5. PROCEDURES, GUIDELINES, AND TIMELINES FOR FACULTY APPOINTMENT, PROMOTION, AND TENURE

5.1 INTRODUCTION

Section 5 sets forth the Procedures, Guidelines, and Timelines for Faculty Appointment, Promotion, and Tenure. Supporting this section are definitions of Faculty, Ranks, and Titles. This section also provides guidelines for requesting a change of promotion track and a change in professional distribution of effort.

The appointment, promotion, and tenure of faculty are guided by standard guidelines established by the faculty. It is the faculty member's responsibility to provide evidence in support of an application for promotion or tenure using the guidelines.

Individual departments within the School of Medicine may develop additional policies, guidelines, and procedures for promotion and tenure, however these shall not conflict with those specified in this section or with those specified in the Mercer University Faculty Handbook. Faculty should carefully examine these departmental policies, guidelines, and procedures before initiating an application.

5.2 FACULTY APPOINTMENT

5.2.1 Appointment to the Medical School Faculty

The authority to appoint members of the faculty of Mercer University School of Medicine rests with the President who acts on the authority of the Board of Trustees. The qualifications, rank, and procedures are described in the Mercer University Faculty Handbook (Section 2 – Faculty Personnel Policies, specifically Section 2.1 – Faculty Appointments at Mercer University and Section 2.2 – Terms of Appointment). The Dean, often at the request of the department chair, requests the initial faculty appointment from the Provost and President to fulfill specific goals and objectives of the medical school and an individual department or section of the medical school. At the time of appointment, reappointment, or salary notification, the faculty member will receive a letter that indicates the faculty title and rank, nature, duration, tenure status, and salary (if applicable) of their appointment. All faculty are appointed to a promotion track, described in Section 5.2.2 below, that reflects the general scope of their contributions. At the time of initial appointment, the department chair should recommend the following:

- Faculty promotion track
- Faculty rank (described in Section 5.3.1)
- Full-time, part-time, or volunteer faculty status (described below)
- Adjunct, joint, or visiting status (described below)

As described below, faculty are appointed as full-time, part-time, or volunteer faculty. A faculty appointment is distinct from employment status, which indicates whether the faculty member is salaried or non-salaried by Mercer University.

Full-time faculty

Full-time faculty members are those contributing 0.5 or more full-time-equivalents (FTE) in support of the mission of the medical school, including teaching, mentoring, advising, coaching, scholarship/research, clinical practice, administration/leadership, and academic, institutional, and

community service.

Full-time faculty may be salaried or non-salaried. Salaried faculty are those who are employed by Mercer University. Full-time salaried faculty may be appointed to a tenure track or to a non-tenure track. Non-salaried full-time faculty are those with faculty appointments but who are not employed by Mercer University. Full-time non-salaried faculty are appointed to a non-tenure track. Full-time, non-salaried faculty members include those faculty associated with clinical affiliates of MUSM who contribute to the educational mission of the medical school by teaching medical students, graduate students, residents, or fellows.

Part-time faculty

Part-time faculty members are those who contribute less than 0.5 FTE in support of the mission of the medical school by providing a variety of individualized services or skills to MUSM that are primarily teaching and service. Part-time faculty may be paid by MUSM or a clinical affiliate for their services. Part-time faculty are appointed to a non-tenure track.

Volunteer faculty

Volunteer faculty provide a variety of individualized services or skills to MUSM. These services are primarily teaching and service to a department, program, the school, or a clinical affiliate. Volunteer faculty receive no pay from MUSM or the clinical affiliate. Volunteer faculty are appointed to a non-tenure track.

Adjunct Faculty

Adjunct faculty are those who hold a primary appointment in another educational institution and a secondary appointment within MUSM. These appointments are made by the Dean at the request of the chair of the secondary department or school. Full faculty privileges are retained for the primary appointment. Adjunct faculty may not advance in rank at MUSM and are appointed to a non-tenure track.

Joint Faculty

Joint faculty are those with a primary appointment in a department within MUSM who also hold an appointment in another MUSM department (i.e., a joint appointment in a secondary department). These appointments are made by the Dean and at the request of the chair of the secondary department with approval from the chair of the primary department.

Visiting Faculty

Visiting faculty are those with a full-time appointment at another institution who are temporarily assigned responsibilities at MUSM. The faculty member will retain the faculty rank of the parent institution. Such appointments are short-term, generally one year or less. Visiting faculty may not advance in rank at MUSM and are appointed to a non-tenure track.

Emeritus/Emerita Faculty

The Faculty Emeritus/Emerita faculty status eligibility criteria, process, and benefits are described in the Mercer University Faculty Handbook in Section 2.4.4.

5.2.2 Medical School Faculty Appointment Procedures

Faculty members are recruited to fulfill specific goals and objectives of the medical school and an

individual department or unit of the medical school. In accordance with these specific needs and in consideration of each faculty member's career goals, faculty are appointed to one of eight promotion tracks:

Tenure Track

This track recognizes faculty members who make critical contributions to the full range of academic activities of the medical school with emphasis on teaching, scholarship/research, and service throughout their careers and are expected to generate extramural funding. To be eligible for this track, the faculty member must be full-time and salaried by Mercer University.

Medical Educator

This track recognizes clinical and non-clinical faculty who devote most of their time to educational endeavors associated with the educational mission of the medical school. Faculty in this track are expected to participate broadly in activities related to teaching including instruction, curriculum development, assessment of students, advising, mentoring, or coaching students, and providing effective educational leadership for academic programs. Faculty on this track will be expected to achieve and sustain accomplishments in medical education. Some scholarship will be required for promotion on this track.

Clinical Educator Track

This track recognizes the contributions of the clinical faculty in the clinical practice and educational domains in both undergraduate and graduate medical education. Faculty appointed to this track are usually core residency faculty and/or faculty who actively participate in medical student education in the core clerkships. It is expected that time spent in clinically related activities will overlap with educational activities related to mentoring, teaching, and supervising medical students, residents, and fellows. Some demonstration of scholarship will be required for promotion on this track.

Clinical Scholar Track

This track recognizes faculty with a commitment to active participation in the education of medical students, residents, or fellows. These faculty are expected to maintain a clinical practice, disseminate clinical knowledge and techniques through scholarly publications and professional communications, and to generate extramural funding.

Clinical Preceptor Track

This track recognizes faculty who are involved in clinical practice with minor contributions to the undergraduate and/or graduate program. These faculty are typically community physicians in private practice settings who support the programs and educational mission of the school as a volunteer or for a small stipend.

Administrator Track

This track recognizes the faculty with substantial assignments of effort (> 50%) in administration. While most of a faculty member's effort will be in the administrative area, they are expected to participate in teaching, scholarship, clinical service, and service as appropriate to the needs of the school, university, and/or hospital.

Research Track

This track recognizes faculty who primarily support the research mission of the school and contribute

less than 0.3 FTE to the academic program. A faculty member on the research track must have demonstrated potential for, or achieved, independence and excellence in the initiation, direction, and completion of research projects. These faculty are expected to generate extramural funding sufficient to support at least 70% of their salary. While the focus of the faculty member is to support the research mission, other missions of the school may be supported.

Library Track

This track recognizes faculty who provide a full range of library services to the medical school, clinical affiliate faculty and campuses, and community-based physicians who support the educational programs and mission of the school and the public.

5.2.3 Changes in Faculty Promotion Track and Distribution of Professional Effort

A request to move from one track to another track may be initiated when it becomes apparent that circumstances will substantially affect readiness for promotion and/or tenure. While a faculty member may at any time request a change from one promotion track to another promotion track, a request to move from the tenure track should be initiated no earlier than three years and no later than four years on the tenure track. The request to change faculty track should be faculty-initiated and represent a change in personal career goals and expectations.

Any decision to change track or to change the distribution of professional effort should be made after careful deliberation and with the support of the department chair. Requests should be based on the long-term career goals of the individual as well as the needs of the department and school of medicine. Requests must be submitted in writing by the department chair for the Dean's consideration and should specify the reasons for the change in track and/or distribution of professional effort. If approved by the Dean, the request is considered by the Provost who makes the final decision. If denied prior to reaching the Provost, the faculty member may appeal directly to the Provost. If the request to change tracks is approved by the Provost, the faculty member should expect to remain in the new track for three years before seeking promotion. This allows the faculty member to demonstrate that their contributions are in accordance with the qualitative and quantitative guidelines for promotion on this track.

A faculty member on the Tenure Track who is granted tenure may be subsequently appointed to a non-tenure track and maintain tenure status. Once an individual is assigned to a new non-tenure track, then the promotion requirements of the new track would be followed.

5.3 FACULTY ACADEMIC RANK AND TITLE

5.3.1 Faculty Academic Rank

In addition to appointment to a promotion track, all faculty are assigned to one of four academic ranks at the initial appointment, in accordance with the Mercer University Faculty Handbook (Section 2.1.B – Rank):

- Instructor
- Assistant Professor
- Associate Professor
- Professor

Each appointment is made on an individual basis with appropriate recognition given to prior academic appointments, academic experience, academic service, and productivity.

Instructor

A faculty member who meets at least one of the following requirements:

- A terminal master's degree or a master's degree approved by the Dean or
- A doctoral degree with neither specialty board certification nor post-degree training.

A librarian with a master's degree may be appointed to the faculty with the approval of the Dean.

Assistant Professor

A faculty member who possesses the potential for continued professional growth and the promise of continued service and teaching to the school. A faculty member with a doctoral degree and at least one of the following:

- Specialty board certification.
- A minimum of 3 years of post-degree training.
- A minimum of 3 years of relevant experience.

An individual with a doctoral degree and without post-degree training may be appointed to the rank of Assistant Professor upon the recommendation of the department chair and approval by the Dean.

A librarian with a master's degree may be appointed to the rank of Assistant Professor with the approval of the Dean.

Associate Professor

A faculty member who has demonstrated excellence in a primary area and proficiency in other areas. A faculty member with a doctoral degree and at least one of the following:

- A doctoral degree and, if applicable, specialty board certification.
- A minimum of 5 years of experience as an Assistant Professor or equivalent experience, unless exemplary.

A librarian with a master's degree may be appointed as an Associate Professor with a minimum of 5 years of experience as an Assistant Professor or equivalent experience.

A clinical faculty member who has demonstrated a substantial record of clinical service and teaching at one or more medical schools.

Professor

A faculty member who has sustained excellence and focal expertise in a primary area of responsibility and sustained proficiency in other areas. A faculty member with:

- A doctoral degree and, if applicable, specialty board certification, and
- A minimum of 10 years as an Assistant and/or Associate Professor or equivalent experience, unless exemplary.

A clinical faculty member who has demonstrated extended and exemplary service and teaching at one or more medical schools.

Faculty members who reach the rank of professor are recognized for sustained contributions to one or more medical schools.

5.3.2 Faculty Title

Faculty titles shall refer to their rank and to the department in which they are appointed (for example - Assistant Professor of Internal Medicine, Assistant Professor of Family Medicine, Assistant Professor of Biomedical Sciences). Titles may also refer to an area of special competence (for example – Assistant Professor of Biochemistry or Assistant Professor of Geriatrics).

5.4 PROCEDURES AND GUIDELINES FOR FACULTY PROMOTION

This section provides an overview of the promotion and tenure process, describes the domains of faculty activities that are evaluated for promotion and tenure (e.g., teaching, scholarship, service, etc.), and describes the qualitative and quantitative guidelines by which promotion and tenure applications are evaluated.

5.4.1 Overview of Faculty Promotion

Faculty members should develop a progressive record of expertise in a primary area of responsibility with proficiencies in other areas. Documentation of expertise and proficiencies are expected through progressive acknowledgement from local, state, regional, national, and perhaps international sources. Early development of personal goals and documentation of accomplishments will facilitate the promotion process. Faculty members should take advantage of faculty development opportunities and mentoring to direct their careers.

The achievements and contributions documented in promotion and tenure applications will be supported by information in the *curriculum vitae* and letters of recommendation. **Applications will be evaluated on both qualitative and quantitative factors.** It is important to note that meeting the quantitative guidelines will not assure promotion or tenure as the Promotion and Tenure Committee, the Dean, and Mercer University will evaluate the applicant on qualitative factors as well. At the same time, a faculty member who does not meet the minimum guidelines in an area may be promoted based on the quality of contributions in other dimensions of their work.

Candidates are expected to show progressive accomplishment in their academic career as they advance from Assistant Professor (or Instructor) to Professor. Multiple activities supporting each domain will strengthen the application for promotion at each rank. Excellence may be demonstrated, and promotion may be awarded without contributions or accomplishments in every area under each domain. As faculty progress from Assistant Professor (or Instructor) to Professor, the contributions and accomplishments are cumulative, and faculty will continue to meet the guidelines for lower ranks.

5.4.2 Documentation Required for Promotion

The following outline provides a general overview of the areas in which applicants are expected to document contributions. Depending upon the specific promotion track, the applicant will complete only those areas that are applicable. Candidates should seek guidance from their department chair, the Office

of Faculty Affairs, and follow the detailed instructions provided by the Promotion and Tenure Committee posted on the MUSM website.

- 1. **COMPLETE CURRICULUM VITAE** (use the MUSM CV template)
- 2. DOMAINS EVALUATED: Teaching, research/scholarship, clinical practice, administration/leadership, and institutional, academic, and community service.

3. LETTERS OF SUPPORT AND RECOMMENDATION

Candidates will be required to contact referees, both internal and external to the institution, to determine their willingness to prepare letters of support for advancement or tenure. The MUSM website provides a guide to the required letters of recommendation as well as resources for external referees. Value to the school, department, university, and/or national/international organizations should be provided by the institutional representatives best able to speak to the applicant's abilities through support letters. Demonstrated validation (Associate Professor) or sustained excellence (Professor) in the applicable domains should be provided.

5.4.3 Statement on Scholarship

Faculty members are expected to apply a **scholarly approach** to their academic endeavors, meaning that they apply a thoughtful, structured, informed, and systematic methodology to an undertaking.

Glassick and colleagues defined six criteria for assessing scholarly work ¹. A systematic, scholarly approach requires:

- 1. Clear Goals (ask important questions, set objectives)
- 2. Adequate Preparation (demonstrate appropriate skill set, draw on existing work in the field)
- 3. Appropriate Methods (use appropriate methods, tools, strategies, processes for the project)
- 4. Significant Results (state how the findings address the study objectives and whether they raised additional research questions)
- 5. Effective Presentation (communicate the systematic process and findings to others)
- 6. Reflective Critique (reflect on what could be done differently and/or what is next)

Scholarship is distinct from scholarly work. To be considered scholarship, the work requires a scholarly approach but "adds the expectation that the work advance knowledge in the field by being public and accessible in a format that others can build on... with peer review to judge the quality and value of the contribution to the field," ². In other words, the work is made public, is peer-reviewed, and serves as a platform upon which others can build.

Dr. Ernest Boyer's monograph "Scholarship Reconsidered" ³ provides a broad definition of scholarship recognizing that legitimate scholarly and creative pursuits span four domains: Teaching, Discovery, Application, and Integration. Scholarship, regardless of the domain in which it falls, should meet Glassick's criteria for a scholarly approach. Boyer's four domains of academic endeavors:

Scholarship of Teaching

The Scholarship of Teaching is the systematic study of teaching and learning processes. It includes educating and stimulating scholars, not only transmitting knowledge but also transforming and extending knowledge through study and debate, as well as the creation of new knowledge about teaching and learning. This area may include developing new teaching methods, evaluating outcomes,

and disseminating curricula and instructional materials.

Scholarship of Discovery

The Scholarship of Discovery encompasses research and scholarly investigation, which is at the core of hypothesis-driven research. This type of scholarship encompasses research and scholarly investigation that advance knowledge, and includes quantitative, qualitative, and mixed methods research.

Scholarship of Application

The Scholarship of Application bridges theory and practice as well as the intersection of service and clinical activities. This area includes the translation of new knowledge in practical interventions that solve problems or improve the difficulties experienced by individuals and society. For example, the application of new knowledge to solve practical problems in patient care or medical education, professional excellence, or empathy in treating patients.

Scholarship of Integration

The Scholarship of integration involves synthesis across disciplines, across topics within a discipline, or across time. It places the research findings in a larger context, views data in a revealing way, interprets data and research in new ways, and looks at boundaries of the convergence of research and practice (interdisciplinary, interpretive, integrative, new insights). This area translates research findings into new and beneficial clinical practices or products.

References

- 1. Glassick CD, Huber MR, Maeroff GI. Scholarship Assessed: Evaluation of the Professoriate 1997. San Francisco, CA: Jossey-Bass.
- 2. Simpson D, Yaris LM, Carek PJ. Defining the scholarly and scholarship common program requirements. J Grad Med Ed. 2013;5(12):539-540.
- 3. Boyer EL. Scholarship Reconsidered, Priorities of the Professoriate. The Carnegie Foundation for the Advancement of Teaching, Princeton University Press. Lawrenceville, NJ, 1990.

Importance of Scholarship

To advance in rank in any of the faculty promotion tracks, faculty should regularly communicate new findings and/or applied knowledge and analytical thinking to their peers both within and outside the university. Accordingly, generating high quality, peer-reviewed works (e.g., journal articles, electronic publications, other scholarly works) based on original research by faculty members, represents a major source of evidence for productive scholarship.

In addition, publication of invited, peer-reviewed articles, books, book chapters, and invited or peer-reviewed presentations at national and international symposia or colloquia are typically strong indicators of the quality of a faculty member's scholarship, research, and creative endeavors.

Funding derived from competitive grants, contracts, and other external funding programs is another measure of scholarship, particularly when such funding leads to the publication of high-quality research in reputable peer-reviewed journals.

Faculty should be aware of predatory journals and conferences and requests to disseminate their work via these journals or conferences as well as opportunities to serve on the Editorial Boards of predatory journals. If questions arise, faculty should consult the Skelton Medical Library staff. Publishing or

presenting in these predatory venues can damage your reputation and/or weaken your portfolio for promotion/tenure and has the potential to damage the reputation of Mercer University.

Examples of Scholarship

Faculty should not interpret the lists provided below to mean that all items on the list are expected from any single applicant. Please also note that the lists are not comprehensive, and there are other legitimate forms of scholarship that provide evidence for the faculty member's scholarly reputation. Faculty are encouraged to develop and maintain a portfolio of high quality, scholarly contributions. Examples of scholarship may include but are not limited to:

Publications:

- Peer-reviewed publications in area of expertise
- Published abstracts of presentations
- Teaching/curricular materials published in peer-reviewed repositories
- Books and/or book chapters
- Development and adoption of new library pathfinders, such as webpage content, online videos, and mobile apps

Presentations:

- Presentation of peer-reviewed papers
- Invited presentations at other institutions
- Invitations to speak at scientific or educational meetings/conferences

Support:

- Extramural support (e.g., NIH, foundation grants)
- Intramural support (e.g., Mercer University Seed Grants)
- Grant and/or contract awards
- Extramural support from commercial vendors
- Clinical trials, especially investigator-initiated and multi-center trials

Evidence of a Faculty Member's Reputation as a Scholar

- Citation by other faculty in the field in published papers (can be determined with Citation Index)
- Published reviews by other faculty in the field
- Awards for outstanding accomplishments in scholarship
- Invited referee/reviewer of manuscripts for journals in area of expertise
- Invited referee/reviewer of proposals for meetings of national or international associations
- Review of grant applications for local, state, national, and governmental agencies
- Appointment to national committees to review research proposals or results
- Participation and membership in national study sections and advisory groups
- Leadership roles in state, regional, national, or international research societies or meetings
- Participation as a consultant in regional or national research program reviews
- Documented recognition by peers outside the university as an independent and original investigator (e.g., letters of support)
- Participation on editorial boards and/or as editor

5.4.4 Documenting Faculty Contributions in Each Domain

Faculty are evaluated in five domains: teaching, scholarship/research, clinical practice (if applicable), administration/leadership (if applicable), and service. The examples listed in the following tables are offered as guidelines to demonstrate the variety of contributions that might support promotion and/or tenure and are not intended to serve as the only activities acceptable for demonstrating accomplishment in a domain. These tables should be used to guide faculty in meeting the qualitative and quantitative guidelines described in Sections 5.4.5 and 5.4.6, respectively. Multiple activities comparable to the examples shown below will strengthen the application for promotion at each rank. Faculty should also consult the application examples for each rank and promotion track provided on the MUSM website. As mentioned in section 5.4.1 above, excellence may be demonstrated, and promotion may be awarded without contributions or accomplishments in every area under each domain. As faculty progress from Assistant Professor (or Instructor) to Professor, the contributions and accomplishments are cumulative, and faculty will continue to meet the guidelines for lower ranks.

Accomplishments in the Teaching Domain

The effectiveness of an educator in the teaching domain is evaluated in four areas: instruction, curriculum development, learner assessment, and advising/mentoring/coaching. Effective educators focus on student learning, incorporate evidence-based teaching strategies into their instruction, embrace the evaluation process as a means of assessing learning, enhance education skills by participating in professional development opportunities, and assist students in translating knowledge into practice in a variety of settings including the classroom, tutorial groups, and outpatient and inpatient clinical settings. Undergraduate students, graduate students, medical students, house officers, residents, fellows, or continuing medical education participants are considered students. Competency in teaching is expected of most faculty members at all ranks, and teaching evaluations are expected from the variety of learners with whom the faculty member has contact. Other means of evaluation such as peer evaluation of teaching and teaching innovations related to instruction, curriculum, and assessment will be considered in addition to student evaluations. Faculty members, however, are not necessarily expected to demonstrate contributions in all four areas.

TABLE 1. ACCOMPLISHMENTS IN THE TEACHING DOMAIN			
AREAS	ASSISTANT PROFESSOR	ASSOCIATE PROFESSOR	PROFESSOR

Instruction

- Receives satisfactory evaluations from learners
- Active participation in teaching or supervision of medical students, graduate students, and residents/fellows (lectures, tutoring, large/small group instruction, teaching rounds, grand rounds, etc.)
- Instructs in laboratory sessions
- Supervises trainees in outpatient or inpatient clinical services
- Delivers postgraduate or continuing education course which serves a local audience
- Participates in activities related to professional development in teaching

- Demonstrates meritorious, consistent teaching ability
- Invited lecturer at other institutions of higher education, research and development facilities, or • Invited to organize and institutes at state or regional level
- Develops and participates in the teaching of major portions of a graduate course
- Receives local teaching award
- Favorable performance/assessment data for students or residents, where these can be attributed largely to the individual faculty member
- Develops and implements innovative approaches to improving student/ resident learning and enhancement of learning experiences

- Demonstrates sustained teaching excellence
- Invited to be a visiting professor at another institution
- participate in a symposium or plenary session at a regional, national, or international educational meeting
- Invited presenter at professional meetings
- Outstanding performance or evaluation data for students or residents, where these can be attributed largely to the individual faculty member
- Teaching awards from students or peers (regional, national, or international level)
- Acknowledgement from accrediting bodies such as LCME, SACS, ACGME as demonstrating "Best Practices"

Curriculum Development	Contributes to curricular material (new course, syllabus materials, cases, lectures)	 Prepares curricular material (new course, syllabus materials, cases, lectures) Develops innovative curriculum which improves student/resident learning and enhances learning experiences Favorable evaluations of courses and curricula, as part of a systematic evaluation program Develops/directs a postgraduate or continuing education course which serves a regional audience Incorporates or implements a new instructional format Develops special teaching materials such as videos, animations, computer programs, and websites 	 Develops a course, curricular component, software, or evaluation materials which are used regionally or nationally Supervises a training program which has a regional or national audience Outstanding evaluations of courses and curricula, as part of a systematic evaluation program
Learner Assessment	 Participates in developing assessments such as OSCEs or multiple-choice questions Serves as an OSCE/MPRA reviewer 	 Develops or implements an evaluation tool or process Develops assessments such as OSCEs or multiple-choice questions 	Develops evaluation tools or processes used outside the institution

Mentoring/ Advising/ Coaching	 Serves as an advisor to medical students, graduate students, and/or residents Summer scholar sponsor 	 Serves as advisor/mentor/coach for learners Documented approach to mentoring struggling students Serves as project mentor for medical or graduate students or residents/fellows Membership on graduate student theses/dissertation committees Favorable evaluation by faculty mentored by the candidate Coach trainees on physical exam skills 	 Sustained effort in mentoring, advising, and/or coaching Documented approach to and success in mentoring struggling students
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Accomplishments in the Scholarship/Research Domain

To advance in rank, MUSM faculty members should regularly communicate newly obtained and/or applied knowledge and analytical thinking to their peers both within and outside the university. Accordingly, generating high-quality, peer-reviewed works (e.g., journal articles, presentations, other scholarly works) based on original research by faculty members represents a major source of evidence for productive scholarship. For a work to be considered scholarship it must be made public, peer-reviewed, and serve as a platform for others to build upon. Section 5.4.3 above provides an expanded definition and description of scholarship.

For those tracks in which funding is expected, the source may be competitive funding from any source external to MUSM or MUSM clinical affiliate hospitals, e.g., private/foundation, government, or small or large industry. Grants awarded to students being advised/guided by the faculty member can also be considered for promotion. Funded clinical trials are expected to be thosethat are investigator-initiated. Faculty on the tenure track should note that while the minimum quantitative guidelines do not reflect a requirement for external funding in the scholarship domain for promotion to associate professor, faculty with a large percentage of their professional effort allocated to research are expected to be productive in securing external/extramural funding.

TABLE 2. ACCOMPLISHMENTS IN THE SCHOLARSHIP/RESEARCH DOMAIN				
AREAS ASSISTANT PROFESSOR ASSOCIATE PROFESSOR PROFESSOR				

Discovery

- Evidence of ability to function independently as a researcher
- Initial success in obtaining extramural funding
- Evidence of initial publication success
- Supports MUSM scholarly activities through literature searches and research consultations
- Presents results of scholarship at regional/national meetings

- Evidence of a portfolio of high quality, peer-reviewed publications
- Publishes abstracts and presents results of scholarship at national or international professional meetings or conferences
- Authorship in peerreviewed papers (greater significance to first and/or senior authored papers)
- Author or co-author of review articles in peerreviewed journals
- Participates in multi-center trials
- PI or co-investigator on peer-reviewed intramural grants

- Continuous evidence of a significant portfolio of high quality, peerreviewed publications
- Publishes review articles in peerreviewed journals either as first or senior author, or corresponding author
- Substantial record of peer-reviewed first and/or senior authored publications
- Continued, consistent success in obtaining extramural grant or contract funds
- Continued consistent success in obtaining investigator-initiated grants or contracts with pharmaceutical, instrumental, or other commercial enterprises

- Success in obtaining extramural grants or contracts
- Success in obtaining investigator-initiated grants or contracts with pharmaceutical, instrumental, or other commercial enterprises
- Inventions, licensed patents issued
- Independently develops or directs a major program/ project/research laboratory
- Invited scholarly talks, both intramural and extramural
- Supervision of graduate students or post-doctoral fellows

- PI or co-investigator on peer-reviewed grants, especially extramural, and federally sponsored studies
- Acquires FDA approvals; invention has a major impact on state-of-the-art; invention generates resources
- Leadership of multiinstitutional collaborative research projects
- Director of scholarly activity of other faculty or post-doctoral fellows
- Presents at national and international meetings
- Oversees a major research project as principal investigator, which involves management of personnel and finance
- Collaborates with colleagues at multiple institutions in major presentation at regional/state level (symposia, conference workshops)
- Demonstrates a sustained leadership role in an independent research program

Integration	Writes a textbook for use in multiple disciplines	 Writes a textbook for use in multiple disciplines Writes comprehensive peer-reviewed review articles Develops and/or maintains systems and interfaces that provide access to resources for scholarly activity 	Author of book chapters and/or textbooks
Teaching	Develops peer- reviewed publicly available products such as pathfinders, web pages, and subject guides	 Publication of articles on education or teaching innovations Publication of teaching materials in peer-reviewed repositories Advances learning theory through research Designs and implements peer-reviewed program assessment system 	National/international use of peer-reviewed teaching materials or courses
Application	 Develops peer-reviewed guidelines, protocols, or standards for clinical care Participates in peer-reviewed initiatives related to patient safety, quality improvement, and process/practice improvement 	 Documented ongoing clinical, translational, and/or clinical outcomes research Guidelines, protocols, or standards for clinical care adopted by other facilities or institutions Leads initiatives related to patient safety, QI, and process/practice improvement 	 Consults at the national level Initiatives related to patient safety, quality improvement, and process/practice improvement are adopted by other institutions/facilities Resources that support scholarship initiatives adopted by other institutions

Accomplishments in the Clinical Practice Domain

The clinical practice of an academic clinician is intimately linked to their role as a teacher. In addition to consistently practicing a high standard of medicine, the clinician participates actively in development, delivery, and oversight of undergraduate and graduate curricula and training. The practice of medicine today requires that clinicians seek and apply new knowledge to improve patient outcomes and incorporate that knowledge into practice and education of learners. Excellence and effectiveness expected of clinical faculty will be determined by recommendations of colleagues and any quantitative data available related to hospital/practice measures. Maintaining specialty and/or subspecialty certification are expected.

ABLE 3. ACCOMPLISHMENTS IN THE CLINICAL PRACTICE DOMAIN			
AREAS	ASSISTANT PROFESSOR	ASSOCIATE PROFESSOR	PROFESSOR
Patient care	 Demonstrates competence and promise of excellence in clinical, diagnostic, procedural or other professional work Considered a very good clinician or professional by local peers and learners Consults at local level Meets clinical benchmarks and productivity goals 	 Emerging consulting physician or professional at regional level Considered an excellent clinician or professional by local and regional peers and learners Evidence that a unique clinical service is provided Known as an excellent clinician with special skills at a regional level Surpasses clinical benchmarks and productivity goals 	 Becoming a regional or national source of referral for expert opinion Invitations to consult with government, insurance, or drug agencies Recipient of awards for outstanding patient care delivery Established consultant who attracts patients or clients on a regional or national level

Quality	Participates in	Consistently favorable	Creatively revises and
initiatives	initiatives related to patient safety, quality improvement, and process/practice improvement	reports on quality assurance and/or risk management assessments Consistently favorable reports in patient satisfaction or similar assessments collected by the institution Refines, devises, or implements a new method (diagnosis, therapy, clinical pathway or standard guidelines, device etc.) or procedure Creative, active participation in the evaluation of the effectiveness (e.g., quality, utilization, access, cost) of the care provided. Initiatives related to patient safety, quality improvement, and process/practice improvement are adopted by other institutions/facilities	improves quality assurance and/or risk management procedures • Develops and implements clinical or professional program • Devises a new method or procedure which receives national or international recognition • Development of new techniques, therapies, or health care delivery systems that improve the health of the population served

Accomplishments in the Administrative/Leadership Domain

The skills and abilities of some faculty members are utilized in the administration, management, and leadership of the medical school, the university, or clinical environment. For these faculty members, significant time is expended in administrative and leadership activities related to program development, program evaluation, accreditation, strategic planning, etc. Effectiveness in the role, description of accomplishments and outcomes must be documented according to guidelines provided within the promotion application materials.

TABLE 4. ACCOMPLISHMENTS IN THE ADMINISTRATIVE/LEADERSHIP DOMAIN			
AREAS	ASSISTANT PROFESSOR	ASSOCIATE PROFESSOR	PROFESSOR
Administration and leadership	Demonstrates skills in managing activities or programs	 Serves as an assistant or associate dean or other administrative appointment, e.g., chair, vice or associate chair of a department, unit director Oversees, directs, and interprets tests, procedures, or data handling in support of a clinical or service laboratory Independently develops and/or directs major program or project for the organization Demonstrates leadership role in projects/ committees/task forces Serves as a section chief, director, or leader of a clinical area Directs clinical or professional programs Directs patient care activities in clinical settings Supervises or coordinates teaching by other faculty, fellows, residents, or graduate students (course director, block coordinator, clerkship director, program director, program director, etc.) 	 Special consultant appointment and/or lectureship Provides major leadership of hospital or institution such as chief of staff, DIO, or CMO Administrative initiatives adopted by other institutions Develops a unique or essential clinical program Establishes new clinical programs (e.g., new residency program) Invited to participate in practice guideline committees, external program reviews Supervises or coordinates teaching by other faculty, fellows, residents, or graduate students

Accomplishments in the Institutional, Academic, and Community Service Domain

Institutional, academic (professional), and community service is an extension of the mission and vision of the school beyond the traditional academic and clinical programs within the school and should be within the area of one's professional discipline. Service may reflect the responsibility and citizenship of a faculty member to participate in functions essential to the school, University, or hospital. These activities may include service on an institutional or academic committee, or contributions to the community through activities representing the school (e.g., local committees or volunteering that reflect the mission and vision of the school), or activities that extend beyond the community to state, regional, national, or international participation in professional societies and organizations.

TABLE 5. ACCOMPLISHMENTS IN THE SERVICE DOMAIN			
AREAS	ASSISTANT PROFESSOR	ASSOCIATE PROFESSOR	PROFESSOR
Institutional Service	 Serves on committees in the department, school, and/or institution Medical school admissions or residency applicant interviewer Participates in activities that enhance/promote the mission of MUSM 	 Chairs MUSM standing committee Contributing member of department, school, university, hospital committees and/or task forces, medical school admissions, or residency applicant interviewer Advises student interest groups and organizations Chairs departmental faculty search committees Participates in activities that enhance/promote the mission of MUSM 	 Evidence for sustained and varied participation in activities that enhance/promote the mission of MUSM Evidence for multiple leadership roles associated with institutional service

	<u>.</u>		
Academic Service	Member of local or regional professional society or scholarly organization	 Leadership role in local or regional professional society or scholarly organization Serves as officer in state or local professional society Serves as an ad hoc journal reviewer or ad hoc member of review committees or study sections Consultant for private sector corporations Invitations to speak at universities, hospitals, other academic/medical facilities, professionals, to the lay public locally/regionally Leadership role in dealing with health issues local, state, or regional levels 	 Multiple leadership roles by serving as officer or major committee member/chair in regional or national professional society or scholarly organization Serves on national scientific advisory boards or study sections Regular or ad hoc member of a national research or clinical review committee, or a taskforce Editorial board of professional or scientific journals Editor-in-chief of an academic journal Leadership role in dealing with health issues at regional, national, or international levels Contributes to board examination in specialty Leadership role in regional/ national/international professional societies, research, or educational meetings Invited to speak at universities, hospitals, other academic/medical
Community Outreach	 Speaks to lay groups from perspective of professional area of expertise Science fair judge Volunteers, especially with students, at MUSM sponsored community events 	 Represents MUSM on mission trips Recruiting trips on behalf of MUSM Provides professional assistance to committees, agencies, or institutions Represents MUSM to the public 	Represents MUSM to the public on a regional, national, or international level

Librarianship
Service-
Librarianship in
the areas of
Archives/Digital
Initiatives;
Collection
Services; Public
Service/Outreach;
Technical Services
and Library
Systems

- Exhibits increased understanding of library operations and how they relate to the institution
- Demonstrates increasing knowledge, understanding and skill in library functions
- Develops expertise in new areas of library operations

- Assumes responsibility for supervision of library staff or other librarians
- Demonstrates leadership in implementing initiatives that enhance the library services
- Develops new or innovative approaches to problem-solving in specific areas of librarianship
- Continued professional development in librarianship

- Contributes to high-level decision-making and strategic planning within or beyond the department
- Sustained, exceptional accomplishments that are recognized at the national and/or international level
- Incorporates current trends and developments in the library profession to enhance MUSM library services

5.4.5 Qualitative Guidelines for Promotion

The tables below provide the qualitative guidelines for promotion and/or tenure. The examples listed in the tables are offered as guidelines to demonstrate the variety of contributions that might support promotion and/or tenure and are not intended to serve as the only activities acceptable for demonstrating accomplishment in a domain. Multiple activities comparable to the examples shown below will strengthen the application for promotion and/or tenure at each rank. Faculty should also consult the application examples for each rank and promotion track provided on the MUSM website. As mentioned in section 5.4.1 above, excellence may be demonstrated, and promotion may be awarded without contributions or accomplishments in every area under each domain. As faculty progress from Assistant Professor (or Instructor) to Professor, the contributions and accomplishments are cumulative, and faculty will continue to meet the guidelines for lower ranks.

MUSM clinical affiliate faculty who are not salaried by Mercer University (i.e., not employees of Mercer University) should refer to the promotion process and guidelines delineated under Section 5.4.7 – Promotion of Clinical Affiliate Faculty.

TENURE TRACK

In addition to reviewing the qualitative guidelines presented in this section, faculty on the tenure track should review the guidelines specified in the Mercer University Faculty Handbook under section 2.4.2 Tenured Appointments, subsection 2, as well as the MUSM guidelines for post-tenure review in the MUSM Faculty Handbook section 2.5.4 – Post-tenure Review, to guide their preparation for tenure and post-tenure review.

Table 6. Qualitative Guidelines for Appointment or Promotion on the Tenure Track					
DOMAIN ASSISTANT PROFESSOR ASSOCIATE PROFESSOR PROFESSOR					

Teaching	Demonstrated teaching aptitude through experience or training	 Demonstrated teaching excellence Documented approach to mentoring struggling students 	 Demonstrated sustained teaching excellence Documented approach to and success in mentoring struggling students
Scholarship/ Research	Demonstrated potential for developing scholarship through experience or training	 Demonstrated scholarship validated through peer-review Demonstrated initial success in obtaining funding 	 Demonstrated sustained scholarship validated through peer-review Expectation of sustained extramural funding
Clinical Practice	Little or none	Little or none	Little or none
Administration/ Leadership	Little or none	Little or none	Little or none
Institutional, Academic, and Community Service	Demonstrated initial/limited service to school, university, and/or hospital	Demonstrated service to school, university, and/or hospital	Demonstration of sustained service to school, university, and/or hospital
Reputation	Local/regional	 National Established area of expertise in field 	 National/international Sustained excellence and focal expertise Demonstration of expertise in one's field at a national or international level

MEDICAL EDUCATOR TRACK

Table 7. Qualitative Guidelines for Appointment or Promotion on the Medical Educator Track						
DOMAIN	DOMAIN INSTRUCTOR ASSISTANT ASSOCIATE PROFESSOR					
PROFESSOR PROFESSOR						

Teaching	Previous experience or potential aptitude and willingness to develop capability in teaching	Demonstrated teaching aptitude through experience or training	 Demonstrated teaching commitment and expertise as evidenced by consistent effective teaching, development of curriculum, methods, or assessment materials Mentor/adviser to students, residents, colleagues Documenting an approach to mentoring struggling students 	 Demonstrated sustained teaching excellence Distinguished record as demonstrated by teaching awards Documents an approach to and success in mentoring struggling students
Scholarship/ Research	Demonstrated capacity for scholarship	Demonstrated potential for developing scholarship through experience or training	 Evidence of peer-reviewed publication success Presentation of scholarly work at regional or national conferences or professional meetings 	 Record of peer-reviewed publications Presentation of scholarly work at national or international conferences or professional meetings
Clinical Practice	Little or None	Little or None	Little or None	Little or None
Administration/ Leadership	• None	Little or none	Little or none	Little or none
Institutional, Academic, and Community Service	 Demonstrated initial/limited service to/for school, university, and/or hospital 	 Demonstrated initial/limited service to/for school, university, and/or hospital 	Demonstration of service contributions to/for school, university, and/or hospital	 Demonstration of sustained service to department/ division, school, university and/or hospital

Reputation	• Local	• Local	 Local/regional 	 National and/or
			 Established 	international
			expertise in	 Recognized
			teaching	expertise at
				national or
				international level
				1

CLINICAL EDUCATOR TRACK FOR FACULTY EMPLOYED BY MERCER UNIVERSITY

DOMAIN	INSTRUCTOR	ASSISTANT PROFESSOR	ASSOCIATE PROFESSOR	PROFESSOR
Teaching	Previous experience or aptitude and willingness to develop teaching capabilities	Demonstrated teaching aptitude through experience or training	Demonstrated teaching effectiveness	Demonstrated and sustained teaching excellence
Scholarship/ Research	Little or none	 Evidence of initial publication success Participation in QI-Patient Safety Initiatives 	 Demonstrated success in scholarship Leadership role in QI-Patient Safety Initiatives 	Publication and presentation of peer-reviewed scholarly work
Clinical Practice	Aptitude in patient care	Demonstrated competence in clinical, diagnostic, procedural or other professional work Considered a very good clinician or professional by local peers and learners	 Demonstrated expertise in specialty area Consistently favorable reports on such measures as peer assessment, patient satisfaction, outcomes assessments, productivity, and efficiency Documents an approach to mentoring struggling students 	 Demonstrated expertise in developing, implementing, and directing clinical or professional programs and patient care activities Develops new techniques, therapies, or health care delivery systems Documents an approach to and success in mentoring struggling students

Administration /Leadership	• None	Little or none	 Serves in a position that involves significant time in administrative 	• Special consultant appointments and/or lectureships
			activities such as an assistant or associate dean, department chair	 Major leadership role of hospital or institution (e.g., dean, DIO) Serves as a section chief, director, or leader of a clinical area

Institutional, Academic, and Community Service	• Serves on a committee in the department, school, university and/or hospital	 Serves on committees in the department, school, university and/or hospital Participates in local professional society 	and the profession	 Demonstrated sustained service to the department, division, school, university and/or hospital and the profession Advocate to improve patient care services regionally/statewide
Reputation	• Local	• Local	 State/Regional Established expert in one's field Validation of teaching, scholarship, and clinical practice at a local, state, or regional level 	 Regional/National Recognized expertise in one's field at a regional, national, or international level Source of referral for expert opinion

CLINICAL SCHOLAR TRACK FOR FACULTY EMPLOYED BY MERCER UNIVERSITY

Table 9. Qualita	Table 9. Qualitative Guidelines for Appointment or Promotion on the Clinical Scholar Track					
	ASSISTANT PROFESSOR	ASSOCIATE PROFESSOR	PROFESSOR			
Teaching	Previous experience or potential for effectively educating medical students or residents/fellows.	 Effective teacher Mentor/advisor to colleagues, residents, graduate and/or medical students Supervise or coordinate teaching by others Develop educational and assessment materials 	 Develops a course, curricular component, software, or evaluation materials which are used regionally or nationally Organizes a training program with a regional or national audience Publishes educational works in peer-reviewed outlets or repositories 			
Scholarship/ Research	 Focused, investigator- initiated area of scholarship Evidence of potential to function independently as a scholar 	 Disseminate results of scholarship, typically as peer-reviewed publications or presentations Leadership role in QI-Patient Safety Initiatives 	 Sustained scholarship validated through peer review Extramurally funded research 			

Clinical Practice	Appropriate clinical training and potential for excellence in clinical practice	 Demonstrated clinical expertise Consistently favorable reports on such measures as peer assessment, patient satisfaction, compliance with care guidelines, outcomes assessments, productivity, and efficiency Devises or implements a new method (diagnosis, therapy, clinical pathways, or standard guidelines, etc.) or procedure Directs clinical or professional programs Leadership that promotes quality of care, patient safety, and quality improvements 	 Source of referral for expert opinion Invited to participate in practice guideline committees, external program reviews, activity of government agencies, etc. Develops new techniques, therapies, or health care delivery systems that improve the health of the population served Contributes to board examination in specialty or subspecialty
Administration/ Leadership	Little or none	Little or none	 Leadership role in hospital/practice setting

Institutional, Academic, and Community Service	Serves on local institutional committees	 Serves on local medical school and/or hospital committees Leadership role or committee service in professional society Healthcare advocate for improving patient care services locally or regionally Leadership role in dealing with health issues at local level 	 Leadership role in medical school and hospital committees Leadership role or committee service at the national level Organizes a major national or international scientific meeting or symposium
Reputation	• Local	 Regional/National Established expert in one's field Validation of teaching, scholarship, and clinical practice at a local, state, or regional level 	 National/International Recognized expert in one's field at a national or international level Source of referral for expert opinion

CLINICAL PRECEPTOR TRACK FOR FACULTY EMPLOYED BY MERCER UNIVERSITY

		or Appointment or Prom		
DOMAIN	INSTRUCTOR	ASSISTANT PROFESSOR	ASSOCIATE PROFESSOR	PROFESSOR
Teaching	Previous experience or potential aptitude for competently educating medical students, residents, fellows, or graduate students	Previous experience or potential aptitude for competently educating medical students, graduate students, or residents/fellows	 Effectively supervises trainees in an ambulatory care setting, inpatient service, and procedural skills facilities Mentors/advises colleagues, students, and residents 	 Demonstrates sustained teaching excellence Effective role model and mentor for students, trainees, and colleagues
Scholarship/ Research	Little or none	 Involved in scholarly activity Participation in QI- Patient Safety Initiatives 	 Evidence of initial scholarship success Leads QI-Patient Safety Initiatives 	 Publication of peer-reviewed scholarly work Presentation of peer-reviewed scholarly work
Clinical Practice	Aptitude in patient care	 Demonstrates competence in clinical, diagnostic, procedural or other professional work Considered a very good clinician or professional by students, residents, fellows, and faculty 	 Consistently favorable reports on such measures as peer assessment, patient satisfaction, compliance with care guidelines, outcomes assessments, productivity, and efficiency expertise in specialty area Recognition as a skilled clinician 	 Directs clinical or professional programs and patient care activities Leadership role in hospital/ practice setting
Administration/ Leadership	• None	Little or none	Little or none	Little or none

Institutional, Academic, and Community Service			 Active member of professional society Advocate for improving patient care services locally Provides meaningful service contributions to MUSM as a volunteer preceptor or to the community 	 Leadership role in professional society Advocate for improving patient care services regionally/statewide
Reputation	• Local	• Local	 Local/Regional Established area of expertise in one's field Validation of practice at a local, state, or regional level 	 State/National Evidence of regional and/or national recognition Recognized expertise in one's field at a regional, national, or international level

ADMINISTRATOR TRACK

Table 11. Qualitative Guidelines for Appointment or Promotion on the Administrator Track					
DOMAIN	ASSISTANT PROFESSOR	ASSOCIATE PROFESSOR	PROFESSOR		
Teaching	Previous experience or potential aptitude for competently educating medical students, residents/fellows, or graduate students	 Consistently demonstrates effective teaching ability Participation in medical school curriculum (lectures, tutorials, courses, dissertation committees) Mentors/advises colleagues, residents, and medical students Develops curricular and assessment materials Supervises or coordinates teaching by other faculty, fellows, or residents 	 Demonstrated sustained teaching competence Participation in regional/national educational activities Develops educational and assessment materials which are used regionally or nationally Organizes a training program that has a regional or national audience 		
Scholarship/ Research	 Evidence of potential to function independently as a scholar 	Demonstrates initial success in research/scholarship	Demonstration of continued research/scholarship		
Clinical Practice	 Appropriate clinical training and potential for excellence in clinical practice. 	 Consistently favorable reports on such measures as peer assessment, patient satisfaction, compliance with care guidelines, outcomes assessments, productivity, and efficiency Demonstrates expertise in specialty area 	 Directs clinical or professional programs and patient care activities Leadership role in hospital/practice setting Develops new techniques, therapies, or health care delivery systems that improve the health of the population served 		

Administration/ Leadership	Serves as an assistant dean or other administrative appointment, e.g., vice chair of a department	 Serves as an associate dean or other administrative appointment, e.g., chair of a department Evidence of effectiveness in major role through completed projects Evidence of effective leadership in department/school/hospital projects, committees, task forces 	 Evidence of effectiveness in major role through completed projects Evidence of effective leadership in projects, committees, task forces
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Institutional, Academic, and Community Service	Serves on a medical school or hospital committee	 Serves on medical school and hospital committees Leadership role or committee service in professional society Board membership in health- related organizations or agencies Participates in relevant state, regional/national professional societies Advocate for improving patient care services locally or regionally 	 Sustained service to the department/division, school, university and/or hospital Leadership role in national professional society or advocacy organizations Regular or ad hoc member of a national research committee, clinical review committee, editorial boards, study sections
Reputation	• Local	 Regional/National Established expert in one's field Validation of teaching, scholarship, and administrative practice at a local, state, or regional level 	 National/International Recognized expert in one's field at a regional, national, or international level Evidence of regional and/or national recognition

RESEARCH TRACK

Table 12. Qualitative Guidelines for Appointment or Promotion on the Research Track						
DOMAIN	ASSISTANT PROFESSOR	ASSOCIATE PROFESSOR	PROFESSOR			
Teaching	 Previous experience or potential aptitude for competently educating medical students, residents/fellows, or graduate students 	 Participation in medical school curriculum Demonstrates effective teaching ability Supervises students in the laboratory Mentors/advises students, colleagues, residents 	 Demonstrated competence in teaching Continued participation in mentoring/advising activities 			

Scholarship/ Research	Demonstrated potential for developing scholarship/research activity	 Demonstrated scholarship/research activity Initial publication success in peerreviewed publications Success in securing extramural funding Evidence of independent research 	 Demonstration of sustained scholarship/ research activity Demonstration of expertise in one's field at the national and/or international levels Sustained extramural funding
Clinical Practice	Little or none	Little or none	Little or none
Leadership/ Administration	Little or none	Little or none	Little or none
Institutional, Academic, and Community Service	Serves on a medical school or hospital committee	 Active member of professional society Peer review of submitted manuscripts, grants, and/or service on study section Service on university, school, or departmental/divisional committees 	 Leadership role in professional society Demonstration of service to the department/ division, school and/or university Peer reviewer of submitted grants for an extramural funding agency Service on a national committee
Reputation	• Local	 Regional/National Established area of expertise in one's field Validation of practice at a local or state level 	 National/International Evidence of regional and/or national recognition Recognized expertise in one's field at a regional, national, or international level

LIBRARY TRACK

Table 13. Quali	tative Guidelines fo	or Appointment or Pro	motion on the Library Tra	ack
DOMAIN	INSTRUCTOR	ASSISTANT	ASSOCIATE PROFESSOR	PROFESSOR
Teaching	Previous experience or potential aptitude and willingness to develop capability in teaching	Demonstrated teaching aptitude through experience or training	 Demonstrated teaching commitment and expertise as evidenced by: Consistent effective teaching, development of curriculum, methods, or assessment materials Mentors/ advises colleagues, residents, students 	 Demonstrated sustained teaching excellence Distinguished record as demonstrated by teaching awards
Scholarship/ Research	Capacity for scholarship	Demonstrated potential for developing scholarship through experience or training	Evidence of publication success Presentation of scholarly work at regional conferences or professional meetings	 Record of peer reviewed publications Presentation of scholarly work at national conferences or professional meetings
Clinical Practice	Little or None	Little or None	Little or None	Little or None
Administration /Leadership	• None	Little or none	Little or none	Little or none
Institutional, Academic, and Community Service	 Demonstrate d interest in service to/for school, university, and/or hospital 	Demonstrated interest in service to/for school, university, and/or hospital	Meaningful service contributions to/for school, university, and/or hospital	 Demonstration of sustained service to department/ division, school, university and/or hospital

Reputation	• Local	• Local	 Local/Regional Established expertise in teaching 	 National Recognized expertise at regional, national, or international level
Experience Requirements	Master's degree in library science	3 years of service or equivalent experience	Completion of 5 years of service at the rank of Assistant Professor at the time of application	Minimum of 10 years as an assistant and/or Associate Professor

5.4.6 Quantitative Guidelines for Promotion

This section details the quantitative guidelines used in evaluating promotion and tenure applications. The tables below specify the qualifications for appointment and general guidelines for promotion by track. Multiple activities supporting each domain will strengthen the application for promotion at each rank. As stated in section 5.4.1 above, excellence may be demonstrated, and promotion may be awarded without contributions or accomplishments in every area under each domain. As faculty progress from Assistant Professor (or Instructor) to Professor, the contributions and accomplishments are cumulative, and faculty will continue to meet the guidelines for lower ranks.

MUSM clinical affiliate faculty: Clinical affiliate faculty who are not salaried by Mercer University (i.e., not employees of Mercer University), please refer to the promotion process and guidelines delineated under Section 5.4.7 – Promotion of Clinical Affiliate Faculty.

Tenure-track faculty: In addition to reviewing the minimum quantitative guidelines presented in this section, it is important to review the guidelines specified in the Mercer University Faculty Handbook under section 2.4.2 Tenured Appointments, subsection 2, as well as the MUSM guidelines for post-tenure review in the MUSM Faculty Handbook section 2.5.4 – Post-tenure Review, to guide their preparation for tenure and post-tenure review.

TABLE 14. QUANTITATIVE	TENURE TRA	ACK	MEDICAL EDUCATOR TRACK			CLINICAL EDUCATOR		
GUIDELINES FOR THE TENURE, MEDICAL EDUCATOR, AND CLINICAL EDUCATOR TRACKS	Associate	Associate to Full Cumulative	Instructor to Assistant Professor	to	Associate to Full Cumulative	Associate	Associate to Full Cumulative	
TEACHING DOMAIN								
Teaching evaluations	Consistently Effective	Consistently Excellent	Consistently Effective	Consistently Effective	Consistently Excellent	Consistently Effective	Consistently Excellent	

Curricular products	1	2	1	2	4	1	2			
developed/improved										
SCHOLARSHIP/RESEARCH DOMAIN										
Scholarly works total:	7	20	2	4	9	2	7			
Peer reviewed publications	3	12	1	2	5		3			
Invited or peer reviewed external presentations to state/regional/national audiences	4	7	1	2	4	1	2			
Externally funded grants/contracts/clinical trials		1								
Active role in QI-Patient Safety initiatives						1	2			
CLINICAL PRACTICE DOMA	IN									
Meets hospital/practice productivity, effectiveness, satisfaction etc. measures						Consistently	Consistently			
Demonstrates clinical excellence						Consistently	Consistently			
ADMINISTRATIVE/LEADER	SHIP DOMAI	N								
Effective completed or adopted initiatives										
Productive leadership role in projects/committees/task forces										
INSTITUTION/ACADEMIC S	ERVICE									
School/ Department/ College/Hospital Committees or task forces	2	7	1	2	5	2	3			
University/State/National/ Professional Committees		2			1		1			
Leadership and/or service in professional organizations, study groups, external review panels, peer review	2	4			2		1			

process, editorial board, etc.					
Outreach (e.g., presentation of health information to public, science fair judge, recruiting trips, mission trips, represent MUSM)	2	1	3	2	3

TABLE 15. QUANTITATIVE	ADMINIS	TRATOR	CLINICAL P	RECEPTOR	CLINICAL	SCHOLAR
GUIDELINES FOR THE ADMINISTRATOR, CLINICAL PRECEPTOR, AND CLINICAL SCHOLAR TRACKS	Assistant to Associate Professor	Associate to Full Cumulative	Assistant to Associate Professor	Associate to Full Cumulative	Assistant to Associate Professor	Associate to Full Cumulative
TEACHING DOMAIN						
Curricular products developed/improved	Consistently Effective	Consistently Excellent	Consistently Effective	Consistently Excellent	Consistently Effective	Consistently Excellent
Curricular products developed/improved	1	3				
SCHOLARSHIP/RESEARCH DOMAI	N					
Scholarly works total:	4	9	1	2	5	12
Peer reviewed publications Invited/Peer reviewed	2	5			2	6
presentations at state/ regional/national meetings	2	4		1	2	3
Externally funded grants/contracts/ clinical trials						1
Active participation in QI-Patient Safety initiatives				1	1	2
CLINICAL PRACTICE DOMAIN						
Meets hospital/practice productivity, Effectiveness, satisfaction etc. measures	Consistently	Consistently	Consistently	Consistently	Consistently	Consistently
Demonstrates clinical excellence	Consistently	Consistently	Consistently	Consistently	Consistently	Consistently
ADMINISTRATIVE/LEADERSHIP						
Effectiveness in major role through completed or adopted initiatives, products, projects	1 per year	1 per year				
Leadership role in projects/committees/task forces	1 per year	1 per year				
Demonstrates leadership skills such as communication, mentoring, judgment, positive attitude, commitment	Consistently	Consistently				
INSTTITUTIONAL/ACADEMIC SERV	VICE					
School/ Department/ College/Hospital Committees	2	8			2	4
University/State/National/ Professional Committees		2			1	1
Leadership and/or service in professional organizations, study groups, external review panels, peer review process, editorial board, etc.	1	4			1	2

Volunteer service contribution to MUSM and/or community		80 hours/ year, most years	80 hours/ year, most years		
Outreach (e.g., presentation of health information to public, science fair judge, recruiting trips, mission trips, representing MUSM to the public)	8	3	5	2	4

TABLE 16. QUANTITATIVE		LIBRARY TRACK		RESE	ARCH TRACK
GUIDELINES FOR THE					
LIBRARY AND RESEARCH TRACKS	Instructor to Assistant Professor	Assistant to Associate Professor	Associate to Full Cumulative	Assistant to Associate Professor	Associate to Full Cumulative
TEACHING DOMAIN					
Teaching evaluations	Consistently Effective	Consistently Effective	Consistently Excellent	Consistently Effective	Consistently Excellent
Curricular products developed/improved	1	2	4	2668.7.6	
SCHOLARSHIP/RESEARCH DOMA	AIN				
Scholarly works total:	2	4	9	8	23
Peer reviewed publications	1	2	5	3	12
Invited or peer reviewed			<u> </u>	4	7
external presentations to	1	2	4	4	,
state/regional/national	_	2	7		
audiences					
Externally funded grants/				1	4
contracts/ clinical trials				1	4
Active role in QI-Patient Safety					
initiatives					
Library Products (e.g.,	1	2	4		
pathfinders, subject guides, etc.)					
Library Products may substitute					
for publications or					
presentations; minimum totals					
should equal total scholarly					
works.					
CLINICAL PRACTICE DOMAIN					
N/A					
ADMINISTRATIVE/LEADERSHIP I	DOMAIN				
Effective completed or adopted					
initiatives					
Productive leadership role in					
projects/committees/task forces					
projects/ committees/ task forces					
INSTITUTION/ ACADEMIC SERVI	CE		1		1
School/ Department/					3
College/Hospital Committees or	1	2	5		
task forces					
University/State/National/					
Professional Committees			1		
Leadership and/or service in				1	4
professional organizations, study			2		
groups, external review panels,					
peer review process, editorial					
board, etc. ***					
Outreach (e.g., presentation of					
health information to public,		1	3		
science fair judge, recruiting					
trips, mission trips, representing					
MUSM to the public) (does not					
apply to Librarians-see below					
Librarianship 1 project/contribut	ion from any of the f	ollowing four areas e	ach vear		

Archives/Digital Initiatives			
Collection Services (selection			
and deselection of materials)			

Public Service/Outreach (e.g.,			
research consultations)			
Technical Service and Library			
Systems (e.g., maintaining			
functionality of electronic			
resources, database			
management, etc.)			

5.4.7 Promotion of Clinical Affiliate Faculty

A separate process and guidelines have been developed for the promotion of MUSM clinical affiliate faculty who are not salaried by Mercer University (i.e., not employees of Mercer University) on the Clinical Preceptor, Clinical Educator, and Clinical Scholar promotion tracks. In the information and tables below, the process, requirements, and qualitative and quantitative guidelines for promotion on each track are provided. Additional information can be found on the Mercer University School of Medicine website.

Clinical Preceptor Track:

This track recognizes two cohorts of non-MUSM-employed clinical faculty: (1) community-based physicians in private practice who serve as volunteer preceptors in the school's population health course for medical students, and (2) community- and hospital-based physicians who teach or train medical students and/or residents in the clinical environment and receive either no remuneration (i.e., volunteer faculty) or a stipend from the School of Medicine for their work with medical students and/or residents.

Quantitative and Qualitative Promotion Guidelines for the Clinical Preceptor Promotion Track

See annotated CV for additional examples of activities for each domain

Domains	Activities	Associate Professor	Professor *
Clinical practice	Maintains an active clinical practice	Minimum of 5 years	A minimum of 5
	(must have an active medical license)	of experience as an	years as an
		Assistant Professor,	Associate
		unless exemplary	Professor, unless
			exemplary
	Meets hospital/clinic/practice measures	Consistently	Consistently
	or outcomes (e.g., productivity, patient		
	satisfaction, patient safety, etc.)		
	Demonstrates effectiveness and	Consistently	Consistently
	excellence in the care of patients		
	Demonstrates effectiveness and	Consistently	Consistently
	excellence as a role model		
Teaching,	Achieves good/excellent medical student	Consistently good	Consistently
mentoring, and	and/or resident evaluations. Include any	evaluations	excellent
advising	personal statements from learners or		evaluations
	colleagues if you do not have formal		
	evaluations		
	Supervises medical students and/or	Demonstrates an	Demonstrates
	residents in the clinical environment	ability to supervise	excellence in
		medical students	medical student

		and/or residents	and/or resident
	Population health preceptors: Teaching first-year (3-week rotation), second year (3-week rotation), and fourth year (4-week rotation) medical students Other clinical preceptors: Teaching medical students and/or residents in the clinical environment – includes one-on-one teaching, group teaching, supervising students/residents, teaching clinicals skills, rounding with	10 medical students in total; each student for a minimum of one rotation Minimum of 3 rotations	supervision 20 medical students in total years; each student for a minimum of one rotation Minimum of 6 rotations
	students/residents, etc.		
Scholarly activity and scholarship	Examples of activities – See the annotated CV for additional examples: • Non-peer-reviewed publication (e.g., community newspaper article, development of a patient handout • Non-peer-reviewed presentation (e.g., rotary presentation, community non-medical presentation) • Peer-reviewed publication • Peer-reviewed presentation • Internally funded grants • Externally funded grants • QI-patient safety initiatives • Innovations in clinical practice	2 different products	4 products with at least 2 that are different products

Service:	Examples of activities – See the	2 different activities	4 activities with at
Institutional,	annotated CV for additional examples:		least 2 that are
professional/	 Administrative or leadership role in 		different activities
academic, and	the practice setting (e.g.,		
community	management of employees or other		
service/	practitioners, chair, DIO, etc.)		
outreach	 Leadership role in an academic or 		
related to your	professional society		
role as a	 Editorial board or journal reviewer 		
clinician and/or	 Serve on a School of Medicine or 		
clinical	Mercer University committee		
educator	 Serve as a student candidate 		
	interviewer for the School of		
	Medicine		
	 Serve on a hospital or clinic 		
	committee		
	 Advocate for improving patient care 		
	regionally/statewide/nationally		
	 Volunteer service activity 		
	Service on a local/community board		
	 Community outreach 		
	Mission work		

^{*} Promotion to professor includes those contributions made while an assistant and associate professor (i.e., cumulative)

Clinical Educator Track:

This track recognizes faculty in the clinical practice and educational domains in both undergraduate (MD) and graduate (residency) medical education. Faculty appointed to this track are usually core clerkship faculty who actively participate in medical student education in the 6 required core clerkships. It is expected that time spent in clinically activities will overlap with educational activities related to mentoring, teaching, and supervising medical students, residents, and fellows. Faculty on this track include both full- and part-time faculty who are either MUSM-employed or not MUSM-employed (i.e., employed by hospital or clinic) faculty. MUSM-employed faculty on this track must apply for promotion using the same process as other MUSM-employed faculty. The process below is relevant for the promotion of non-MUSM employed clinical faculty on the Clinical Educator Promotion Track.

Quantitative and Qualitative Promotion Guidelines for the Clinical Educator Promotion Track

See annotated CV for additional examples of activities for each domain

Clinical practice	Maintains an active clinical practice	Minimum of 5 years	A minimum of 5
Cililical practice	(must have an active medical license)	of experience as an Assistant Professor, unless exemplary; Must have experience working with MUSM medical students in the clinical environment	years as an Associate Professor, unless exemplary; Must have experience working with MUSM medical students in the clinical environment
	Meets hospital/clinic/practice measures or outcomes (e.g., productivity, patient satisfaction, patient safety, etc.)	Consistently	Consistently
	Demonstrates effectiveness and excellence in the care of patients	Consistently	Consistently
	Demonstrates effectiveness and excellence as a role model	Consistently	Consistently
Teaching, mentoring, and advising	Achieves good/excellent medical student and/or resident evaluations. Include any personal statements from learners or colleagues if you do not have formal evaluations	Consistently good evaluations	Consistently excellent evaluations
	Teaching medical students and/or residents in the clinical environment – includes one-on-one teaching, group teaching, supervising students/residents, teaching clinicals (e.g., teaching on rounds or in clinic)	Minimum of 3 clerkship rotations with MUSM medical students and/or 3 years supervising residents	Minimum of 6 clerkship rotations with MUSM medical students and/or 6 years supervising residents
Scholarship/ Research	Examples – See the annotated CV for additional examples: • Peer-reviewed publications • Peer-reviewed presentations • Internally funded grants • Externally funded grants • QI-patient safety initiatives	2 products that represent 2 different forms (categories) of scholarship/ research; at least 1 of the products must be a peerreviewed publication. Evidence of scholarship/ research with MUSM students is required; you must make this clear in your application by	7 products that represent at least 2 different forms (categories) of scholarship/ research; at least 2 of the products must be peerreviewed publications, and at least 1 of them published since the last promotion. Evidence of scholarship/ research with

Sarvica	Evamples – See the annotated CV for	including student names	MUSM students is required; you must make this clear in your application by including student names 3 activities with at
Service: Institutional, professional/ academic, and community service/ outreach	 Examples – See the annotated CV for additional examples: Administrative or leadership role in the practice setting (e.g., management of employees or other practitioners) Leadership role in an academic or professional society Editorial board or journal reviewer Serve on a School of Medicine or Mercer University committee Serve as a student candidate interviewer for the School of Medicine Serve on a hospital or clinic committee; any committee service of at least 1 year is counted as 1 activity, a full 3-year term is counted as 3 activities Advocate for improving patient care regionally/statewide/nationally Volunteer service activity Service on a local/community board Community outreach Mission work 	2 different activities with at least 1 at MUSM or Mercer University	least 1 that is different from the other 2. At least 2 activities at MUSM or Mercer University
Administration/ Leadership	Examples – See the annotated CV for additional examples:	Optional	Optional

^{*} Promotion to professor includes those contributions made while an assistant and associate professor (i.e., cumulative)

Clinical Scholar Track:

This track recognizes faculty with a commitment to active participation in the education of medical students and residents/fellows. These faculty are expected to maintain clinical practice and to disseminate clinical knowledge and techniques through scholarly publications and professional

presentations.

Quantitative and Qualitative Promotion Guidelines for the Clinical Scholar Promotion Track

See annotated CV for additional examples of activities for each domain

Domains	Activities	Associate	Professor*
		Professor	
Clinical	Maintains an active clinical practice	Minimum of 5	Minimum of 5
practice	(must have an active medical license)	years of	years as an
		experience as an	Associate
		Assistant	Professor, unless
		Professor, unless	exemplary; Must
		exemplary; <u>Must</u>	have experience
		have experience	working with
		working with	MUSM medical
		MUSM medical	students in the
		students in the	<u>clinical</u>
		<u>clinical</u>	<u>environment</u>
		<u>environment</u>	
	Meets hospital/clinic/practice measures	Consistently	Consistently
	or outcomes (e.g., productivity, patient		
	satisfaction, patient safety, etc.)		
	Demonstrates effectiveness and	Consistently	Consistently
	excellence in the care of patients		
	Demonstrates effectiveness and	Consistently	Consistently
	excellence as a role model		
Scholarship/	xamples – See the annotated CV for	5 total	12 products that
Research	additional examples.	products that	include:
		include:	6 peer-reviewed
	Categories of scholarship:	2 peer-reviewed	publications
	 Peer-reviewed publications 	publications	with at least 3
	 Peer-reviewed presentations 	2 peer-reviewed	publications
	 Internally funded grants 	presentations	since the last
	 Externally funded grants 	1 QI-Patient Safety	promotion.
	 QI-patient safety initiatives 	Initiatives	
	 Peer-reviewed social media posts 	Evidence of	3 peer-reviewed
	on reputable, publicly available	scholarship/	presentations
	websites	research with	2 QI-Patient
		MUSM students	Safety Initiatives
		is required; you	
		must make this	Evidence of
		clear in your	scholarship/
		application by	research with
		including student	MUSM students
		<u>names</u>	is required; you
			must make this
			<u>clear in your</u>

Teaching, mentoring, coaching, and advising	Achieves good/excellent medical student and/or resident evaluations. Include any personal statements from learners or colleagues if you do not have formal evaluations Active participation in teaching medical students, fellows, and/or residents in the clinical environment – includes one-on-one teaching, group teaching, supervising students/residents, mentoring, teaching clinicals (i.e., teaching on rounds or in clinic)	Consistently good evaluations Minimum of 3 3rd/4 th year clinical rotations with MUSM medical students and/or 3 years supervising	application by including student names Consistently excellent evaluations Minimum of 6 3rd/4 th year clinical rotations with MUSM medical students and/or 6 years
Service Categories: Institutional, professional/ academic, hospital, and community service/ outreach	 Examples of service Administrative or leadership role in the practice setting (e.g., management of employees or other practitioners) Leadership role in an academic or professional society Editorial board or journal reviewer Serve on a School of Medicine or Mercer University committee Serve as a student candidate interviewer for the School of Medicine Serve on a hospital or clinic committee; any committee service of at least 1 year is counted as 1 activity, a full 3-year term is counted as 3 activities Advocate for improving patient care regionally/statewide/nationally Volunteer service activity Service on a local/community board Community outreach Mission work 	residents 2 different activities with at least 1 at MUSM or Mercer University	supervising residents 3 activities with at least 1 that is different from the other 2 categories of service. At least 2 activities at MUSM or Mercer University
Administration /Leadership	xamples – See the annotated CV for additional examples: • DIO • Assistant, Associate, Senior Associate Dean	Little or none required	Little or none required

	 Department chair Section chief, director, or leader of a clinical area Consultant appointments and/or lectureships Leadership position: professional staff 		
Reputation	Develops as a subject matter expert in a clinical practice area	 Established expert in one's field Validation of teaching, scholarship, and clinical practice at a local, state, or regional level 	National/Internati onal Recognized expert in one's field at a national or international level Source of referral for expert opinion

^{*} Promotion to professor includes those contributions made while an assistant and associate professor (i.e., cumulative)

Required Application Materials for Clinical Preceptor, Clinical Educator, and Clinical Scholar Promotion Tracks (for non-Mercer employed faculty):

- Letter of intent to apply for promotion. A template is available for your use. The letter must also be sent to your Chair and, if you have a joint appointment, the Chair of that department as well.
- MUSM CV (an annotated CV is available for your use)
- Letters of recommendation
 - Two letters of recommendation from colleagues/peers who are currently in practice (MD, DO, MBBS) or previous medical students or residents in practice that attest to the candidate's contributions to the mission of the school of medicine and their commitment to excellence in clinical practice. For physicians in hospital departments a letter from the department chair, department head, or equivalent describing your contributions to the mission of the school of medicine and your commitment to excellence in clinical practice is required as one of the two required letters of recommendation.
 - Additional letters are encouraged and may be submitted but are not necessary.
 - Letters of recommendation must address aspects of clinical practice: meeting hospital/clinic/practice measures or outcomes (e.g., productivity, patient satisfaction, patient safety, etc.), effectiveness and excellence in the care of patients, and effectiveness and excellence as a role model.

- Medical student evaluations these will be collected for you by the school, but you must make
 the request from the Office of Academic Affairs. Peer evaluations or other forms of teaching
 evaluation may also be included.
- Candidate letter addressed to the Dean that articulates how the candidate has met or exceeded the requirements for promotion. A template is available for your use.

Timeline and Review Process:

- 1. Letter of intent to apply for promotion due no later than the **first Monday in July** and sent via email to: musm_faculty_affairs@mercer.edu
- 2. Application materials due no later than **first Monday in September** and sent to via email to: musm faculty affairs@mercer.edu
- 3. Campus dean reviews and approves the packet no later than the last Friday in September.
- 4. Review by the promotion and tenure committee October-November
- 5. Promotion and tenure committee makes a recommendation to the dean no later than the second Monday in December.
- 6. The dean reviews and makes the final decision. Decisions are communicated to the candidate, the candidate's department chair, the promotion and tenure committee, and faculty affairs between May and July.

5.5 FACULTY TENURE

5.5.1 General Principles

The purpose and general principles of tenure are specified in the Mercer University Faculty Handbook (Section 2.4.1 – General Principles Tenure and Section 2.4.2 – Tenured Appointments). A tenure-eligible faculty member will request tenure through the MUSM Promotion and Tenure Committee and follow the process outlined in Section 5.4 – Procedures and Guidelines for Faculty Promotion.

The MUSM Promotion and Tenure Committee reviews individuals eligible for tenure before the end of their probationary period. Tracking of tenure begins on July 1 following the initial appointment. Probationary periods include experience gained only during the initial appointment at the rank of Assistant Professor, Associate Professor, or Professor. At the time of initial appointment, the Dean may recommend that a faculty member receive consideration for "tenure-relevant" experience gained prior to their appointment to MUSM. Prior experience by a faculty member considered "tenure-relevant" may reduce the probationary period and shorter probationary periods must be approved by the President. The standard probationary period for attaining tenure is six years. Review and notification of tenure occurs during the sixth year of full-time faculty appointment, and when granted, tenure becomes effective at the beginning of the seventh contract year. Faculty members are notified of tenure or offered a one-year terminal contract no later than May 1 of the year of tenure review.

Mercer University bases tenure on merit and tenure is determined by the aggregate consideration of the criteria defined in the Mercer University Faculty Handbook (Section 2.4.2 – Tenured Appointments).

A faculty member with a probationary period of six years should seek promotion and tenure at the end of the fifth year as illustrated in the timeline below:

Six Year Probationary Period: Example Dates of Importance for Tenure Applications

Begin tenure clock 07/01/17	07/01/18	07/01/19	07/01/20	07/01/21	07/01/22	Six Year Probation Period Ends	07/01/23
Years Completed	1	2	3	4	5	6	
					Submit letter of intent to department	Tenure Approved	Tenure begins
					chair and dean. Prepare application for October review	Tenure Denied	1-year non- renewable contract
	EARLY APP	LICATION P	ERIOD				

5.5.2. Change in Tenure Status

A faculty member may request to change from the tenure track appointment to a non-tenure track appointment prior to tenure review as outlined in Section 5.2.3. A faculty member may also request to change from a non-tenure track appointment to a tenure track appointment. These changes require the approval of the Dean and the Provost. For faculty members transferring to the tenure track, the probationary period begins on July 1 of the academic year following the change.

Granting tenure upon initial appointment is not a usual condition of appointment. Certain individuals of exceptional merit who have already achieved tenure while employed at another university may warrant tenure as a condition of employment or following a brief probationary period.

5.5.3 Delay in Tenure Review

There may be occasions when a faculty member encounters certain circumstances that may justify a delay in the scheduled tenure review process. Requesting an extension must occur prior to submission of an application for tenure. To be considered for an extension, the faculty member must make a written request to the department chair documenting that their ability to demonstrate readiness for applying for tenure has been substantially impaired. Faculty should submit this request when it becomes apparent that circumstances will substantially affect their readiness for tenure rather than waiting until the year in which the review is scheduled.

The faculty member should provide the following information:

- 1. Date of MUSM faculty appointment
- 2. Terminal tenure year
- 3. Reason for requesting an extension
- 4. Date of the event(s) affecting readiness for tenure

- 5. Explanation of how the nature of the event(s) substantially burdened (or will burden) progress toward tenure
- 6. Outline of the specific work for which progress has been (or will be) hampered

If approved by the department chair, the Dean considers the request, and if approved, the recommendation is subsequently considered by the Provost. If denied prior to reaching the Provost, the faculty member may appeal to the Provost.

Examples of circumstances that might justify a delay in the tenure review:

- Birth or adoption of child
- Illness or disability of a family member
- Personal or family tragedy
- Catastrophic change in the research environment that significantly delays or terminates research activity
- Other justifiable changes in the research goals of the individual or the department that adversely affect the scholarly productivity of the faculty member
- Unforeseen imposition of additional department or university duties on the faculty member that significantly detracts from the time available for scholarly activity
- Formal enrollment and engagement in additional advanced degree work that was previously approved by the institution

5.5.4 Promotion and Tenure Checklist and Important Dates

DEADLINES	ACTION ITEMS	INDIVIDUALS RESPONSIBLE
Prior to July	 Review your <u>departmental</u> policy for promotion and/or tenure as early as possible to identify any additional requirements and due dates if applicable; not every department has a separate review process for promotion and/or tenure. Attend a Promotion and Tenure Workshop (recommended). Discuss with department chair progress toward promotion and/or tenure and intent to apply for promotion and/or tenure. 	Candidate and Chair
First business day of July	 Submit a letter of intent to department chair and submit a copy via email to the Office of Faculty Affairs by the first business day of July: Musm_Faculty_Affairs@mercer.edu For faculty who have a joint appointment, a letter of intent must also be submitted to the chair of this secondary department. 	Candidate
July	 The candidate will receive notice from the Office of Faculty Affairs indicating receipt of the letter of intent. The Office of Faculty Affairs forwards all letters of intent to the Dean and the Chair of the MUSM Faculty Promotion and Tenure Committee. 	Office of Faculty Affairs
July-October	 Compile and submit the information required for promotion and/or tenure – applications are due the first business day of October (if a holiday, applications are due the next business day). Note: For MUSM-employed faculty, application materials are submitted as PDFs via Watermark (formerly Activity Insight). 	Candidate

Mid-August	and preparank should be considered and supp	e and department chair identify internal and external referees are materials to submit to referees. The referee's academic uld be higher than the current rank of the candidate. It is acts each referee and provides a copy of the candidate's CV porting material as well as the MUSM promotion and tenure	Candidate and Chair
	the first k	s. Chair request that letters are sent electronically no later than business day of September to the Office of Faculty Affairs: aculty_Affairs@mercer.edu	
First business		iness day of September (if a holiday, application is due the	Candidate,
day of		iness day), or in accordance with departmental policy and	Department
September	procedur	res, submit the application for promotion and/or tenure for	Chair,
	-	y the <u>department chair and, if applicable, the departmental</u>	<u>Department</u>
		on and tenure review committee.	Promotion and
	Candidate	e's department chair and, if applicable, department promotion	Tenure Review
		re committee evaluate the application.	Committee
Third Monday		er of recommendation, a recommendation letter from the	Chair, internal
of September	chair of t	he candidate's secondary/joint appointment if applicable, and	and external
	internal a	and external referee letters are due the third Monday of	referees
	Septemb	er. Letters should be addressed to the Dean and sent directly	
	to the Of	fice of Faculty Affairs: Musm_Faculty_Affairs@mercer.edu	
	The Office	e of Faculty Affairs forwards letters to the chair of the MUSM	
	Faculty P	romotion and Tenure Committee	
First business	Submit th	ne transmittal form, CV, application, and supporting material as	Candidate,
day of	PDFs to N	Vlusm_Faculty_Affairs@mercer.edu by 5:00 p.m. on the first	Faculty Affairs
October	business	day of October (if a holiday, due the next business day).	
	Materials	s will be sent to the chair of the promotion and tenure	
	committe	ee by faculty affairs.	
Oct – Dec		aculty Promotion and Tenure Committee convenes and begins	MUSM P&T
		v of the applications. Committee deliberations and	Committee
		endations are conducted in executive session and are	
	confident		
Second		notion and Tenure Committee forwards its recommendations,	MUSM P&T
Monday of	•	th supporting documents, to the Dean for consideration no later	Committee
December		second Monday of December (if a holiday, due the next	
	business	••	
Third Friday in		on and Tenure Application Addendum: In recognition of ongoing	Candidate
December	•	nents in the areas of evaluation, the promotion and tenure	
	•	rocess allow for a one-time amendment to the application	
		with a one-page written addendum submitted to the Dean on	
	•	o the end of the third Friday in December (if a holiday, due the	
		iness day). The addendum is not an opportunity to reimagine cation narrative but rather is limited to additions/revisions of	
	• • •	at may materially impact the review process (e.g., notification	
		cceptance of publication, award of external grant/fellowship,	
		professional honorific or teaching recognition, reflection on fall	
		teaching, etc.). Confirming documentation may be submitted	
		addendum, which shall be added to the promotion and tenure	
	vvitii tiie (addendam, which shall be duded to the promotion and tenure	

	application for subsequent review. There is no guarantee of reconsideration of recommendations completed prior to addendum submission. Note that this addendum applies to all MUSM promotion tracks.	
Last Monday of January	Dean considers the recommendations of the department chair/unit director, and the Promotion and Tenure Committee before making a recommendation to the Provost. The action taken by the Dean, and all subsequent applicable notification and review procedures, shall be in accordance with the Mercer University Faculty Handbook and follow the prescribed timelines. Recommendation and packets are due to the Provost's office the last Monday of January (if a holiday, due the next business day)	Dean
Feb – March	The Provost and the President review applications.	Provost, President
April	 The Provost's Office makes recommendations to the Board of Trustees at the April meeting (Spring meeting). The Dean notifies candidates of Board of Trustees' actions. Note: Candidates will neither be informed of the Promotion and Tenure Committee recommendation to the Dean nor of the Dean's recommendation to the Provost. 	Provost, Dean, Board of Trustees

Chronology of REVISIONS, APPROVALS, EDITS & UPDATES OF SECTION 5:

2002

Operational Procedures (5.12) approved by MUSM P&TCommittee

July 14, 2003

Document revisions approved by MUSM Faculty

August 2003

Chart 1: Probationary Periods – Dates of Importance for Tenure Application approved by W. G. Solomon, University General Counsel

August 1, 2003

Document updated by L. Adkison

September 30, 2003

Operational Procedures (5.12) revised & approved by MUSM P&T Committee, and document updated by L. Adkison

April 6, 2004

Library Faculty sections approved by MUSM Executive Committee & document updated by L. Adkison

May 2, 2005

Article 11. FACULTY PROMOTIONS AND TENURE COMMITTEE of the BYLAWS OF THE FACULTY OF MERCER UNIVERSITY SCHOOL OF MEDICINE approved by MUSM

June 17, 2005

Document reviewed by MUSM P&T Committee, edited by J. Boltri, D. Harris & J. LaBeause & document updated by J. LaBeause

June 2006

Document reviewed by J. Boltri & D. Harris, Chart 1 corrected by L. Adkison & document updated by J. LaBeause

May 2010

Research Faculty sections approved by MUSM Executive Committee & faculty, document updated by J. Boltri, M. Dent & J. LaBeause

June 2013

Document updated with "Request for Promotion and/or Tenure" and associated changes; CV template updated, guidelines for documentation and electronic submission added as appendix by M. Dent

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Major revisions made to P&T document. Approved by faculty through electronic voting in May 2015

August 2017

Library Track reinstituted on recommendation of P&T Committee and approval by the Executive Council through an electronic vote. Document updated by M. Dent.

June 2020

Moving tracks and remaining in track for 3 years prior to seeking promotion. Document updated by B. Dickinson and M. Dent and formatted by K. Meeks

March 10, 2023

Reorganization of content to improve clarity and reduce redundancy by B.L. Dickinson and subcommittee members: R. Visalli, A. Meyers-Stinson, B. Lian, and R. Parrish.

March 28, 2023

March 10, 2023 version approved by the MUSM Executive Council.

April 11, 2023

March 10, 2023 version approved by the MUSM Faculty.