

**COLLEGE OF MEDICINE 2017**  
**STANDARDS FOR PROMOTION AND TENURE**

*(Subject to URC approval)*

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## **A. PRINCIPLES**

## **B. AUTHORITY**

College of Medicine Standards for Promotion and Tenure include and supplement the University of Saskatchewan Standards for Promotion and Tenure for tenure-track, continuing status, with term, and without term faculty in the College of Medicine. The College standards must be read in conjunction with the University Standards for Promotion and Tenure.

Rules governing renewal of probation and/or the awarding of tenure are only applicable for College of Medicine faculty employed by the University of Saskatchewan. The applicability of tenure or probation considerations is outlined for each relevant evaluation category, just prior to tables listing the requirements, typical activities and progress indicators for that category.

The College's Academic Programming Appointment Standards for Promotion and Tenure (approved June 29, 2011) and the College's School of Physical Therapy Standards for Promotion and Tenure (2011) are separate documents from these Standards.

In these standards, the term 'Department Head' is understood to include, where applicable, those individuals named 'Unified Department Head.' The abbreviation 'CoM' refers to the 'College of Medicine.'

In these standards, the term 'clinical faculty' refers to faculty appointees in the College of Medicine who are either MDs (or accepted equivalent) or clinical PhDs having direct or indirect responsibility for patient care. While academic appointment credentials may appear in the general descriptions for career pathways, below, actual requirements may vary and are set by departments and/or the college, independent of these standards.

## **C. CATEGORIES OF EVALUATION**

College faculty, including clinical faculty, have at least some flexibility regarding their preferred career pathway(s) for use in guiding departmental renewals and tenure committees, promotions committees, and the College Review Committee as these committees evaluate case files. However, any contemplated change in career pathway proposed for evaluation purposes has possible implications relating to budgets and the equitable assignment of duties within departments. Therefore, a change in career pathway must be approved by both the Department Head and the Dean. The career pathway(s) chosen and approved will determine, in part, which standards need to be met within each category of evaluation. Normally, faculty will be evaluated using one career pathway only but there may be occasional exceptions.

Non-clinician researchers will usually be evaluated according to one or more of the following career pathways: scientist, scientist-administrator or educator.

Clinical faculty will usually be evaluated according to one or more of the following career pathways: clinician-teacher, clinician-educator, clinician-scientist, or clinician-administrator.

Faculty who are not clinical faculty, not scientists and not medical educators may nonetheless provide valuable teaching contributions of all types and at all levels of medical education. Such individuals will usually choose the teacher career pathway if they wish to seek promotion.

One's choice of career pathway is determined by a combination of variables including personal interests, departmental clinical/academic needs, career trajectory, college academic needs, and a realistic approximation of how one's time is divided amongst various academic and clinical pursuits. Any such estimates might fluctuate over time or for some individuals, quite rapidly; therefore, the ways in which career pathways are used in evaluating readiness for promotion or tenure must remain flexible. In the College of Medicine, one's choice of career pathway might change, with departmental and college approval, multiple times during the course of one's professional career. These standards should be utilized to facilitate, recognize and reward academic accomplishments within evolving career trajectories.

Consistent with the university's *'teacher-scholar'* model of faculty development, eligibility for tenure and promotion will require faculty to do at least some teaching and/or scholarly work, regardless of chosen career pathway(s). In a small number of cases, senior administrators might be exempt from teaching requirements. Determination of the appropriate mix of academic activities is made initially at the time of appointment for university-employed faculty and thereafter in discussion of assignment of duties. For most clinical faculty, the expected range of academic activities is discussed with their Department Head on an ongoing basis and/or at periodic academic reviews.

## **Career Pathway Descriptions:**

### **1) Clinician-Teacher**

The clinician-teacher career pathway will be the one most commonly selected by clinical faculty who wish to be considered for promotion and for whom clinical teaching is the primary academic contribution.

The clinician-teacher pathway recognizes and values the academic commitment made by our many clinical faculty who provide teaching for the college on a regular, ongoing basis (i.e. teaching for CoM residents, fellows and undergraduate (UG) students).

In terms of overall proportioning of work time, clinician-teachers are predominantly committed to clinical service provision. However, they also contribute academically through the provision of clinical teaching (teaching provided in clinical settings while concurrently providing clinical

care) and event-based, or dedicated teaching (teaching provided in clinical or academic settings during time dedicated to teaching alone, and not provided concurrently with patient care).

In the CoM, clinical teaching involves the integration and synthesis of new knowledge (e.g. clinical research findings) in the clinical context, and the application of new knowledge to new and/or persistent medical problems. Teaching requires effective communication and involves encouraging learners to develop a capacity for analysis, evaluation and self-examination. Clinician-teachers will keep a personal record of teaching volume and type, along with a record of teaching evaluations provided by peers and learners.

## **2) Clinician-Educator**

The clinician-educator career pathway is for clinical faculty who have a clinical practice but also have advanced training and expertise or a degree in education. Typically, these individuals will participate in at least some research on pedagogy and the effectiveness or impact of medical education. While consideration for promotion will include an evaluation of the research performed in this area of academic expertise, it will also include an assessment of the quality and impact of curricular design, course coordination and delivery, as well as other process-related work in medical education. It is possible that a portion of their scholarship and research output will be based on clinical practice, in addition to their scholarly work in medical education.

In terms of overall proportioning of work time, clinician-educators are predominantly committed to enhancing the process, content and delivery of medical education, including faculty development and mentorship. Career evolution for clinician-educators tends to reflect a gradually increasing emphasis on medical education and a gradually decreasing emphasis on clinical service provision. Many clinician-educators will have previously classified themselves as clinician-teachers.

## **3) Clinician-Scientist**

The clinician-scientist career pathway is for clinical faculty who have a small clinical practice but for whom health-related research is the predominant work focus. Typically, clinician-scientists will be academically qualified researchers working in translational, inter- and multi-disciplinary teams and research clusters. Expectations for this pathway include sustained levels of research productivity and publication, peer recognition in the research community and generation of substantial research funding.

## **4) Clinician-Administrator**

The clinician-administrator career pathway is for faculty who usually do at least some clinical work or population/public health work, but participate actively in the administrative affairs of the department and/or college, as well as the health authority. In terms of overall proportioning of work time, clinician-administrators are predominantly committed to academic administration.

While they still may provide some clinical (non-administrative) service, the majority of their time will be devoted to roles such as deans, vice-deans, associate deans and Department Heads. Clinicians holding administrative roles involving a somewhat lesser administrative time commitment (e.g. Program Directors, Assistant/Associate Program Directors, Site Coordinators, Course Chairs, Course Directors, Module Directors, Rotation Directors/ Rotation Coordinators, Year Chairs, Year Site Coordinators, Assistant Deans) might use this career pathway in conjunction with another pathway when pursuing additional training, when transitioning to another pathway, or when seeking promotion in academic rank.

## **5) Scientist**

The scientist career pathway is reserved for non-clinical faculty appointees in any department who engage primarily in research. These individuals will have advanced training in research and an established research track record. While some professional time will be devoted by members of this pathway to other academic work such as teaching or administration, the major focus for most individuals in the scientist career pathway will be research and graduate student supervision.

## **6) Scientist-administrator**

Scientist-administrators will undertake major department-based or college-wide administrative roles. As with the clinician-administrator pathway, these roles might include associate deans, vice-deans, and Department Heads. For those who wish to continue participating in some ongoing research, typical administrative roles might include Program Directors, Assistant/Associate Program Directors, Site Coordinators, Course Chairs, Course Directors, Module Directors, Rotation Directors/ Rotation Coordinators, Year Chairs, Year Site Coordinators, Assistant Deans.

## **7) Educator**

The educator career pathway is made available to those who are neither clinicians nor medical scientists, but instead have gained advanced expertise and experience in medical education. Educators will have advanced education degrees. They will devote their professional time to the scholarship of medical education, including the research and development of new knowledge, process and content aimed at improving and sustaining quality medical education. They will collaborate with clinician-educators and faculty development to help create a context within which both science and clinical teachers can flourish.

## **8) Teacher**

The teacher career pathway is reserved for faculty who are not classified as clinical faculty as per the definition in Part B of these standards, and are not professional medical educators or scientists. These faculty do not provide concurrent clinical care but contribute to UG or postgraduate (PG) College of Medicine teaching in clinical or non-clinical settings on an

intermittent basis and typically are not involved in research or academic administration activities. They may be members of other health care professions (e.g. pharmacists, psychologists, nurses) or they may have been asked to participate in teaching because they have applicable experience in other disciplines (e.g. lawyers, health policy analysts, social workers, administrators, cultural specialists).

<b>TABLE A: Required Evaluation Categories for Each Career Pathway *</b>	
<b>Evaluation Category</b>	<b>Career Pathway</b>
<b>Category 1:</b> Academic and Professional Credentials	all career pathways
<b>Category 2:</b> Teaching	all career pathways
<b>Category 3:</b> Knowledge of the Discipline	all career pathways
<b>Category 4:</b> Research and Scholarly Work	scientists, scientist-administrators, some clinician-scientists, some educators
<b>Category 5.1a:</b> Practice of Professional Skills: Clinical Practice	clinician-teachers, clinician-administrators, some clinician-educators, some clinician-scientists
<b>Category 5.2a:</b> Scholarly Work associated with Clinical Practice	clinician-teachers, clinician-administrators, some clinician-educators, some clinician-scientists
<b>Category 5.1b:</b> Practice of Professional Skills: Educational Practice	teachers, some educators, some clinician-educators
<b>Category 5.2b:</b> Scholarly Work associated with Educational Practice	teachers, some educators, some clinician-educators
<b>Category 6:</b> Administration	all career pathways
<b>Category 7:</b> Public Service and Service to Professional Bodies	all career pathways for promotion; none for tenure as assistant professor
* further explanations for career pathway choices and applicable evaluation categories are provided for Categories 4 and 5 in those sections of these standards	

**NOTE:**

For uniform application of the standards, departments are expected to decide upon the minimal expected requirements at each level of evaluation for all faculty in the department, providing the rationale for their decisions to the College Review Committee. Faculty are not expected to demonstrate all of the typical activities and progress indicators included as examples in the evaluation tables in these standards, unless otherwise specified.

For faculty members with assigned duties and allocated time dedicated to specific activities (e.g. research, teaching, administration, clinical activity), the allocated Percentage Full Time Equivalent (% FTE) for each activity should be clearly stated on the candidate's cover page.

**D. STANDARDS FOR EACH CATEGORY OF EVALUATION**

The minimum acceptable standards for tenure and promotion in the College of Medicine are described below.

**1. ACADEMIC CREDENTIALS**

To be appointed to faculty in the CoM, individuals must have a PhD and/or MD, and/or a comparable degree from a recognized university as minimum academic credentials. Only in special circumstances will exceptions be made. While faculty seeking promotion or tenure must meet these minimum credentialing standards, additional required credentials for appointment are determined by the departments in consultation with the Dean, and may vary by department and chosen career pathway.

**2. TEACHING ABILITY AND PERFORMANCE**

As indicated in Part C, above, all college faculty seeking promotion or tenure should participate in at least some teaching activity. Teaching responsibilities are determined at the time of appointment or thereafter at each periodic academic review, in discussion with the Department Head as part of the assignment of duties or negotiated academic deliverables. It is not expected that all faculty must be involved in all of the teaching roles listed in Table II of the university standards, but only those roles set out for that faculty member in discussion with the Department Head or as determined according to applicable university processes, including the assignment of duties. The list of teaching examples provided in Table B is not necessarily exhaustive. Department Heads must remain mindful of achieving a balance of activities that, in total, facilitates rather than impedes progress towards promotion.

To be granted tenure (if applicable) or promoted, there must be compelling evidence of consistent improvement in teaching beyond that initially expected following appointment.

All faculty with teaching responsibilities are expected to pursue teaching excellence by at least once-yearly attendance at an appropriate course or workshop designed to improve their teaching abilities.

Teaching duties in the CoM range from supervision of graduate students and postdoctoral fellows to the teaching of undergraduate students and postgraduate medical residents. Teaching may include participation in undergraduate and graduate courses, teaching and/or supervision of students performing clinical work, teaching courses in certificate programs (e.g. ACLS, PALS, ALARM, ATLS), inter-professional teaching, teaching in courses provided by Continuing Medical Education (CME), teaching at a distance and teaching in faculty development workshops.

The college recognizes that the volume of teaching performed will vary considerably from one individual to the next and will be an important factor for faculty to consider when identifying the career pathway(s) under which they will be evaluated for promotion or tenure. Because of inter-department variability, the acceptable amount of teaching with respect to tenure or promotion will be discussed as the case is being evaluated, and in accordance with departmental norms and agreed upon assignment of duties.

To meet the standard for teaching in the CoM, peer evaluations and student evaluations must be collected over the entire period being evaluated and must be satisfactory or better. While departments and/or the college may have processes in place to assist with this requirement, individual faculty share responsibility for ensuring that teaching evaluations occur.

Table B is to be used to evaluate teaching participation and teaching quality. Scholarly work associated with teaching will be evaluated separately, in Categories 4, 5.2a, or 5.2b, as applicable.

**Note:** Not all of the teaching requirements, activities and progress indicators shown in Table B, below, will be applicable for each faculty seeking tenure (if applicable) or promotion: departmental norms for teaching breadth and volume, along with the faculty's chosen career pathway(s) will be used by Department Heads and tenure/promotions committees in determining which of the listed examples are of primary importance and relevance.

#### TABLE B application:

Level 1: for use in evaluating teaching at the Assistant Professor level, renewal of probation as Assistant Professor (if applicable), or tenure as Assistant Professor (if applicable)

Level 2: for use in evaluating tenure as (if applicable) or promotion to Associate Professor

Level 3: for use in evaluating tenure as (if applicable) or promotion to Professor

**TABLE B: Evaluation of Teaching****Expectations for all levels of evaluation:**

Using student or peer teaching evaluations, faculty will provide evidence of:

- continuous improvement of teaching
- willingness to accept feedback
- being well prepared for teaching
- being well organized while teaching
- using course materials appropriate for learner level
- ability to communicate well with learners
- incorporating scholarly work/recent research findings into all teaching activities
- use of innovative teaching methods or technologies where applicable
- willingness to provide teaching to all levels of learners, as requested or assigned
- being a good role model or mentor for learners
- being respected by learners, as a teacher
- providing both formative and summative feedback to learners
- incorporating peer and student feedback into teaching practices
- fair and thorough evaluation of student performance, as per course director/organizer commentary
- using up-to-date and curriculum-relevant teaching material, as per course director/organizer commentary

**Typical Activities and Progress Indicators**

Level 1	Level 2	Level 3
<p><b>Required:</b> All of the following, as applicable:</p> <ul style="list-style-type: none"> <li>• teaching in undergraduate or graduate courses as assigned</li> <li>• advising or supervising graduate students and/or postdoctoral fellows</li> </ul> <p><b>For clinical teaching, at least 3 of the following:</b></p> <ul style="list-style-type: none"> <li>• small-group leader, co-leader or facilitation</li> <li>• teaching on ward rounds in any clinical setting (e.g. hospital, nursing homes)</li> <li>• teaching at inpatient or ambulatory care clinics in hospitals or health centres</li> <li>• emergency room teaching</li> <li>• operating room teaching</li> <li>• teaching provided while on-call, any setting</li> </ul>	<p><b>Required:</b> All applicable Level 1 requirements, plus:</p> <p><b>For clinical teaching, at least 3 of the following:</b></p> <ul style="list-style-type: none"> <li>• regular teaching for pre-clerkship students, clinical clerks, or residents</li> <li>• teaching at local (department, college, health authority) CME events</li> <li>• occasional teaching as content expert at local faculty development events</li> <li>• teaching in group clinical education (e.g. grand rounds, mortality rounds, sign-in or sign-out rounds)</li> </ul>	<p><b>Required:</b> All applicable Level 1 and 2 requirements, plus:</p> <p><b>For clinical teaching, at least 3 of the following:</b></p> <ul style="list-style-type: none"> <li>• teaching as course coordinator/leader, main instructor or frequent contributor in UG or PG event-based teaching (e.g. classroom, small-group, tutorial, academic half-day)</li> <li>• frequent participant in UG event-based teaching</li> <li>• frequent teaching as content expert at faculty development events</li> </ul>

<ul style="list-style-type: none"> <li>• teaching provided in clinical laboratories</li> <li>• communications skills teaching</li> <li>• clinical skills teaching for pre-clerkship students</li> <li>• other event-based teaching (e.g. lectures, seminars, tutorials, academic half-days)</li> </ul>	<ul style="list-style-type: none"> <li>• occasional participant in PG event-based teaching (e.g. academic half-days)</li> <li>• occasional participant in UG event-based teaching (e.g. classroom lectures, small-group facilitation, tutorials)</li> <li>• participation in remedial teaching, as requested by UG or PG offices</li> <li>• increased level of participation in department-based teaching, as applicable</li> <li>• health care teaching using social media or other digital platforms – must be validated or authorized by department or college academic administrators</li> <li>• regular participant in faculty development focussing on teaching improvement</li> <li>• volunteering to teach without being requested (provide examples)</li> <li>• recipient of teaching awards or other special recognition as a teacher*</li> </ul>	<ul style="list-style-type: none"> <li>• identification as local faculty development leader at DME sites</li> <li>• invited teaching at provincial, national or international CME events or conferences</li> <li>• invited teaching at interdisciplinary continuing education or clinical in-service events</li> <li>• participation in organized counseling or mentorship programs for students</li> <li>• frequent teaching of multiple levels of learners</li> <li>• health care teaching for students, patients, institutions and peers using social media and/or other digital platforms – must be validated or authorized by department or college academic administrators</li> <li>• recipient of teaching awards or other special recognition as a teacher*</li> </ul>
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\*Awards are not a requirement for consideration of tenure or promotion; however, receipt of an award at any level is an indicator of excellence.

### 3. KNOWLEDGE OF THE DISCIPLINE AND FIELD OF SPECIALIZATION

In the College of Medicine, the term ‘knowledge of the discipline’ refers to the knowledge of a field of specialization within health care disciplines and/or health care research-related disciplines.

It is not the purpose of this evaluation category to duplicate the curriculum vitae or the information that will be summarized in Categories 4 or 5. Instead, faculty are asked to submit a list of examples of work-related activities, contributions and collegial recognition that serve to illustrate and confirm knowledge of the discipline and chosen field of specialization. Where relevant the field(s) of specialization should be clearly identified. It is recognized that there will be considerable overlap amongst the groups of examples shown below and that some examples will be noted again in Categories 6 and 7.

#### TABLE C application:

In Category 3, the acceptable and required standard will be the same for each level of evaluation (renewal of probation or tenure at any rank, if applicable, and for promotion to associate professor or professor). Bulleted lists are provided as examples only.

**TABLE C: Evaluation of Knowledge of the Discipline****Clinician pathways: examples demonstrating recognition within the clinical community of personal clinical knowledge and expertise:**

- participation on clinical guideline committees or clinical quality improvement programs or initiatives
- participation on clinical care delivery initiatives, quality assurance committees, or other clinical service committees
- participation in developing new clinical programs, therapies, treatment methods, investigations
- leadership and supervisory roles related to the organization or provision of clinical services
- clinically-related presentations, lectures, seminars or in-services provided to colleagues
- provision of clinical consultation services, or consultations to governments or health authorities
- participation as a committee member or chair for clinical professional bodies or associations

**Scientist pathways: examples demonstrating recognition within the scientific community of personal scientific knowledge and expertise:**

- participation on research grant review committees for any agency, institution or other body
- participation as a committee member or chair for scientific professional bodies or associations
- participation as a leader in interdisciplinary scientific and research collaboration
- provision of scientific expertise or opinion to government, industry or the media
- membership on editorial boards for publishers of scientific journals, books, etc.
- member, chair or supervisor on research advisory committees for graduate or postgraduate students, or postdoctoral fellows

**Education/Teacher pathways: examples demonstrating recognition within the educator/teacher community of personal educational or teaching knowledge and expertise:**

- participation in or leadership of departmental, college or university educational committees
- membership on editorial boards for publishers of educational journals, books, etc.
- leadership or supervisory roles related to the provision or development of educational programming
- participation on local or national medical education committees, boards or organizations
- participation on local or national medical education examination, evaluation or assessment committees
- member, chair or supervisor on research advisory committees for graduate or postgraduate students, or postdoctoral fellows

In addition to providing the information outlined above, faculty are encouraged to provide an open seminar to departmental and college colleagues prior to case file review. This seminar will focus on the chosen field of specialization and it will emphasize, in particular, the ways in which that field of specialization has relevance for and adds value to the applicable discipline. Peer evaluations of the seminar must be submitted with the case file.

## **PREAMBLE TO CATEGORIES 4 AND 5:**

In the College of Medicine, scholarly work will be evaluated under either Category 4 or under one of two Category 5 subcategories (5.2a or 5.2b). The determination of which category or subcategory is used will be made by the Department Head in consultation with the faculty being evaluated, at the time tenure or promotion is requested, and will be consistent with the faculty's chosen career pathway. Any changes in career pathway or choices to be evaluated using more than one career pathway must be supported by the Department Head and the Dean prior to the case file being assembled.

Category 4 is usually used for evaluating faculty in the scientist or scientist-administrator career pathways. Subcategories 5.2a or 5.2b are usually used for evaluating faculty in the clinician-teacher, clinician-educator, clinician-scientist, clinician-administrator, teacher or educator career pathways. With respect to scholarly work, faculty being evaluated under Category 4 will not be evaluated using Category 5. Clinician-scientists and Educators may choose to have their scholarly work evaluated in Category 4; however, their professional practices will be evaluated under Category 5.1a or 5.1b.

## **4. RESEARCH AND SCHOLARLY WORK**

For faculty being evaluated using Category 4, the College of Medicine requires evidence of an active research program and/or scholarly work, combined with the ability to obtain adequate research funding.

An ongoing record of peer-reviewed publications is required. The publication venues and formats must be acceptable to the departmental renewal and tenure or promotions committees. Departments should be in agreement regarding appropriate journals, digital platforms and novel or innovative venues for their discipline and specialty/specialties, for use by departmental review committees in evaluating case files. This information should be regularly communicated to department members.

Research for consideration must have been undertaken following appointment at the University of Saskatchewan and during the period under review. The quality of evaluated publications and relevant metrics (where applicable), will be taken into consideration. Table D is to be used for evaluating research contributions. The recognition of discipline-specific expertise one receives as a result of one's research activities is evaluated under Category 3: Knowledge of the Discipline.

### TABLE D application:

Level 1: for use in renewal of probation as Assistant Professor (if applicable), or tenure as Assistant Professor (if applicable)

Level 2: for use in evaluating tenure as (if applicable) or promotion to Associate Professor

Level 3: for use in evaluating tenure as (if applicable) or promotion to Professor

<b>TABLE D: Evaluation of Research</b>		
<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>
<ul style="list-style-type: none"> <li>research for level 1 must be independent of former supervisors</li> </ul>	<ul style="list-style-type: none"> <li>research for level 2 must be independent of former supervisors</li> </ul>	
<p><b>Required:</b></p> <p><b>For renewal of probation:</b> Development of a program of independent research with identifiable area(s) of major focus</p> <ul style="list-style-type: none"> <li>funding obtained through competition, from peer-reviewed local, provincial, or national sources to support the research program</li> <li>evidence of peer-reviewed publications, published, submitted or under review</li> </ul> <p><b>For tenure:</b> Establishment of a productive independent research program according to the following criteria:</p> <ul style="list-style-type: none"> <li>corresponding author of at least one peer-reviewed publication on average per year</li> <li>publications in alternate venues (e.g. peer-reviewed review articles, clinical reports, technical reports) will also be taken into consideration</li> <li>supervision provided to graduate student(s) and/or other senior trainees</li> <li>regular presentation at regional, national or international scientific meetings</li> <li>funding obtained through competition, from peer-reviewed local, provincial, or national sources to support the research program</li> </ul>	<p><b>Required:</b></p> <p>Growth of a productive research program that is nationally recognized according to the following criteria:</p> <ul style="list-style-type: none"> <li>senior or corresponding author of two peer-reviewed publications per year, on average</li> <li>publications in alternate venues (e.g. peer-reviewed review articles, clinical reports, technical reports) will also be taken into consideration</li> <li>annual presentation at external regional, national or international scientific meeting</li> <li>funding obtained from competitive, peer-reviewed national or international sources as principal or co-principal investigator</li> <li>primary supervision of graduate students and/or senior trainees</li> <li>involvement as a reviewer in at least one regional or national peer-review program</li> </ul>	<p><b>Required:</b></p> <p>Lead a nationally and internationally recognized research and HQP training program according to the following criteria:</p> <ul style="list-style-type: none"> <li>established individual or collaborative research program as principal investigator or co-principal investigator as demonstrated through national or international funding stability</li> <li>corresponding author on at least two peer-reviewed publications per year on average and co-author of additional collaborative peer-reviewed publications</li> <li>publications in alternate venues (e.g. peer-reviewed review articles, clinical reports, technical reports) will also be taken into consideration.</li> <li>also taken into consideration will be involvement as a reviewer for external faculty case files for promotion or tenure or service as an external thesis examiner</li> <li>annual presentation as an invited/selected speaker at national or international scientific meetings, or other universities, or similar institutes</li> <li>primary supervisor of graduate students and/or senior trainees</li> <li>provision of service on national or international grant review panels or leadership of national professional societies, or team research, organization</li> </ul>

		of conferences, symposia or meetings
<ul style="list-style-type: none"> <li>for tenure at this rank, if applicable, three satisfactory external reviews provided by senior colleagues in other comparable institutions, within the same or another relevant discipline</li> </ul>	<ul style="list-style-type: none"> <li>for tenure at this rank, if applicable, three satisfactory external reviews provided by senior colleagues in other comparable institutions, within the same or another relevant discipline</li> </ul>	<ul style="list-style-type: none"> <li>for tenure at this rank, if applicable, or for promotion to professor, three satisfactory external reviews provided by senior colleagues in other comparable institutions, within the same or another relevant discipline</li> </ul>

**5. PRACTICE OF PROFESSIONAL SKILLS**

Faculty with professional practices (clinical or educational) will be evaluated in subcategories 5.1a or 5.1b. Their scholarly work is evaluated under either Category 4 or under one of two Category 5 subcategories (5.2a or 5.2b). The usual choice for Clinical Practice faculty is 5.2a. Occasionally, Clinical Practice faculty may also request evaluation of work done in subcategory 5.2b.

For Clinical Practice faculty choosing to be evaluated under Category 4, neither 5.2a nor 5.2b are applicable. A choice to be evaluated in Category 4 requires prior discussion and approval from the Department Head and Dean.

Scholarly work performed by Educational Practice faculty (5.1b) will usually be evaluated using subcategory 5.2b.

**5.1a Clinical Practice:**

Clinical practice involves investigation, diagnostics and therapeutic/treatment decision-making in the provision of overall care and management of patients, families, communities and populations. Clinician faculty will be personally responsible for patient care as the MRP (most responsible physician) and/or the consulting clinician and/or the clinician responsible for producing or interpreting test results. The volume of clinical service provided will vary with the chosen career pathway, and also within each clinical pathway. A satisfactory volume of clinical service, sufficient for evaluation under this subcategory, will be determined by the Department Head in discussion with the faculty. Satisfaction of the requirements for this subcategory are the same for all levels of evaluation.

TABLE E Application:

In Subcategory 5.1a, the acceptable and required standard will be the same for all CoM clinical faculty, at all levels of evaluation (renewal of probation and tenure at any rank, if applicable, and promotion to associate professor or professor).

**TABLE E (5.1a): Evaluation of Clinical Practice**

**Note:** Relevant documentation for each bullet point, below, to be included with case file

**Required:**

- current appointment / privileges to health jurisdiction's medical / clinical staff
- current Regular license to practice medicine in Saskatchewan
- current Certificate of Professional Conduct, or equivalent, from applicable provincial licensing/regulatory body
- current record of participation in required continuing professional learning activities (e.g. CFPC Mainpro+, RCPSC MOC)
- three confidential letters of recommendation, solicited by the Department Head, from local colleagues having regular clinical contact with the faculty being evaluated, addressing clinical competence (see first 4 requirements in Level 1, Table F) and professional collegiality
- a statement of recommendation from the Department Head or designated committee, addressing all of the following requirements:
  - confirmation of clinical competence, to the extent known through reputation
  - confirmation of timely and accurate clinical record-keeping, provision of expert advice, to the extent known
  - absence of interprofessional or interdisciplinary issues negatively affecting clinical performance
  - skilled communication in the clinical context (patients, colleagues, learners, other health professionals, staff)
  - willingness to assume responsibility for fair share of clinical workload, given other professional commitments
  - willingness to accept and perform clinical duties out of regular work hours or in emergencies, as applicable
  - willingness to participate in health jurisdiction- or clinical department-required meetings, audits and activities
  - mindful and efficient use of health care resources; good stewardship of resources

**5.2a Scholarly Work associated with Clinical Practice:**

Clinical faculty seeking promotion are expected to adopt a scholarly approach in the practice of their professional skills. The CoM recognizes and values the scholarly work undertaken by clinical faculty in conjunction with the performance of clinical duties and clinical teaching. While participation in original research is encouraged and supported, the CoM recognizes that the mindful employment, translation and teaching of new scientific knowledge in the clinical context merits acknowledgement and support, and qualifies as scholarly work. Therefore, scholarly contributions evaluated using this subcategory include those made through clinical teaching and those made through scholarly involvement in the organization and delivery of clinical services, as well as those made through participation in clinical or discipline-specific scientific research.

**TABLE F application:**

Level 1: for use in renewal of probation as Assistant Professor (if applicable), or tenure as Assistant Professor (if applicable)

Level 2: for use in evaluating tenure as (if applicable) or promotion to Associate Professor

Level 3: for use in evaluating tenure as (if applicable) or promotion to Professor

**TABLE F (5.2a): Evaluation of Scholarly Work associated with Clinical Practice**

Level 1	Level 2	Level 3
<p><b>Required:</b></p> <ul style="list-style-type: none"> <li>• consistent use of evidence-based clinical decision-making (colleagues' letters of recommendation – see Table E, above)</li> <li>• consistent use of clinical practice guidelines and current scientific research in teaching (as confirmed by teaching evaluations and colleagues' letters of recommendation - see Table E, above)</li> <li>• demonstration of willingness to seek clinical and instructional guidance from established senior academics (colleagues' letters of recommendation – see Table E, above)</li> <li>• consistent use of current evidence while participating in analysis and discussion of cases and conditions (as confirmed by teaching evaluations and colleagues' letters of recommendation - see Table E, above)</li> </ul> <p><b>And, at least three of:</b></p> <ul style="list-style-type: none"> <li>• participation in faculty development events centered on effective knowledge translation for learners in the clinical workplace</li> <li>• participation in quality improvement activities in clinical care that result in new evidence-based standards of care or local/regional best practices</li> <li>• participation in self-improvement or CPL/CME activities involving critical appraisal of the medical literature and subsequent clinical practice renewal</li> <li>• participation in the organization of or</li> </ul>	<p><b>Required:</b></p> <ul style="list-style-type: none"> <li>• all Level 1 requirements</li> <li>• during review period, principal investigator or corresponding author of one or more peer-reviewed publications (e.g. case review, analytic study, book chapter, original research, webinars, podcasts, videos or other department-approved digital conveyance)</li> </ul> <p><b>And, at least four of:</b></p> <ul style="list-style-type: none"> <li>• participation on organizing committee for clinical/scientific conference</li> <li>• participation on review committee for poster selection for clinical/scientific conference</li> <li>• poster presentation or lecture at meeting or conference with published abstracts</li> <li>• presentation of latest evidence or current best practices as invited expert at local/provincial clinical/scientific meeting or conference</li> <li>• coauthor of technical report or clinical report or tool for improving health care delivery in local health jurisdiction</li> <li>• contributor of clinical expertise to curriculum, course or lecture development</li> <li>• contributing author in clinical trial(s) resulting in peer-reviewed publication(s)</li> <li>• participation as a reviewer of manuscript submissions for a peer-reviewed clinical/scientific journal</li> <li>• regular participation in group-based teaching (e.g. grand rounds, academic half-days, undergraduate courses, faculty development events)</li> </ul>	<p><b>Required:</b></p> <ul style="list-style-type: none"> <li>• all Level 1 and 2 requirements</li> </ul> <p><b>And, at least four of:</b></p> <ul style="list-style-type: none"> <li>• presentation of latest evidence or current best practices as invited expert at national or international clinical/scientific meeting or conference</li> <li>• coauthor or principal investigator and corresponding author of peer-reviewed publication, clinically relevant to the discipline</li> <li>• contributing author of book chapter</li> <li>• publication of peer-reviewed webinars, podcasts, videos, or other department-approved digital conveyances for teaching purposes, directed to any learner group</li> <li>• increasing contribution to curricular development through course development, manual development, etc.</li> <li>• member, chair or supervisor on research advisory committee for postgraduate students or postdoctoral fellows, based on expertise in field of specialization</li> <li>• invited provider of scientific or clinical care advice to government or major health care organizations</li> <li>• invited or elected leadership roles within national or international academic organizations (e.g. CFPC, RCPSC) due to recognized clinical expertise in an academic setting</li> <li>• participation on an examination committee for a national academic organization</li> <li>• recipient of peer-reviewed research funding for research</li> </ul>

<p>maintenance of standards for multidisciplinary care delivery</p> <ul style="list-style-type: none"> <li>• demonstrates willingness to participate in research through the recruitment of patient subjects in own practice, if requested</li> <li>• contributes to the preparation of papers for publication, webinars, podcasts, videos or other digital conveyances, if requested</li> </ul>	<ul style="list-style-type: none"> <li>• supervisor or advisor for medical student or resident research project(s)</li> <li>• committee member, chair or supervisor for research advisory committee for graduate student(s) or postdoctoral fellow(s), based on expertise in clinical field of specialization</li> <li>• applicant for research funding from any funding agency, with personal involvement in writing the grant request</li> <li>• participates in the enhancement of clinical systems and services that improve the safety, efficiency and clinical outcomes within the division or department</li> <li>• contribution to curricular development through course development, manual development, etc.</li> </ul>	<p>or innovation in clinical education</p> <ul style="list-style-type: none"> <li>• recipient of industry sponsorship for research, including clinical trials</li> <li>• participation as a clinical member of a research cluster or interdisciplinary research team</li> <li>• invitation for visiting professorship</li> <li>• develop or apply and teach new techniques or new clinical approaches to patient care</li> <li>• undertake and/or complete an advanced degree in research</li> <li>• increasing contribution to curricular development through course development, manual development, etc.</li> </ul>
<ul style="list-style-type: none"> <li>• for tenure at this rank, if applicable, three satisfactory external reviews provided by senior colleagues in other comparable institutions, within the same or another relevant discipline</li> </ul>	<ul style="list-style-type: none"> <li>• for tenure at this rank, if applicable, three satisfactory external reviews provided by senior colleagues in other comparable institutions, within the same or another relevant discipline</li> </ul>	<ul style="list-style-type: none"> <li>• for tenure at this rank, if applicable, or for promotion to professor, three satisfactory external reviews provided by senior colleagues in other comparable institutions, within the same or another relevant discipline</li> </ul>

**5.1b Educational Practice:**

Educational practice is defined as program and curriculum design, development, implementation and evaluation; educational program administration and leadership; and faculty development (such as the teaching/mentoring of others in these skills). Educational practice applies to faculty members on the educator and teacher pathways, and possibly the clinician-educator pathway.

TABLE G application:

Level 1: for use in renewal of probation as Assistant Professor (if applicable), or tenure as Assistant Professor (if applicable)

Level 2: for use in evaluating tenure as (if applicable) or promotion to Associate Professor

Level 3: for use in evaluating tenure as (if applicable) or promotion to Professor

<b>TABLE G (5.1b): Evaluation of Educational Practice</b>		
<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>
<p><b>Required:</b></p> <ul style="list-style-type: none"> <li>• contributes to program and curriculum design and development (part of a course/module /rotation/CME event development team, etc.)</li> <li>• participates in leadership activities at introductory levels (i.e. member of curriculum sub-committee, Residency Program Committee, CME advisory or program committee, etc.)</li> <li>• contributes to faculty development* (co-facilitates or helps in development, etc.)</li> <li>• participates in at least 2 professional development activities per year, in medical education</li> </ul>	<p><b>Required:</b></p> <ul style="list-style-type: none"> <li>• all Level 1 requirements</li> <li>• leads program or curriculum design or development (at any level of medical education including faculty development)</li> <li>• takes leadership roles as appropriate (e.g. chair of curricular sub-committee, ad hoc curricular committee, module lead, etc.) at local and regional/ national level</li> <li>• primary facilitator/moderator for workshops and other faculty development activities at local and national levels</li> <li>• mentors other educators and teachers</li> </ul>	<p><b>Required:</b></p> <ul style="list-style-type: none"> <li>• all Level 1 and 2 requirements</li> <li>• contributes to program or curriculum design and development at a regional/national/international level. (e.g. AFMC network, CFPC, RCPSC, MCC, CACMS, consultant/external reviewer, etc.)</li> <li>• takes leadership role at the national/international level (e.g. chief or section editor of journal, chair of national medical education group or committee, etc.)</li> <li>• contributes to the development and improvement of collegial mentoring processes and content</li> </ul>

\* For some, faculty development may become their venue for teaching as in Category 2.

## **5.2b Scholarly Work associated with Educational Practice:**

### TABLE H application:

Level 1: for use in renewal of probation as Assistant Professor (if applicable), or tenure as Assistant Professor (if applicable)

Level 2: for use in evaluating tenure as (if applicable) or promotion to Associate Professor

Level 3: for use in evaluating tenure as (if applicable) or promotion to Professor

**TABLE H (5.2b): Evaluation of Scholarly Work associated with Educational Practice**

Level 1	Level 2	Level 3
<p><b>Required:</b> Clear documentation of consistent and appropriate engagement in educational scholarship* as evidenced through:</p> <ul style="list-style-type: none"> <li>• development/co-development of educational resources (includes creation of instructional documents, educational policies or technical reports, computer programs, A/V resources, innovation, invention), reviewed, implemented, adopted, and/or disseminated at a <u>local level</u></li> <li>• responsiveness to constructive feedback from course/workshop evaluations</li> <li>• a minimum of 3 authored or co-authored peer-reviewed publications in medical education (e.g. journals or peer-reviewed repositories)</li> <li>• obtains funding as principal investigator or collaborator for scholarship, research, or innovation in medical education</li> <li>• presentation of medical education scholarship at local/regional conferences</li> <li>• documentation of learner or peer mentoring (in any of the medical educator domains)</li> <li>• contributes as peer-reviewer (e.g. journal, scholarly conference or research funding competition) at local or regional level</li> <li>• award related to medical education scholarship**</li> </ul>	<p><b>Required:</b> Clear documentation of consistent and appropriate engagement in educational scholarship* as evidenced through:</p> <ul style="list-style-type: none"> <li>• curriculum development, innovation, research, or evaluation as a lead/collaborator or consultant at a <i>regional</i> or <i>national</i> level</li> <li>• one peer-reviewed publication as senior author per year, on average, in medical education (e.g. journals or peer-reviewed repositories)</li> <li>• obtains external funding as principal or co-principal investigator or co-applicant for scholarship, research, or innovation in medical education</li> <li>• presentation of medical education scholarship at national conferences</li> <li>• supervision of undergraduate and/or graduate students, as appropriate, in medical education scholarship</li> <li>• documentation of success of learner and/or peer mentoring (e.g. mentee awards, high-level success/recognition that can be linked to mentoring role)</li> <li>• regular peer-review (e.g. journal, scholarly conference, or research funding competition) at local, regional or national level</li> <li>• if invited, contributes as member on research advisory committee for postgraduate students or postdoctoral fellows, based on expertise in field of educational specialization</li> <li>• award related to medical education scholarship**</li> </ul>	<p><b>Required:</b> Clear documentation of consistent and appropriate engagement in educational scholarship* as evidenced through:</p> <ul style="list-style-type: none"> <li>• curriculum development, innovation, research, or evaluation as a lead/collaborator or consultant at a <i>national</i> or <i>international</i> level</li> <li>• more than one peer-reviewed publication as senior author per year, on average, in medical education (e.g. journals or peer-reviewed repositories)</li> <li>• leadership in education scholarship (e.g. journal editorial board, national committee or organization, conference planning committee, grant review committee) at any level</li> <li>• supervision of undergraduate and/or graduate students, as appropriate, in medical education scholarship</li> <li>• contributes as chair or member on research advisory committee for postgraduate students or postdoctoral fellows, based on expertise in field of educational specialization</li> <li>• award related to medical education scholarship**</li> </ul>

<ul style="list-style-type: none"> <li>• for tenure at this rank, if applicable, three satisfactory external reviews provided by senior colleagues in other comparable institutions, within the same or another relevant discipline</li> </ul>	<ul style="list-style-type: none"> <li>• for tenure at this rank, if applicable, three satisfactory external reviews provided by senior colleagues in other comparable institutions, within the same or another relevant discipline</li> </ul>	<ul style="list-style-type: none"> <li>• for tenure at this rank, if applicable, or for promotion to professor, three satisfactory external reviews provided by senior colleagues in other comparable institutions, within the same or another relevant discipline</li> </ul>
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\*References and rationale available at: [\(insert website link here\)](#)

\*\*Awards are not a requirement for consideration of tenure or promotion; however, receipt of an award at any level is an indicator of excellence.

## 6. CONTRIBUTIONS TO THE ADMINISTRATIVE RESPONSIBILITIES OF THE DEPARTMENT, COLLEGE, UNIVERSITY OR HEALTH AUTHORITY

Faculty in the College of Medicine will be evaluated only in part (a) of this category (Administration). Although extension work (service to a community outside the university) is a valued contribution, many college faculty provide such services as part of their clinical activities, while others provide these services as recognized experts in a particular scientific field. Hence, their contributions will have been noted in earlier evaluation categories (Categories 2 – 5) or will be noted as a public service in Category 7. (Documentation of these activities need not be duplicated if previously evaluated or if they will be evaluated in Category 7, but their location in the file can be referenced).

Similarly, many faculty are involved in medical or academic administrative work that is more accurately classified as contributions to external academic or professional organizations (Category 7). Again, these activities should not be recorded and evaluated in this category.

Departmental tenure and promotions committees in the College of Medicine will be responsible for determining whether faculty seeking tenure (if applicable) or promotion have met the university's requirement regarding carrying one's 'share of administrative work.' While the amount of work constituting a 'fair share' will naturally vary from department to department and from year to year, at least some administrative work is required from any faculty being evaluated in this category. In assigning administrative duties within departments and especially with respect to more junior faculty, Department Heads must remain mindful of achieving a balance of activities that, in total, facilitates rather than impedes progress towards promotion.

Faculty in the clinician-administrator or scientist-administrator pathways must provide documentation of satisfactory performance such as leadership survey results, annual performance feedback summaries, letters of support from senior colleagues, university or health authority administrators, or other representative assessments of administrative productivity and quality. Additionally, clinician-administrators and scientist-administrators are expected to supply an up-to-date administrative dossier. The file should describe managerial contributions to sustained or new programming (academic and/or clinical), as applicable.

Note: the term 'academic' is used in the following table to signify administrative work primarily related to research or education. The term 'clinical' signifies administrative work primarily related to patient care. Some activities listed in the main organizational categories in Table I involve a large degree of academic/clinical overlap. 'Contributions to' is taken to include both chairing committees and membership on committees, as applicable.

TABLE I application:

In Category 6, the acceptable and required standard will be the same for all CoM clinical faculty, at all levels of evaluation, with following 2 exceptions:

- 1) evaluation in this category is NOT REQUIRED for faculty seeking renewal of probation or tenure as Assistant Professor
- 2) clinician-administrators and scientist-administrators are expected to make contributions in senior leadership roles

<b>TABLE I: Evaluation of Administrative Contributions to the Department, College, University or Health Authority</b>
Typical Administrative Categories and Activities (list not exhaustive)
<p><b>Departmental Administrative Work:</b></p> <ul style="list-style-type: none"> <li>• Contributions to any departmental academic committee</li> <li>• Contributions to any departmental academic task force or project management team</li> <li>• Contributions to any departmental committee, team or project related to departmental operations, restructuring, management, efficiency, quality control</li> <li>• Contributions to academic inter-departmental committees, teams, or projects</li> <li>• Contribution as a Department Head, program director, or other department-based academic or administrative leadership role</li> </ul> <p><b>College Administrative Work:</b></p> <ul style="list-style-type: none"> <li>• Contribution to any college committee as a departmental representative</li> <li>• Contribution to any college committee as a volunteer or following request from the college</li> <li>• Contribution to any college project team, task force, or other college-sanctioned activity requiring ongoing faculty representation</li> <li>• Contribution as a member of Faculty Council and any of its subcommittees</li> <li>• Contribution to accreditation administrative activities</li> <li>• Contribution as director, assistant dean, associate dean, vice dean, dean, or other college-based administrative leadership role</li> </ul>

**University Administrative Work:**

- Contribution as a departmental or college representative on any university committee, project team, task force, or other university-sanctioned activity requiring college or departmental representation
- Contribution to any university committee as a volunteer of following request from the university
- Contribution to any university project team, task force, or other university-sanctioned activity requiring ongoing faculty representation
- Contribution as a member of University Council and any of its subcommittees

**Health Authority Administrative Work:** Note – Clinical administrative work that has already been documented and/or evaluated in Categories 3 or 5 need not be duplicated in this category.

- Contribution to health authority committees, task forces, projects, quality improvement interventions
- Contribution as a health authority-appointed clinical leader, organizer, manager, or supervisor
- Contribution as a departmental, college, or university representative on a health authority committee, task force, project, or ongoing quality improvement intervention
- Contribution to health authority accreditation or credentialing administrative activities

## **7. PUBLIC SERVICE AND CONTRIBUTIONS TO ACADEMIC AND PROFESSIONAL BODIES**

Public service is defined as the provision of professional expertise to the community outside the university. To be recognized in this category, the activities must entail application of expertise associated with the faculty's position in the university or in the academic/clinical setting.

Service to academic, professional or scientific organizations, must go beyond simple membership in the organization and must involve active contribution. If the activities have been documented earlier in the case file and evaluated in Categories 2 – 6, they need not be repeated here but their location in the file can be referenced.

The university standards for promotion require faculty to “demonstrate a willingness to participate” in public service and service to academic, professional or scientific organizations. In the College of Medicine, actual contribution during the review period is required.

TABLE J application:

In Category 7, the acceptable and required standard will be the same for all CoM clinical faculty, at all levels of evaluation, as applicable, with following exception: evaluation in this category is NOT REQUIRED for faculty seeking renewal of probation or tenure as Assistant Professor.

<b>TABLE J: Evaluation of Public Service Contributions and Contributions to Academic and Professional Bodies</b>	
<b>Public Service Activities:</b> (list not exhaustive)	<b>Service to Academic and Professional Bodies:</b> (list not exhaustive)
<ul style="list-style-type: none"> <li>• provision of medical/scientific information in a media interview</li> <li>• provision of written medical/scientific information in contribution to a publication intended for use by the general public</li> <li>• provision of medical/scientific information at the request of a provincial/national government agency or international NGO</li> <li>• membership on the boards or committees of government agencies or NGO's as a contributor of medical/scientific expertise</li> <li>• provision of volunteer medical or scientific services to a charitable or humanitarian organization</li> <li>• provision of volunteer medical supervisory, assessment or diagnostic services to a sports team or organization</li> <li>• provision of public presentations on health or science related topics associated with one's field of expertise</li> <li>• provision of medical/scientific presentations, interactive learning activities, seminars, etc. to a public education body at the primary or secondary educational level</li> <li>• provision of volunteer medical/scientific advice or education to municipal, provincial or national community groups</li> </ul>	<ul style="list-style-type: none"> <li>• scientific publication editor, editorial reviewer, journal manuscript reviewer</li> <li>• member of an editorial board for a peer-reviewed journal or scientific publisher</li> <li>• committee member for a provincial or national or international academic association (e.g. RCPSC, CFPC, AAMC, CAME, AFMC)</li> <li>• lead organizer for a provincial or national professional association's annual or special conference</li> <li>• committee member for a provincial or national professional (clinical) organization (e.g. SMA, CMA, HQC)</li> <li>• participation as a team member on national or international academic or clinical accreditation bodies</li> <li>• contribution as a team member on accreditation preparation committees or accreditation teams external to the CoM</li> </ul>

**E. PROCESS OF EVALUATION**

Faculty are encouraged to provide a well-organized case file and supporting documentation, such that review committees can easily access and evaluate all necessary materials. The case file should be organized in a manner consistent with the categories of evaluation

outlined in these standards, preceded by a letter of self-assessment that is intended to direct the reviewers' attention to the most relevant parts of the file. The major area(s) of focus and emphasis will generally be consistent with the career pathway under which the faculty wishes to be evaluated – this pathway should be identified in the letter of self-assessment. The letter should be a general statement regarding progress in each category; it should not duplicate all of the particulars submitted for each category of the file.

The CV is intended to be a reference document for review committees. Faculty are expected to identify the relevant sections in their CV, as necessary, within each evaluation category so as to direct the attention of the review committee accordingly. Where supporting documentation is available, this should be included in the relevant evaluation category within the case file, but care should be taken, as much as is practical, to avoid duplicating such documentation in other evaluation categories. If the documentation is thought to be relevant in more than one category, its original location in the file can be referenced.

Faculty seeking tenure or promotion are responsible for providing some of the materials for the case file, while other documentation is provided by the Department Head. A final recommendation regarding tenure and/or promotion is provided to the university by the Dean, as chair of the College Review Committee. The table shown below summarizes required information, as applicable, for each category of evaluation.

<b>TABLE K: Case File Check List</b>				
Category		Required Documents	Provided By Faculty	Provided By D. Head
	Case File	<ul style="list-style-type: none"> <li>• Self assessment letter</li> <li>• Curriculum Vitae (format as specified by college or university)</li> </ul>	<ul style="list-style-type: none"> <li>✓</li> <li>✓</li> </ul>	
1	Academic and Professional Credentials	<ul style="list-style-type: none"> <li>• Proof of credentials, if required by Department Head</li> </ul>	<ul style="list-style-type: none"> <li>✓</li> </ul>	
2	Teaching	<ul style="list-style-type: none"> <li>• Written statement on philosophy of teaching</li> <li>• Teaching dossier (optional, but strongly recommended – if no teaching dossier provided, must provide complete summary of all teaching done during review period)</li> <li>• Student evaluations of teaching</li> <li>• Peer evaluations of teaching</li> <li>• Written statements from course coordinators or other course instructors (optional)</li> </ul>	<ul style="list-style-type: none"> <li>✓</li> <li>✓</li> <li>✓</li> <li>✓</li> </ul>	<ul style="list-style-type: none"> <li>✓</li> <li>✓</li> </ul>
3	Knowledge of the Discipline	<ul style="list-style-type: none"> <li>• Proof of activities confirming knowledge of the discipline (letters from chairs or senior administrators, schedules, agendas, invitations to provide expertise, etc.) relevant to examples outlined in Table C, and/or:</li> <li>• Peer evaluations of open seminar presentation</li> </ul>	<ul style="list-style-type: none"> <li>✓</li> </ul>	<ul style="list-style-type: none"> <li>✓</li> <li>and/or</li> <li>✓</li> </ul>

4	Research and Scholarly Work	<ul style="list-style-type: none"> <li>• Statement on program of research, addressing its nature and scope</li> <li>• Relevant sections extracted from CV</li> <li>• Three external assessments for tenure at any rank and for promotion to Professor, as per university requirements</li> </ul>	✓ ✓	✓
5.1a	Practice of Professional Skills: Clinical Practice	<ul style="list-style-type: none"> <li>• Statement on nature and scope of clinical practice</li> <li>• Copies of documents specified in Table E</li> <li>• Three letters of attestation from the faculty's colleagues</li> <li>• Statement of recommendation from the Department Head addressing each of the requirements listed in Table E</li> </ul>	✓ ✓	✓ ✓
5.2a	Scholarly Work associated with Clinical Practice	<ul style="list-style-type: none"> <li>• Letters from at least 3 colleagues addressing factors identified in Table F</li> <li>• Letters from external organizations (e.g. health authority senior administrators) addressing factors identified in Table F (optional)</li> <li>• Identification by faculty of portions of student and peer teaching evaluations relevant to factors identified in Table F</li> <li>• Identification by faculty of portions of teaching dossier relevant to factors identified in Table F</li> <li>• Examples of original teaching materials, developed by the faculty in accordance with current evidence (optional)</li> <li>• Three external assessments for tenure at any rank, if applicable, and for promotion to Professor, as per university requirements</li> </ul>	✓ ✓ ✓ ✓	✓ ✓
5.1b	Practice of Professional Skills: Educational Practice	<ul style="list-style-type: none"> <li>• Statement on nature and scope of educational practice</li> <li>• Peer evaluations addressing factors identified in Table G</li> <li>• Identification by faculty of relevant portions of teaching dossier that document activities identified in Table G</li> <li>• Documentation confirming participation in and assessment of any activities or roles identified in Table G</li> </ul>	✓ ✓ ✓ ✓	
5.2b	Scholarly Work associated with Educational Practice	<ul style="list-style-type: none"> <li>• Examples of original scholarly work products identified in Table H (e.g. learner assessment techniques, course contents)</li> <li>• Identification by faculty of relevant portions of CV documenting requirements identified in Table H</li> <li>• Three external assessments for tenure at any rank, if applicable, and for promotion to Professor, as per university requirements</li> </ul>	✓ ✓	✓
6	Administration	<ul style="list-style-type: none"> <li>• Letter(s) from organizations, health authorities, committee chairs, senior administrators, etc. attesting to quantity and quality of administrative work performed by faculty</li> </ul>	✓ ✓	

		<ul style="list-style-type: none"> <li>• For clinician-administrators or scientist-administrators, letter(s) from senior clinical, college or university administrator colleagues attesting to value and impact of faculty's leadership contributions</li> <li>• Personal leadership evaluations from faculty or staff (optional)</li> </ul>	✓	
7	Public Service and Service to Professional Bodies	<ul style="list-style-type: none"> <li>• Documentation confirming contributions to public service</li> <li>• Documentation confirming contributions to academic and professional bodies</li> </ul>	✓ ✓	
	Case File	<ul style="list-style-type: none"> <li>• Statement of Rationale for departmental review committee decision; contents as per university requirements</li> <li>• Statement of Rationale for college review committee decision (provided by Dean on behalf of CRC), contents as per university requirements</li> </ul>		✓  CRC