, weaknesses, future directions and needs of the Medical School or Department in the context of the status of its discipline nationally and of local considerations, respectively. A tenured or senior member of the Medical School or Department faculty should be chosen by the President or Department to lead this assessment effort, which should include the participation of faculty of various ranks and interests. The assessment may involve consultation with others in the local and national academic communities and should be concluded within three months. A written report of the assessment and of recommendations based on it should be circulated to the Medical School Faculty or Department faculty for comment depending on what type of search has been undertaken. The final Assessment Report, revised if appropriate and appending additional views as necessary, should be made available to Medical School faculty, Department faculty, to the President or Dean, to the subsequently constituted Search Committee and, at some point in the Search process, to the Dean or Chair candidates. A meeting of the President with Medical School faculty or Dean with the Department faculty should be held for the purpose of exchanging views on the final Assessment Report.
4. **A Medical School Search Committee should be appointed by the President and a Chair Search Committee should be appointed by the Dean** within four months of announcement of the Medical School Dean or Chair becoming vacant. The composition of the Committee should reflect the major interactions and academic and institutional partnerships of the Medical School or Department and should include at least two Department members chosen by vote of the Department faculty (one, in the case of Departments with fewer than 20 faculty). For clinical departments, the Committee should include at least one representative from the Miami VA Medical Center for those Departments having services at that facility; at least one community-based physician who is a member of the Voluntary Faculty (preferably a graduate of the School or of its programs); a senior administrator or executive of UHealth; and a senior administrator of Jackson Memorial Medical Center (JMMC) for those Chairs who will also serve as Chiefs of Service there. The Committee should include

representation of women and minorities. At least one member of the Committee shall be a member of the School Faculty Council, whose responsibility will be to keep the Council regularly informed of the status of the Search. All members of the Committee must be members of the faculty, with the exception of administrators at JMMC. The Chair of the Committee will be designated by the President or Dean depending on the type of search and must be a full-time member of the faculty.

5. The President or Dean will personally convey a Charge to the Committee at one of its initial meetings, including projected goals for the future development of the Medical School or Department, views of the type of leadership needed and information as specific as possible about the resources to be made available to the new Medical School Dean or Chair. The President's views or Dean's views on the Department's Assessment Report should be made known. The purpose of the Charge is to guide the Committee and provide an appropriate context for the Search. The time-frame envisioned for the Search should be discussed; rarely should this extend beyond one year.
  
6. At its early meetings, the Committee will:
  - (a) review the President's or Dean's charge
  - (b) review these Guidelines
  - (c) review the Medical School or Department's Assessment Report, other pertinent background and resource information, and the views of Committee members concerning the Medical School's or Department's strengths, weaknesses, directions and needs
  - (d) hear invited presentations from within (and outside) the Medical School or Department
  - (e) decide on the desirability of outside consultation and proceed with relevant arrangements, if appropriate
  - (f) agree on means to identify the appropriate candidate pool (academic leaders and organizations to be contacted concerning potential candidates, professional journal advertising, etc.)
  - (g) agree on specific means to assure active solicitation of women and minorities as potential candidates and their inclusion in the candidate pool (including contacting appropriate local and national individuals and organizations)
  - (h) review and approve drafts prepared by the Committee Chair of the advertisement of the position; of letters soliciting potential candidates, including a letter to School and Department faculty soliciting their nominations, and a letter inviting School or Department faculty to indicate their own willingness to be considered for the position; and of letters acknowledging receipt of suggestions of candidates

- (i) attempt to formulate the characteristics of desirable candidates based on (a), (c), (d) and (e)
  - (j) under the supervision of the Chair (and with the support of the Coordinator), establish a confidential file regularly available to all Committee members on each candidate proposed, to include background material, correspondence and written documentation of telephone discussions and other contacts pertinent to the candidate
  - (k) assure compliance with University and School regulations for recruitment and selection through early coordination (as soon as (h) is completed) with the Offices of Faculty Affairs and Affirmative Action
  - (l) make provision for a written but confidential record to be kept of each of the Committee's meetings, to include an accounting of date, time and those present and of procedural and substantive actions reported on and taken (but not of opinions or evaluations expressed or conveyed by Committee members or others)
7. At subsequent meetings, the Committee will:
- (a) review and assign preliminary ratings to candidates proposed
  - (b) decide, based on these ratings, on candidates concerning whom additional information will be sought
  - (c) solicit at least three letters of recommendation for each of these candidates
  - (d) agree on appropriate informal telephone contacts concerning such candidates (with the understanding that written records will be made of contacts for inclusion in candidate files)
  - (e) assure that women and minority candidates have been actively solicited and, if appropriate, included among candidates to be further considered
  - (f) determine whether potential candidates from within the Medical School or Department have responded to the Committee's invitation to ask to be considered
8. After reviewing information obtained from (6) and (7), the Committee will invite suitable candidates for one or more visits to the Medical Center. Careful plans will be made for the content and structure of these visits. Among pertinent considerations are:
- (a) attention to the convenience, comfort, hospitality and impressions conveyed to candidates. Such visits are expressions of the standards of the Medical Center beyond the outcomes of the Search,
  - (b) provision for meaningful interactions between candidates and current leadership at the Medical Center, as well as with Committee members individually or in small groups
  - (c) provision (usually during a second visit) for meaningful interactions between candidates and Department faculty, including faculty of various ranks and interests. At some time before a final

- recommendation is made by the Committee, each candidate should meet with the Medical School or Department as a whole for an exchange of views with the candidate in an open forum.
- (d) solicitation of written (but confidential) impressions by all who interact with a candidate, to be included in the candidate's file that is accessible to Committee members. (The Committee may request structured responses via forms made available to those whose opinions are solicited, using models kept on file by the Coordinator.)
  - (e) assurance that candidates from within the Department are accorded the same opportunities for interaction as those invited to visit from other institutions
  - (f) an extended meeting of the entire Committee with each candidate, preferably near the end of the visit
9. The Committee will meet regularly during this ongoing process of visits and evaluations to review and discuss impressions of the candidates. At its discretion and judgment, the Committee will continue this process until by consensus the Committee is prepared to recommend with enthusiasm at least one and preferably two or more candidates to the President or Dean. Before making such recommendations, the Committee will investigate discreetly but thoroughly the experience and credentials listed by candidates being considered for recommendation. Once the Committee has agreed on a roster of candidates to be recommended to the Dean, a formal but confidential poll of Committee members will provide a ranking of those candidates being recommended. The results of this poll will be conveyed in a written report to the President or Dean by the Committee Chair and maintained by the President or Dean in the School records of the Search process. As soon as possible after receiving the list (and ranking) of recommended candidates, the President or Dean will meet with the entire Committee for an exchange of views concerning the strengths and weaknesses of the candidates recommended.
10. The President or Dean will ordinarily proceed to negotiate conditions of appointment with one or more of the recommended candidates. Before a final decision and formal offer of appointment are made by the President or Dean, and preferably as early in this process as possible, the President or Dean will obtain a formal but confidential vote of the Medical School or Department faculty (acting as the 'Consultative Committee' prescribed in the Faculty Manual) concerning the appointment of a candidate, as mandated by the Faculty Charter. This vote will be carried out by the Speaker of the School Faculty Council (or a designee, if deemed appropriate), with the result conveyed in confidence to the President or Dean. The President or Dean is advised to take this vote into serious consideration before making a final decision to proceed with an offer of appointment.



11. As a matter of collegiality and courtesy, it is anticipated that the President or Dean will meet with the Medical School faculty or Department faculty to announce the outcome of the Search before this decision is made public. The President or Dean will describe at this time the basis for the decision, especially if it deviates from the recommendations of the Search Committee, the Medical School faculty or the Department faculty.

While these guidelines are not intended to have the binding effect of formal regulation, it is expected that the basis for any significant deviation from the practices and procedures recommended will be made clear to those involved.

## **APPENDICES**

- A. Decanal Dean Review Form**
- B. Faculty Assessment Form**
- C. UM CV Template**
- D. Educator Portfolio Guidelines**
- E. Clinical Portfolio Guidelines**
- F. Dean/Chair Evaluation Form**
- G. University of Miami Required Addendum to Faculty Consulting or Related Agreement**

**Appendix A. Decanal Dean Evaluation Form**

**Evaluation Form for Decanal Deans:**

**Decanal Position Evaluation (Page 1)**

In accordance with the bylaws of the Medical School Faculty Council, a review of each Decanal position is required every four years. An opportunity to provide feedback is available to each individual who has been identified as someone who can adequately evaluate the respective Dean. The purpose of this review is to allow the faculty to assess the accomplishments of the Dean during the previous four years, to identify strengths or opportunities for improvement for the Dean, and to advise the Dean’s appointing authority of the faculty’s opinion regarding the effectiveness of this Dean.

**Dr. XXXX** is currently being evaluated as **XXXXX**. In this role, the responsibilities include:

- \*
- \*

Do you feel you have had enough interaction with this Dean (**Dr. XXXX**) to evaluate **his/her** performance in the role of **XXXXX**?

- No**  Thank you for your time, your participation is complete.
- Yes**  Please proceed with the evaluation.

**Decanal Dean Evaluation (Page 2)**

**Dean: XXXXX Position XXXX**

**General Comments:**

Your responses from this survey will be transmitted anonymously to the Faculty Senate Office. Please do not include any responses that could be used to identify you because they will be redacted. The Decanal Dean Review Committee will compile all the data and submit this information to the Dean of the School of Medicine for review with **Dr. XXXX**.

**Key Functions of the Decanal Dean in this Role:**

Please indicate which of these categories below you feel you are most qualified to evaluate. *(You may select more than one).*

The \_\_\_\_\_ **Dean** has overall responsibility for:

**Please type or print your answers to each of the following questions:**

1. What are the key strengths of this Dean in this role?
2. What are the key weaknesses of this Dean in this role?
3. What are the main accomplishments of this Dean over the past four years?
4. How could this Dean improve her/his effectiveness?
5. What, in your opinion, should be the essential roles of this Decanal Dean position?
6. Overall, the performance of this Dean should be rated as:
  - Excellent
  - Good
  - Fair
  - Poor

**Appendix B. Faculty Assessment Form**

**UNIVERSITY OF MIAMI  
MILLER SCHOOL OF MEDICINE**

Faculty Affairs

Date:

Phone: 305-243-6551

Fax: 305-243-5574

E-mail: [facultyaffairs@med.miami.edu](mailto:facultyaffairs@med.miami.edu)

**FACULTY SELF-ASSESSMENT FORM**

Name Last, First:

Department:

Present Rank:

Appointment Start Date:

Requested Action:

Appendix AA Total Since Last Appointment:

Appendix BB Total Since Last Appointment:

Appendix CC Total Since Last Appointment:

Appendix DD RVUs Met Since Last Appointment:

Appendix EE Total Since Last Appointment:

Appendix POINTS TOTAL:

## Appendix AA – Scholarship Matrix Scoring System

### Since Last Appointment

Type of Publication <sup>1</sup>	Points	Number of Publications	Points x Number of Publications
Peer-reviewed, First or Senior Author, Impact Factor >20	6.00	0	0
Peer-reviewed, First or Senior Author, Impact Factor >10	4.00	0	0
Peer-reviewed, First or Senior Author, Impact Factor 5-10	3.00	0	0
Peer-reviewed, First or Senior Author, Impact Factor 3-5	2.00	0	0
Peer-reviewed, First or Senior Author, Impact Factor <3	1.00	0	0
Peer-reviewed, Co- Author, Impact Factor >10	1.50	0	0
Peer-reviewed, Co-Author, Impact Factor 5-10	1.25	0	0
Peer-reviewed, Co-Author, Impact Factor 3-5	1.00	0	0
Peer-reviewed, Co-Author, Impact Factor <3	0.75	0	0
Book/Textbook	1.50	0	0
Book (Edited)	1.25	0	0
Book Chapter	1.00	0	0
Review paper	1.00	0	0
Invited Commentary	1.00	0	0
Non-Peer-reviewed article, including lay publications	0.25	0	0
<b>Total Number</b>		<b>0</b>	<b>0</b>

**H-Index:** **Source of H-Index:**

**Years Since Last Appointment:**

---

<sup>1</sup> Journals that do not have a citation index will not be counted in the number of publications.

**Publication Record Prior to Last Appointment**

Type of Publication <sup>1</sup>	Number of Publications
Peer-reviewed first or senior author publications	
Peer-reviewed Co-author publications	
Book/Textbook	
Book (Edited)	
Book Chapter	
Review paper	
Invited Commentary	
Non-Peer-reviewed article, including lay publications	
<b>Total Number</b>	0

**Ratio of publication/prior period of last appointment:**

**Appendix BB – Research Funding Matrix Scoring System**

Type of Current Funding	Points	Number of Grants	Points x Number of Grants
Federal Grant (R35, SPOR, U54, P01 or equivalent), PI or MPI	6.00	0	0
Federal Grant (R35, SPOR, U54, P01 or equivalent), Co-I	3.00	0	0
Federal Grant (R01, U01, T32 or equivalent), PI or MPI	4.00	0	0
Federal Grant (R01, U01, T32 or equivalent), Co-I	2.00	0	0
Federal Grant (R15, R34, R41/R42, R43,R44 or equivalent), PI or MPI	3.00	0	0
Federal Grant (R15, R34, R41/R42, R43,R44 or equivalent), Co-I	1.50	0	0
Other Federal Grant, PI or MPI (R21, R23 or equivalent)	2.00	0	0
Other Federal Grant, Co-I (R21, R23 or equivalent)	1.00	0	0
State of Florida Grant (peer-reviewed), PI	4.00	0	0
State of Florida Grant (peer-reviewed), Co-I	1.50	0	0
State of Florida Contract	2.00	0	0
Foundation Grant, PI or MPI, >\$100,000 annual DC	2.00	0	0
Foundation Grant or R03 or R13, PI or MPI, <\$100,000 annual DC	1.25	0	0
Foundation Grant, Co-I, >\$100,000 annual DC	1.00	0	0
Foundation Grant, Co-I, <\$100,000 annual DC	0.50	0	0
Industry-sponsored grant, PI or MPI	1.00	0	0
Clinical Trial grant (Industry), PI or MPI	2.00	0	0
Clinical Trial grant, site PI or sub-investigator	1.50	0	0
<b>Total Number</b>		<b>0</b>	<b>0</b>

**Grant Record Prior to Current Funding**

Type of Funding	Number of Grants
Federal Grant (R35, SPOR, U54, P01 or equivalent), PI or MPI	
Federal Grant (R35, SPOR, U54, P01 or equivalent), Co-I	
Federal Grant (R01, U01, T32 or equivalent), PI or MPI	
Federal Grant (R01, U01, T32 or equivalent), Co-I	
Federal Grant (R15, R34, R41/R42, R43,R44 or equivalent), PI or MPI	
Federal Grant (R15, R34, R41/R42, R43,R44 or equivalent), Co-I	
Other Federal Grant, PI, MPI or Co-I (R21, R23 or equivalent level)	
Other Federal Grant, Co-I (R21, R23 or equivalent level)	
State of Florida Grant (peer-reviewed), PI	
State of Florida Grant (peer-reviewed), Co-I	
State of Florida Contract	
Foundation Grant, PI or MPI, >\$100,000 annual DC	
Foundation Grant or R03 or R13, PI or MPI, <\$100,000 annual DC	
Foundation Grant, Co-I, >\$100,000 annual DC	
Foundation Grant, Co-I, <\$100,000 annual DC	
Industry-sponsored grant, PI or MPI	
Clinical Trial grant (Industry), PI or MPI	
Clinical Trial grant (Industry), site PI	
<b>Total Number</b>	<b>0</b>

**Appendix CC – Teaching/Education Matrix Scoring System**

**Since Last Appointment**

Type of Teaching/Education Activity	Points	Number	Points x Number
Full courses designed/taught by 3 or fewer instructors (medical, graduate or undergraduate)	3.00	0	0
Number of courses that you lecture more than 6 times in a semester (medical, graduate or undergraduate)	1.50	0	0
Number of courses that you lecture fewer than 6 times in a semester (medical, graduate or undergraduate)	1.00	0	0
Leading other medical student courses (i.e. small groups, Pathways of Emphasis Program)	1.25	0	0
Number of Direct Resident/Fellows Clinical Teaching <sup>2</sup>	0.50	0	0
Hours of Direct Resident/Fellows Clinical Teaching <sup>2</sup>	0.25	0	0
Number of Direct Medical Student Clinical Teaching <sup>3</sup>	0.50		
Number of Graduate Student Supervision/Advising (Mentor)	1.50		
Number of Graduate Student Supervision/Advising (Dissertation Committee)	0.25		
Number of Graduate/Medical Student Rotations in lab	0.50		
Number of Undergraduate Students in lab	1.50		
Number of Postdocs and equivalent Staff, i.e. Biostatisticians, Bioinformaticians and Research Analyst Supervision/Advising (Mentor)	2.00		
Program Director (medical, graduate or undergraduate)	3.00		
<b>Total Number</b>			<b>0</b>

**Teaching/Education Activities Prior to Last Appointment**

Type of Teaching/Education Activity	Number
Full courses designed/taught (medical, graduate or undergraduate)	0
Number of courses that you lecture more than 6 times in a semester (medical, graduate or undergraduate)	0
Number of courses that you lecture fewer than 6 times in a semester (medical, graduate or undergraduate)	0
Leading other medical student courses (i.e. small groups, Pathways of Emphasis Program)	0
Number of Direct Resident/Fellows Clinical Teaching <sup>2</sup>	0
Hours of Direct Resident/Fellows Clinical Teaching <sup>2</sup>	0
Number of Direct Medical Student Clinical Teaching <sup>3</sup>	0
Number of Graduate Student Supervision/Advising (Mentor)	0
Number of Graduate Student Supervision/Advising (Dissertation Committee)	0
Number of Graduate/Medical Student Rotations in lab	0

<sup>2</sup> This includes number of residents/fellows engaged by the faculty member for education purposes

<sup>3</sup> This does not include classroom teaching numbers



Number of Undergraduate Students in lab	0
Number of Postdocs and equivalent Staff, i.e. Biostatisticians, Bioinformaticians and Research Analyst Supervision/Advising (Mentor)	0
Program Director (medical, graduate or undergraduate)	0
Total Number	0

**Appendix DD – Clinical Activity Matrix Scoring System**  
**Current Clinical Activity**

Type of Clinical Activity	Description
Clinical Effort %	
Patient volume per week	
Number of clinics	
Inpatient services	
Procedures performed	
Outreach activities	
Clinical/Clinical Program Innovation	
Quality Improvement Achievements	
Director of Residency Program	
Director of Clinical Program	
RVUs Met (yes or no)	REQUIRED

**Appendix EE – Administrative/Service Activity Matrix Scoring System**

**Current Administrative Activity**

<u>Type of Administrative Activity</u>	<u>Number</u>	<u>Description</u>
Medical Directorships		
Training Directorships (i.e. Graduate or Residency Program)		
Division Leadership Positions		
University Service on Committees, School Council, Faculty Senate		
Community Service (programs instituted by UM, i.e. DOCS and outside UM)		
<b>TOTAL EE</b>	0	

<u>Administrative Activity Prior to Current Review</u>	<u>Number</u>	<u>Description</u>
Medical Directorships		
Training Directorships (i.e. Graduate or Residency Program)		
Division Leadership Positions		
University Service on Committees, School Council, Faculty Senate		
Community Service (programs instituted by UM, i.e. DOCS and outside UM)		
<b>TOTAL EE PRIOR</b>	0	



## Appendix C. UM CV Template

Your Name

1. Date:

### I Personal

2. Name:

3. Home Phone:

4. Office Phone:

5. Home Address:

6. Current Academic Rank: [i.e. Instructor, Assistant Prof, Associate Prof or Professor]

#### **[SOM notes]**

6a. Current Track of Appointment: [i.e. Tenure-earning track, Clinical Educator track, Research Track, Adjunct track, Affiliated track or Voluntary Track. note – the Rank of Instructor does not carry a track designation]

7. Primary Department:

8. Secondary or Joint Appointments:

9. Citizenship:

10. Visa Type (if non-citizen):

### II. Higher Education

11. Institutional (institution; degree; date conferred):

12. Non-Institutional (description; dates):

13. Certification, licensure (description; board or agency; dates):

### III. Experience

14. Academic (institutions; rank/status; dates): [dates should be inclusive for each entry – i.e. 1991-95)

15. Hospital Appointments (institutions, dates)

16. Non-Academic (employers; title; responsibilities; dates) [dates should be inclusive]

17. Military (branch; rank; responsibilities; dates) [dates should be inclusive]

### IV. Publications

**[start publications on a separate page]:**

[authors (in actual precedence of authorship); title; publisher or journal name; page numbers; date (current year first) ]

**[SOM notes]**

- a). In all sections that follow, page numbers must be inclusive so that, for example, a full report is not mistaken for an abstract or preliminary communication
- b). Publications in each section should be listed in reverse chronological order
- c). Publications should be listed as 'in press' only if there is a letter from the editor specifically defining that the article (book) has been accepted and that this acceptance is not contingent upon approval of revisions. Such letters must be included in the file of a candidate being considered by the School of Medicine for promotion and/or tenure. **d). Do not** list publications that are 'in preparation.'

18. Books and monographs published:

**[SOM notes]**

- a). include book chapters here
- b). for each book chapter, include the authors, title of chapter and inclusive pages. Also include the book title, publisher, date and book authors/editors c). example of a book chapter entry:  
Jones, AB and CD Smith, Cardiovascular Physiology, In: Essentials of Physiology, HG Wells ed., Plenum Press, 121-142, 1997

19. Juried or refereed journal articles or exhibitions:

**[SOM notes]**

- a). List only full articles refereed for peer-reviewed publications. Do not list juried abstracts or presentations at national meetings here.
- b). Do not list juried posters or other presentations as exhibitions unless these result in a permanently created body of work
- c). List juried articles that are 'in press' in this section
- d). Example of a journal listing:  
Smith, R.A., C.J. Jones, Q.X. James and M.T. Doe, Surgical Complications of Astrocytomas, Journal of Theoretical Surgery, 16:242-283, 1996

20. Other works, publications and abstracts:

**[SOM notes]**

- a). for example, letters to the editor, magazine and newspaper articles
- b). clearly denote whether abstracts were voluntary or refereed

21. Other works accepted for publication:

## V. Professional

22. Funded Research Performed (include all grants received in the last five years, identifying the principal investigator, and the amounts and dates of the awards):

**[SOM notes]**

- a). list the titles and funding agency (with grant number) for each grant. Clearly note whether your grant is part of a Center or other overall program
- b). identify the principal investigator – and also define your role in each program and your percent of funded effort in the grant program
- c). identify the direct, indirect and total amounts of each award with inclusive dates

23. Editorial responsibilities [with inclusive dates]:

24. Professional and Honorary Organizations (member; officer; date): [inclusive dates]

- 25. Honors and Awards [with dates]
- 26. Post-Doctoral Fellowships:
- 27. Other Professional Activities (e.g. papers presented; performances; conference proceedings; seminar or conference panel member; catalogue work; etc):

## VI. Teaching

- 28. Teaching Awards Received:
  - [SOM notes]**
  - a). describe award and its source
  - b). describe the approximate pool from which you were selected to receive this award
  - c). describe how the award choice was made and who made this choice
- 29. Teaching Specialization (courses taught):
  - [SOM notes]**
  - a). include a description of your participation in courses that were taught
  - b). include a description of any other professional teaching activities
- 30. Thesis and Dissertation Advising/Post-doctoral student supervision (chairman or committee member; topic; student name; date)

## VII. Service

- 31. University Committee and Administrative Responsibilities [with inclusive dates]
- 32. Community Activities [with inclusive dates]

## Appendix D. Educator Portfolio Guidelines

### EDUCATOR PORTFOLIO INSTRUCTIONS AND TEMPLATE

All faculty with a significant teaching role applying for promotion are asked to complete an Educator Portfolio (EP) as part of their formal promotion's package using the template provided. We recommend that you begin with a developmental EP which is a framework for collecting, organizing and analyzing information about your work as an educator. It is a more comprehensive collection of your educational efforts and achievements that will then help you generate a shorter and more focused version of no more than 6-8 pages for promotion that showcases your best work. Your EP should convey to reviewers the **quantity, quality, impact and scholarly nature** of your educational work. Start collecting information for your EP early and systematically and keep it current.

### WRITING THE COMPONENTS OF THE PORTFOLIO

#### EDUCATIONAL PHILOSOPHY STATEMENT

An educational philosophy statement describes your approach to education and the principles that underlie your teaching. A well-rounded philosophy statement of about 600-800 words might address the following areas:

- Your motivation for teaching and how you developed your expertise (what and why you love to teach, who inspired you, and how you developed as a teacher)
- Your personal theory of learning discussing factors you believe to promote or impede learning
- What goals you have for your learners (i.e., the desired outcomes)
- What teaching approaches you use to help learners meet those goals (address innovation)
- Your views on assessment and evaluation (i.e., evaluation of your teaching and provision of feedback)
- Your approach to creating an inclusive teaching environment (address issues of diversity)
- Self-reflection and personal growth (how your teaching has evolved; how you are continuing to grow)

This statement should spring from careful reflection on your educational strengths and practice. Illustrate the principles you have outlined with examples of your own teachings to show how they are put into practice.

#### YOUR FIVE-YEAR GOALS AS AN EDUCATOR

This list (presented as focused statements) might include specific contributions you hope to make to the university in the next phase of your career, aspirations for involvement at the regional or national levels, and plans for continued learning and growth. Your goals should provide a coherent picture of the direction you see yourself moving as an educator.



**DOMAINS OF AN EDUCATOR PORTFOLIO**

- I. TEACHING**
- II. ASSESSMENT OF LEARNERS**
- III. CURRICULUM DEVELOPMENT**
- IV. MENTORING AND ADVISING**
- V. EDUCATIONAL LEADERSHIP AND ADMINISTRATION**
- VI. SCHOLARLY APPROACH TO EDUCATION**
- VII. PRODUCTS OF EDUCATIONAL SCHOLARSHIP**

Each of these components is likely to be included in the portfolio of an experienced educator, but you may not have developed activities in all areas if you are early in your career or if education is a smaller segment of your overall effort. **Complete only those parts that are relevant to you.** Under each section, examples are provided of ways you can organize your data but remember that you do not need to show every detail of your educational efforts in the final EP. Summarize your overall body of work in each area in narrative format and use the optional tabular format to highlight your most impactful work. The final two domains of the EP, Scholarly Approach to Education and Products of Educational Scholarship are particularly important in decision making about academic promotions.

**EDUCATOR PORTFOLIO**

EP last updated:

**NAME:**

**TITLE(S):**

**INSTITUTION:**

**PRIMARY EDUCATIONAL ROLE(S):**

**STATEMENT OF EDUCATIONAL PHILOSOPHY**

**YOUR FIVE-YEAR GOALS AS AN EDUCATOR**

- 1.**
- 2.**
- 3.**
- 4.**
- 5.**

## SECTION I: TEACHING

### DESCRIPTION OF TEACHING ACTIVITIES

*Note: Instructions are in Italics and can be deleted on submission.*

*In narrative format (300-500 words), summarize your primary teaching roles and highlight those areas in which you have specific expertise and/or may be recognized for intra and extramurally (e.g., through invitations to teach). This can include a description of innovate teaching methods you have utilized. Remember that teaching goes well beyond the traditional classroom setting and includes precepting of students, residents, and fellows in the clinical setting, teaching in a research lab, as well as your out-of-class availability to learners. Present evidence your teaching activities have been developed using a scholarly approach (See section VI) and any outcomes reflecting educational scholarship (e.g., presentations, peer reviewed publications, adoption of innovative teaching approaches by others). Specific activities you would like to showcase can be listed in tabular format (optional). Focus on those activities in the last 3-5 years or since your last promotion. You do not need to list all of your teaching activities. Include your most impactful and innovative teaching activities. See a completed example below.*

<b>Activity #</b>	<b>Title or topic and teaching format</b>	<b>Years taught</b>	<b>Where taught</b> <small>(e.g., departmental, regional, national)</small>	<b>Hours taught</b>	<b>Type and number of learners</b>
1	Interactive lecture on brain imaging techniques	2016-2021	Institutional	<b>1 hr/yr</b>	~ 200 2 <sup>nd</sup> year medical students per year
2	3-part workshop series on teaching to teach, providing feedback and learner evaluation with hands on skills practice	2018-2020	Departmental	3 2-hr workshops per year  <b>6 hrs/yr</b>	~ 14 residents per year
3	Teaching rounds on the in-patient psychiatry unit with bedside teaching	2014-2019	Departmental	2-hr teaching rounds, 5 days/week. On service 3 month/yr  <b>120 hrs/yr</b>	Average of 1 resident, 1 fellow and 2 medical students per day
4	Bootcamp skills development on mental status assessment in older adults for practicing mental health professionals	2020	National	<b>2 hrs/yr</b>	48 multidisciplinary learners

### TEACHING EVALUATIONS

*In narrative format (200-400 words), describe your approaches to eliciting formative and summative evaluations on your teaching (e.g., learner evaluations, peer evaluations, expert feedback, focus groups, questionnaires, one-on-one feedback). Discuss how you use information obtained from your teaching and evaluations to change or evolve your educational practice. You do not need to present every evaluation you have ever received. You can use the table below (optional) to present the most meaningful ones. Focus on the more recent teaching activities in the past 3-5 years or*

since your last promotion. If available, provide data on how your teaching evaluations compare to those of your peers (e.g. personal mean score vs. mean scores of other departmental faculty). You can include qualitative data in the form of select representative comments from learners.

Teaching activity	Who were the evaluators (learners, peers, experts)	How was evaluation conducted	Evaluation summary
Lecture on Imaging Techniques	2 <sup>nd</sup> year medical students	6-item 5-point Likert scale, with 5 representing a higher rating	Average rating of 4.7/5 (N=132). Peer average = 4.6/5
Teaching rounds on the in-patient psychiatry unit	Residents and Fellows in the 2020-2021 Academic year	10-item 4-point Likert Scale, with 4 representing a higher rating and an open-ended comment section	Average rating of 4.5/5 (N=10). No peer comparison

## TEACHING AWARDS

In narrative format (100-200 words), summarize the recognition you have received for your teaching/educational efforts. You can use the table below (optional) to list the key teaching awards you have received in the past 3-5 years or since your last promotion (you can omit this section if not applicable). Provide enough information to aid the promotions committee in interpreting its significance. Describe the selection criteria for the award. Who voted? Was this an award voted on by students or by your peers? How many people received this award?. Was the award given by the Hospital, Department, University, or at a higher level?

Award Name and description	Date Received	Sponsoring organization	Level of award dept, institution, regional, national, international	Criteria for selection of Awardees

## SECTION II: ASSESSMENT OF LEARNERS

### DESCRIPTION OF LEARNER ASSESSMENT ACTIVITIES

In narrative form (300-500 words), describe your primary roles in the assessment of learners. Highlight any innovative assessment approaches you have developed and/or implemented. Describe evidence that your assessment tools were developed using a scholarly approach (see Section VI) and any outcomes reflecting educational scholarship (e.g., presentations, peer reviewed publications, adoption by others). If relevant, reflect on what the assessment data indicates about your teaching effectiveness and how the information obtained through your learner assessments changed your educational practice. You can use the template below (optional) to capture your most impactful assessment roles (e.g., Evaluation of students' clinical performance on the wards, faculty rater during medical student OSCEs).

Description of assessment method and content area(s) covered	Years involved in assessment	Your role in the assessment (developer, faculty observer/rater)	Hours dedicated to assessment per year	Number and type of learners

### SECTION III: CURRICULUM DEVELOPMENT

#### DESCRIPTION OF CURRICULUM DEVELOPMENT ACTIVITIES

*In narrative form (300-500 words), provide an overview of your key roles in curriculum development. Describe evidence that your curriculum development activities have been developed using a scholarly approach (see Section IV) and any outcomes reflecting educational scholarship (e.g., presentations, peer reviewed publications, adoption by others). Although, we recommend you keep track of all your work, you do not need to list every program or product you have ever developed. Include exemplars of educational courses or products you developed in the template below that show your best work and that reflect who you are as an educator and your prominence in the field.*

Activity #	Description of educational program or product	Years implemented	Where implemented (Dept, Institution, Regional, National)	Number and type of learners	Degree of responsibility (Lead developer, contributor)
1					
2					
3					

### SECTION IV: MENTORING AND ADVISING

#### MENTORING AND ADVISING ACTIVITIES

*In narrative format (300-500 words), describe your primary roles in mentoring and advising. Mentoring and advising are not synonymous. Mentoring implies a sustained committed relationship from which both parties obtain reciprocal benefit, whereas advising is usually more time limited and one directional. Mentoring can indicate that you have a special mastery in your field. It certainly reflects a commitment to learners. Describe evidence that your mentoring and advising activities are based on a scholarly approach (see Section IV) and any outcomes reflecting related educational scholarship (e.g., presentations, peer reviewed publications). You can use the template below (optional) to list your primary mentees in the last 3-5 years or since your last promotion (Do not list everyone you have ever given advise to). Provide evidence of the effectiveness of your mentoring efforts such as presentations, publications, grants*

and well as promotions, leadership positions, and educational awards your mentees obtained (list only those outcomes directly linked to your mentoring efforts).

Name of mentee	Dates of Mentoring	Mentee's role/ position at the time	Mentoring Focus (e.g., clinical care, education, research, career)	Outcomes: Mentee current position and achievements

## SECTION V: EDUCATIONAL LEADERSHIP AND ADMINISTRATION

### DESCRIPTION OF EDUCATIONAL LEADERSHIP AND ADMINISTRATION

*In narrative format (300-500 words), describe your primary leadership roles in education both intra and extramurally. If available, provide results of the evaluation of your role by outside agencies or experts (e.g., LCME, ACGME, NMBE, funding agencies, journal editors) or any measurable impact your work has had. Describe evidence that you have used a scholarly approach in your roles (see Section IV) and any outcomes reflecting related educational scholarship (e.g., presentations, peer reviewed publications) that might have resulted from a leadership role or service on a committee (e.g. a white paper, a national guideline, a set of competencies). You can use the tables below (optional) to highlight specific roles.*

Program/Course Name and Leadership Role (Director, Associate Director)	Level (Dept, Institution, Regional, National, International)	Dates	Description (Responsibilities, time commitment, evidence of quality and/or impact)

Educational Committee and role (Chair, member)	Level (Dept, Institution, Regional, National, International)	Dates	Description (Responsibilities, time commitment, evidence of quality and/or impact)

### REVIEWER/MODERATOR OF EDUCATIONAL ACTIVITIES (REGIONAL, NATIONAL)

What was reviewed/moderated (grants, papers, abstracts, presentations)	Dates	Sponsoring organization/institution/agency/journal	Time committed per year

## SECTION VI: SCHOLARLY APPROACH TO EDUCATION

### EVIDENCE OF A SCHOLARLY APPROACH TO EDUCATION

*A scholarly approach to education is reflected by the consistent use of accepted principles and standards for planning and designing educational activities, and by how one undertakes one’s own development as an educator. Although you may have already included relevant information in Sections I-V, this section allows you to highlight your scholarly approach to education IN A NARRATIVE FORMAT (300-500 words), so it is easily accessible for peer review. You may wish to select a few focal activities that demonstrate a scholarly approach, providing evidence that you applied sound principles and systematic planning, such as the use of the Glassick criteria (see below).*

<p><i>Glassick’s six Standards of excellence in scholarly work (Acad. Med. 2000;75:877–880) provide a useful structure for systematic description of an educational activity:</i></p>
<ol style="list-style-type: none"> <li><b>1. Clear goals:</b> stated purpose, realistic objectives, important questions</li> <li><b>2. Adequate preparation:</b> understanding of literature, appropriate skills, needed resources</li> <li><b>3. Appropriate methods:</b> choice of methods that match goals, effective use and flexible application of methods</li> <li><b>4. Significant results:</b> goals are achieved, results are important, field is advanced</li> <li><b>5. Effective presentation:</b> presentation well organized, forums appropriate, message clear and sound</li> <li><b>6. Reflective critique:</b> work critically evaluated, supported with good evidence, evaluation used to improve future studies</li> </ol>

### PROFESSIONAL DEVELOPMENT IN EDUCATION

*In narrative format (200-300 words), describe how you stay current with teaching approaches and other educator skills. You can use the template below (optional) to showcase the most meaningful professional development programs or activities you have engaged in in the last 3-5 years or since your last promotion.*

Name and type of program or activity (degree or certificate program, faculty development series)	Dates	Sponsoring organization or institution	Description of activity or program	Total hours

## SECTION VII: PRODUCTS OF EDUCATIONAL SCHOLARSHIP

*In order for work to be considered scholarship, it must be made **public**, undergo **peer review**, and become a **platform** on which others can build. Information in this section is intended to amplify CV data. For each section below (include only the ones that apply to you), provide a brief narrative summary (50-100 words) describing the core themes of your scholarly work in education and list your best and most representative work in the past 3-5 years or since your last promotion (be selective and do not repeat your entire CV).*

## **PUBLICATIONS RELATED TO EDUCATION**

*Note your total educational publications and provide a select list of full for your most impactful publications in the field of education. Do not include clinical or basic science research publications.*

## **WORKSHOPS AND PEER-REVIEWED/INVITED PRESENTATIONS ON EDUCATIONAL TOPICS**

*Note your total educational presentations and provide a select list of full references for your most impactful presentations in the field of education. Note the level of the presentation (local, regional, national, international) and whether the presentation was invited.*

## **OTHER EDUCATIONAL PRODUCTS**

*Provide a summary of other innovative or impactful educational works you have produced (e.g., online modules, blogs, websites) with a link to the resource if available*

## **FUNDED EDUCATIONAL ACTIVITIES**

*Provide a list of key educational grants you have been involved in. For each grant include: the title, your role (PI, Co-investigator, funding sources, total direct costs, dates of funding, and a project description.*

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This EP template was adapted from the one developed by the Academic Pediatric Association for the Educational Scholars Program.

## **Appendix E. Clinical Portfolio Guidelines**

A Clinical Portfolio will be completed by Faculty whose responsibilities include direct clinical care. This portfolio will document all aspects of clinical activity, including:

- a. Clinical effort, adjusted productivity target, and clinical productivity compared to the target for the average of the previous 3 fiscal years.
- b. Clinical service requirements (e.g. number of clinics covered per week, number of weeks on inpatient service, on-call requirements).
- c. Medical director responsibilities.
- d. Participation on clinical committees (e.g., Peer Review, Interdisciplinary Rounds, Quality and Safety).
- e. Description of innovations in clinical care initiated by the candidate (with outcomes).



## Appendix F. Dean/Chair Evaluation Form

### 2023-2024 DEAN'S EVALUATION

In accordance with Section A13.5 of the *Faculty Manual*, a review of each Dean is required in the fourth year after initial appointment and then in the fourth year following reappointment thereafter. An opportunity to vote is available to every eligible faculty member – (tenure earning or tenured individuals with professorial rank and, if authorized by vote of their school or college, those RESEARCH or EDUCATOR FACULTY with professorial titles, and faculty on SENIOR FACULTY (VFRP) status. Please note: the Library Dean has different criteria for voting faculty.)

We go to considerable lengths to assure that your vote and comments remain anonymous. In that regard, the system automatically strips your comments from information used during your login process so that when it is compiled, it is not possible for the Senate or anyone else to connect your identity with your ballot or comments.

#### Part I Ballot

A tabulation of the votes on each question will be transmitted to the President, the Provost, the Dean, and the Faculty Senate General Welfare Committee. The overall result will be reported to the evaluating faculty.

1. **The Dean has created a strong vision, and acts on that vision, to shape the School/College for the future.**

Strongly disagree 1 2 3 4 5 6 7 8 9 10 Strongly agree I do not wish to make this evaluation

2. **The Dean is an advocate for scholarship and excellence in the School/College.**

Strongly disagree 1 2 3 4 5 6 7 8 9 10 Strongly agree I do not wish to make this evaluation



4. Taking into account all of the duties of your Dean, which of the following most closely corresponds to your assessment of the Dean's performance over the past four years?

Very Poor     Poor     Fair     Good     Very Good     I do not wish to make this evaluation

5. Use the scale below to indicate the extent to which you believe the current Dean is likely to be effective in fulfilling the duties and responsibilities of this role over the next four years.

Strongly disagree    1    2    3    4    5    6    7    8    9    10    Strongly agree     I do not wish to make this evaluation

6. In your opinion, the interests of your School/College, profession, and the University would best be served by **RETENTION** of the Dean:

Yes     No     I do not wish to make this evaluation

**Part II Comments**

Comments in this section will be forwarded anonymously to the President, the Provost, the Dean, and to the Faculty Senate General Welfare Committee.

**Note:** If certain comments could reveal your identity, or you otherwise wish them not to be copied, please include them instead in the appropriate section for Confidential (special restricted) comments at the end of this ballot.

1. **What do you consider to be the key strengths of the Dean?**

[Text Response]

2. **What do you consider to be the key weaknesses of the Dean?**

[Text Response]

**3. Please provide any other comments you wish on the performance of the incumbent.**

[Text Response]

[Ballot continued on next page.]

SAMPLE



**Confidential (special restricted) Comments**

Use the box below only if there are certain additional comments that could, by their content, reveal your identity or if you otherwise wish them not to be transmitted verbatim. The comments as written are not forwarded to anyone. Instead, all such additional comments will be summarized depending on the number of responses, by two, three or four members of the Faculty Senate General Welfare Committee (who are not from the same school or college as the Dean) so as to render them devoid of identifying information and uniform in style. These comments are then synthesized by the Faculty Senate Chair.

This *summary* is forwarded to the President and the Provost, *but not to the Dean*. No one, other than the Faculty Senate Chair, the Secretary of the Faculty Senate, and the involved General Welfare Committee members, shall ever see the actual special restricted comments.

[Text Response]

END BALLOT.

SAMPLE

### 2023-2024 CHAIR'S EVALUATION

In accordance with Section A13.6 of the *Faculty Manual*, a review of each Chair is required every four years. An opportunity to vote is available to every eligible faculty member – (tenure earning or tenured individuals with professorial rank and, if authorized by vote of their school or college, those RESEARCH or EDUCATOR FACULTY with professorial titles, and faculty on SENIOR FACULTY (VFRP) status).

We go to considerable lengths to assure that your vote and comments remain anonymous. In that regard, the system automatically strips your comments from information used during your login process so that when it is compiled, it is not possible for the Senate or anyone else to connect your identity with your ballot or comments.

#### Part I Ballot

A tabulation of the votes on each question will be transmitted to the Provost, the Dean, the Chair, and the Faculty Senate General Welfare Committee. The overall result will be reported to the evaluating faculty.

- 1. The Chair has created a strong vision, and acts on that vision, to shape the Department for the future.**

Strongly disagree 1 2 3 4 5 6 7 8 9 10 Strongly agree I do not wish to make this evaluation

- 2. The Chair is an advocate for scholarship and excellence in the Department.**

Strongly disagree 1 2 3 4 5 6 7 8 9 10 Strongly agree I do not wish to make this evaluation

- 3. The Chair is supportive of and encourages faculty who engage in innovative pedagogy and outstanding teaching.**

Strongly disagree 1 2 3 4 5 6 7 8 9 10 Strongly agree I do not wish to make this evaluation



4. Taking into account all of the duties of your Chair, which of the following most closely corresponds to your assessment of the Chair's performance over the past four years?

Very Poor	Poor	Fair	Good	Very Good	I do not wish to make this evaluation
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. Use the scale below to indicate the extent to which you believe the current Chair is likely to be effective in fulfilling the duties and responsibilities of this role over the next four years.

Strongly disagree											Strongly agree	I do not wish to make this evaluation
1	2	3	4	5	6	7	8	9	10			
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. In your opinion, the interests of your Department, School/College, profession, and the University would best be served by RETENTION of the Chair:

Yes	No	I do not wish to make this evaluation
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

### Part II Comments

Comments in this section will be forwarded anonymously to the Chair, the Dean, the Provost, and to the Faculty Senate General Welfare Committee.

**Note:** If certain comments could reveal your identity, or you otherwise wish them not to be copied, please include them instead in the appropriate section for Confidential (special restricted) comments at the end of this ballot.

1. What do you consider to be the key strengths of the Chair?

[Text Response]

**2. What do you consider to be the key weaknesses of the Chair?**

[Text Response]

**3. Please provide any other comments you wish on the performance of the incumbent.**

[Text Response]

[Cont...]

SAMPLE

**Confidential (special restricted) Comments**

Use the box below only if there are certain additional comments that could, by their content, reveal your identity or if you otherwise wish them not to be transmitted verbatim. The comments as written are not forwarded to anyone. Instead, all such additional comments will be summarized by two members of the Faculty Senate General Welfare Committee (who are not from the same school or college as the chair) so as to render them devoid of identifying information and uniform in style. These comments are then synthesized by the Faculty Senate Chair.

This summary is forwarded to the Provost and the Dean, but not to the Chair. No one, other than the Faculty Senate Chair, the Secretary of the Faculty Senate, and the involved General Welfare Committee members, shall ever see the actual special restricted comments.

[Text Response]

END BALLOT.

SAMPLE

## Appendix G. University of Miami Required Addendum to Faculty Consulting or Related Agreement

### UNIVERSITY OF MIAMI REQUIRED ADDENDUM TO FACULTY CONSULTING OR RELATED AGREEMENT

1. This Addendum to the Consulting Agreement (“Agreement”) between \_\_\_\_\_(“Entity”) and \_\_\_\_\_(“Consultant”) sets forth additional terms and conditions that are required in connection with Consultant’s employment by the University of Miami (“UM”).
2. Entity understands and agrees that Consultant is an employee of UM, and that Consultant’s primary professional responsibility is to UM, including to its education, research, and scholarship programs. This agreement is between the Entity and the Consultant, and not between the Entity and UM. The Entity further understands and agrees that Consultant’s services under the Agreement may not restrict or hinder his/her ability to conduct current or foreseeable research or teaching assignments with UM, nor limit Consultant’s ability to publish work generated at or on the behalf of UM, nor infringe on Consultant’s academic freedom.
3. The parties understand and agree that Consultant must comply with UM’s policies related to, among other things, faculty conflicts of interest and commitment, patent and intellectual property, and scientific or research misconduct, and that such compliance takes priority over, and shall supersede, any obligations Consultant may have to Entity under the Agreement. For example, if Consultant is employed full-time by UM, his/her consulting activities are limited to 52 days per academic year, and she/he may not have outside managerial responsibilities or any title that implies such management responsibilities regardless of consulting duties, even while on sabbatical leave. Additionally, Consultant may not have principal investigator responsibility for research outside of UM, and outside activities may not include the extension of UM research into the consulting activity, such that a third party receives early or exclusive access to UM research results.
4. The parties understand and agree that any listing of Consultant on any publication resulting from Consultant’s activities for Entity must include the following disclosure: “[Name]’s contribution to this publication was as a paid consultant and was not part of his/her University of Miami duties or responsibilities.” Entity and/or Consultant must also make such disclosure at any speaking activities related to the services provided by Consultant under this Agreement.
5. Entity understands and agrees that Consultant’s activities may be bound by the policies of governmental and funding agencies as applicable, including policies and regulations relating to outside professional activities and conflicts of interest. The parties further understand and agree that such governmental requirements supersede any obligations that Consultant may have to Entity under the Agreement.
6. The parties understand and agree that Consultant may not use any confidential or proprietary information in the performance of Consultant’s obligations to Entity that Consultant may have acquired through his/her employment, business or research activities at UM.
7. The parties understand and agree that Consultant’s services to Entity may not make more than incidental use of UM’s facilities, supplies, equipment, or other resources, and

that Consultant's obligations to Entity may not involve any of UM's students, employees, post-doctoral trainees or any other UM personnel other than the Consultant. However, Consultants can encourage the establishment of separate research agreements between UM and the Entity.

8. Entity understands and agrees that it shall not use the names, logo, or marks of UM or any of its affiliates, faculty, staff, employees, students or volunteers in connection with Consultant or Consultant's services, without prior written permission from UM. Entity shall not represent or imply that UM endorses Entity or any of its products or services.
9. The parties understand and agree that in the event Consultant's appointment is with the UM Miller School of Medicine, Consultant must also comply with UMMG's Interactions with Health Industry Entities Policy, which precludes Consultant from, among other things, participating in any Entity activities that are designed solely or predominantly for sales and marketing purposes, participating in "Speaker's Bureaus," or publishing articles under his/her own name that are written in whole or material part by Entity's employees (also known as "ghost writing").
10. Entity understands and agrees that Consultant will serve as a consultant in the capacity of an individual, and not as an agent, employee or representative of UM. Any confidential or other information provided to Consultant by Entity will be deemed received only by Consultant as an individual and not by UM and any obligations pertaining thereto will apply only to the Consultant and not UM.
11. The parties understand that UM makes no representations or warranties about the work that is being provided by Consultant, which is his or her responsibility alone. UM does not provide any insurance or indemnity for the services provided by Consultant to Entity.
12. The parties understand and agree that Consultant is required to comply with all applicable laws, including privacy laws and UM's anti-bribery policy. Entity, on behalf of itself and all of its representatives, understands and agrees that it cannot make, offer, request or receive any payments in violation of the U.S. Foreign Corrupt Practices Act, the U.K. Bribery Act, and any other applicable anti-corruption laws.
13. The terms of this Addendum are incorporated by reference into the Agreement. To the extent any terms of this Addendum conflict with any of the terms of the Agreement, the terms of this Addendum shall be deemed to supersede. This Addendum cannot be changed except by a written document signed by both parties and approved by UM.

**Entity**

**Consultant**