

Clinical/Instructional/Practice Faculty Policies and Procedures for Appointment, Evaluation, Retention and Promotion

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The policies and procedures contained in this document are in addition to the basic policies on non-tenure-track faculty outlined in the USC Policies and Procedures Manual, the Faculty Manual. In the event of inconsistency between the school procedures and University procedures, the University policies and the Faculty Manual are considered the final authority.

Clinical/instructional/practice Faculty play a central role in the development and operation of the Arnold School of Public Health and are critical to the successful pursuit of the clinical, teaching, practice, and service goals of the School. This document describes procedures for appointment, evaluation, retention, reappointment, promotion, and management of clinical/instructional/practice Faculty.

A. Clinical/Instructional/Practice Faculty Ranks

Persons with master's or doctoral level training (i.e., Ph.D. or equivalent) may be appointed to the faculty of the Arnold School of Public Health in clinical faculty positions. Such appointments are made when the primary role of the faculty member is to contribute to the clinical, teaching, and community service goals of the School. These faculty members also provide professional service to their Department and/or Center, the School and the University and may be assigned to engage in a variety of different kinds of research/scholarship activity. The clinical faculty track is appropriate for individuals who commit more than 50% effort to clinical, instructional, and/or public health practice¹ activities and administrative responsibilities related to the school or department's educational and outreach mission.

¹ Public health practice is "the strategic, organized, and interdisciplinary application of knowledge, skills, and competencies necessary to perform essential public health services and other activities to improve the population's health." From: Demonstrating Excellence in Academic Public Health Practice. Association of Schools of Public Health. June 1999. Department of Health and Human Services, Health Resources and Services Administration, Bureau of Health Professions, Rockville, MD.

The University's policy on Unclassified Academic Titles is found in policy ACAF 1.06. The official University classification is clinical faculty, but within the Arnold School of Public Health, the title is expanded to Clinical Instructional or Clinical Practice Faculty to reflect the varying responsibilities. A clinical professor of any rank usually possesses the earned doctorate or other terminal degree or equivalent. Appointment is on a temporary, annual or multi-year basis and service under such an appointment is not considered part of a probationary period for tenure consideration. This title can be expanded to Clinical Assistant Professor or Clinical Associate Professor as appropriate to the status of the individual. In addition, clinical faculty titles include instructor, clinical instructor, and senior instructor.

In the Arnold School of Public Health, clinical faculty ranks are as follows:

Clinical Instructor or Instructor - Typically a person with a master's degree with varying amount of experience in the clinical and/or academic/instructional/teaching setting and who has demonstrated excellent clinical skills in a specific area;

Senior Instructor - Typically a person with a master's degree with substantial experience and recognized expertise in the clinical and/or academic/ instruction/clinical setting who demonstrates highly developed clinical skills and/or holds advanced clinical certification in an area of specialization. This person is a professional recognized as possessing exceptional clinical skills in a specific area. In compliance with University policy, a person must hold the rank of (clinical) instructor at USC for a minimum of six consecutive years before being considered for promotion to Senior Instructor.

Clinical Assistant Professor - A full-time (salaried) appointment of a faculty member, who can contribute to selected aspects of a program's mission including instruction, scholarship and service; typically a person with the doctoral degree and serving in his/her initial academic and/or clinical appointment following completion of formal training;

Clinical Associate Professor –A full-time (salaried) appointment of a faculty member, who can contribute to selected aspects of a program's mission including instruction, scholarship and service; typically a person with the doctoral degree and with considerable experience and substantial professional recognition for their academic, instructional, clinical, and/or practice achievements;

Clinical Professor -A full-time (salaried) appointment of a faculty member of substantial professional caliber who can contribute to selected aspects of a program's mission including instruction, scholarship and service; typically a person with the earned doctorate and with national recognition for outstanding academic, instructional, clinical, and/or practice achievements.

The focus of the clinical faculty member's contribution (percentage of effort) will be mutually determined by the faculty member, the program director and/or department chair and

delineated in the letter of appointment. Clinical faculty will be evaluated based upon the success with which this distribution of effort is achieved.

B. Appointment and Hiring Procedures

1. Creation of Clinical Faculty Positions. The process of creating a clinical faculty position may be initiated by a department chair, center director, or the dean of the Arnold School of Public Health. A clinical faculty member must hold an appointment in one of the School's six academic departments. In addition, a clinical faculty member may be appointed to serve in one or more of the School's centers or programs. In all cases creation of a clinical faculty position must be approved by the head of the department and by the dean. Approved requests to create clinical faculty positions are submitted by the dean to the provost and the U.S.C. Division of Human Resources.

Proposals for creation of clinical faculty positions must provide a description of the requested position including a specification of the types of activities to be performed by faculty member. Such proposals should specify the source(s) of the funds that will support the position, whether the position will hold an FTE or be a research grant position, and the distribution of effort (as a percentage of time) in the areas of teaching, scholarship and service.

2. Search Process. Appointment of persons to clinical faculty positions must result from an open and competitive search process that involves the participation of a search committee. A national search is strongly encouraged. University policy ACAF 1.00 provided detailed information about University policies for faculty searches. The chair and faculty of the proposed home academic unit must be involved in the search. Typically, a faculty member from that unit serves on the search committee. But as a minimum, unit faculty will meet with visiting candidates and will be invited to provide comments on each candidate to the search committee. Guidelines for faculty searches are provided in the Arnold School of Public Health Faculty Search Policy and include checklists, sample letters, recruiting sources, and information on Equal Opportunity policies and procedures.

Searches for new and replacement clinical track faculty members should be advertised for no less than five working days and preferably for ten calendar days. When an emergency situation exists and a position must be filled immediately, a clinical faculty member may be placed in the position for no more than one semester (4.5 months).

3. Hiring. Appointment to a clinical faculty position is made by the dean upon recommendation of the appropriate department chair, center director and/or program director who in turn must consider the recommendation of the search committee. The faculty rank of an appointee is determined by the dean with consideration of the rank-specific performance standards described in Section C.1 of this document. Candidates for appointment to clinical faculty positions must present credentials that show a high

probability of future performance that will meet the standards for the rank at which the appointment is sought. Current faculty of the department to which the clinical faculty will be appointed must approve the appointment and rank, regardless of FTE or research grant status. The appointment may have contingencies such as the completion of a degree. Verification of a degree and criminal background check are required by University policy.

4. Appointment and Reappointment. The duration of an appointment to a clinical faculty position is normally one year. The University requires annual review and reappointment of each non-tenure track faculty. Reappointment is based on satisfactory performance and continued availability of funds. However, the creation of a clinical track position may be related to a business plan that outlines salary funding for the position for multiple years, typically three.

Each clinical faculty receives a letter of appointment from the dean. This letter specifies beginning and ending dates of the appointment and the appointed faculty member's distribution of effort (as a percentage of time) in the areas of teaching, scholarship and service. The distribution of effort specified in the annual letter of appointment is used as the basis for evaluating the faculty member's performance achievements.

Under unusual circumstances, a multi-year appointment can be offered. Even in multi-year contracts, the offer letter must state that renewal for each subsequent year is contingent upon satisfactory performance and available funds.

C. **Evaluation, Reappointment, and Termination Guidelines**

1. Performance Evaluation and Associated Criteria. Clinical faculty who seek retention at a particular rank must demonstrate that their record meets the standards for their current rank. Candidates for promotion must demonstrate that they meet the standards for the rank to which they seek to be promoted. Those who are responsible for evaluating the productivity of clinical faculty will examine the evidence of performance and rate the faculty member's performance in the current rank or for promotion to the next rank according to the following criteria:

Candidates being evaluated at the rank of **instructor** or **clinical instructor** must demonstrate consistent effectiveness in the provision of instruction in the context of structured courses and in mentoring students. Student evaluations, peer reviews, and other teaching materials provided by the candidate will provide evidence.

Candidates being evaluated at the rank of or for promotion to **senior instructor** or **senior clinical instructor** must demonstrate consistent effectiveness in the provision of instruction in the context of structured courses, in mentoring students and in the appropriate provision and supervision of clinical service activities, in addition to the University requirement of at least six years of service as instructor or clinical instructor.

Student evaluations, peer reviews, and other teaching materials provided by the candidate will provide evidence.

Candidates being evaluated at the rank of or for promotion to **clinical assistant professor** must confirm receipt of a doctoral degree (promotion only) and demonstrate consistent effectiveness in the provision of instruction in the context of structured courses, in mentoring students, and in the appropriate provision and supervision of clinical service activities (if applicable). Student evaluations, peer reviews, other teaching materials, and documentation of clinical activities will provide evidence.

Candidates being evaluated at the rank of or for promotion to **clinical associate professor** must demonstrate consistent effectiveness in the provision of instruction in the context of structured courses, in mentoring students, in the appropriate provision and supervision of clinical service activities (if applicable), in service to the academic community and to either the profession or the community and in scholarly activities.

Candidates being evaluated at the rank of or for promotion to **clinical professor** must demonstrate consistent effectiveness in the provision of instruction in the context of structured courses, in mentoring students, in the appropriate provision and supervision of clinical service activities (if applicable), in service to the academic community, the profession and the community and in leadership in scholarly activities.

Evidence. Each clinical faculty are evaluated primarily on the basis of productivity. Evidence and standards for productivity, as presented in this document, provide the platform for evaluation of clinical faculty as required in several processes. These include appointment, annual review, reappointment, and promotion. Clinical faculty are expected to provide professional service in the areas of teaching, scholarship and service as outlined in their letter of appointment. Therefore performance in some or all of these areas will be considered in the overall evaluation of the Clinical faculty member. Overall satisfactory performance is required to support a decision to appoint, retain, reappoint, and/or promote clinical faculty.

Listed below are examples of evidence the candidate should provide to document productivity in each of the three areas of research, teaching, and service. The primary sources of evidence are weighted most heavily in the evaluation of a candidate's record. Candidates should provide all relevant information for each type of primary evidence, but it is understood that not all candidates will have activities for each type of evidence. These lists are comprehensive and representative of the type of evidence that should be provided but are not exhaustive; the candidate should include any activities deemed supportive of the respective areas. Specific items of evidence are enumerated for ease of reference; the order does not reflect priority.

Teaching/Clinical Activities

Primary Evidence

1. Student evaluations of the candidate's teaching performance in all classes taught during the period under review.
2. Peer evaluations of a candidate's classroom teaching performance by an evaluator outside the department.
3. Direction of dissertations and theses.
4. Direction of students in practica/projects and independent studies.
5. Service on dissertation and thesis committees and service on examination committees.
6. Development and/or revision of new courses, curriculum, and instructional material and methods.
7. Clinical conferences regarding clinical disorders, evaluation, and management with students
8. Training of students in elements of supervision for use of support personnel
9. Clinical teaching to develop clinical expertise in applied critical thinking in evaluation and management of clinical services

Secondary Evidence

10. Demonstration of activities to improve teaching/clinical effectiveness.
11. Student advisement activities.
12. Any other documentation to support teaching effectiveness.
13. Nomination for and receipt of teaching awards.

Service

Primary Evidence

Service to the Academic Community

1. Service on committees at the University, School and/or department level.
2. Administrative responsibility and function which includes key University, School and/or department administrative positions.

Service to the Profession

3. Leadership roles in professional organizations.
4. Submission and receipt of or participation in training grants/contracts.
5. Editorial and review work for academic publications and research funding agencies.

Service to the Community

6. Service on government committees or task forces.
7. Consulting that is related to the candidate's professional activity.
8. Service to state or local agencies.
9. Development of specialized clinical service to meet needs of specific clinical populations
10. Provision of clinical services to clients to include evaluation, diagnosis, and intervention for the clinical population
11. Administrative and reporting functions necessary to support clinical services
12. Effective communication recognizing the needs, values, cultural background of the client and caregivers
13. Collaboration with other professionals in case management

14. Counseling clients and caregivers regarding clinical issues
15. Implementation of programs to evaluate clinical outcome and program effectiveness and efficiency
16. Adherence to codes of ethics in the provision of professional services

Secondary Evidence

17. Nomination for and receipt of service awards.

Service to the Academic Community

18. Special projects for the University, School and/or the department.
19. Initiating efforts to improve academic or other programs at the University, School and/or department, level.
20. Continuing education programs.

Service to the Profession

21. Assisting students in job placement.
22. Service as session chair or discussant at professional meetings.

Service to the Community

23. Leadership role in not-for-profit organizations.
24. Presentations to community groups.
25. Serving on advisory boards, societies or councils, etc.

Research and Scholarship

Primary Evidence

1. Publication of primary research in peer reviewed research journals as lead author or senior author with student lead author.
2. Solicitation and receipt of competitive research grants or contracts as principal investigator, co-principal investigator, or significant participant.
3. Publication of data-based and/or methodological research in peer reviewed research journals as support author. Provide brief information about contribution.
4. Involvement in clinical research activities including single case design, innovative procedures, and support of collaborative efforts with other faculty

Secondary Evidence

5. Citation of candidate's work by other scholars.
6. Publication of specialized reference books or publication of chapters in these books, or publication of textbooks that have passed editorial boards.
7. Publication of review articles in peer-reviewed journals.
8. Publication of monographs.
9. Publication of papers in proceedings.
10. Publication of articles in non-refereed professional journals.
11. Publication of abstracts of scholarly presentation.
12. Presentation of research at professional meetings.
13. Participation in specialized workshops, lectures, or colloquia, especially at other institutions.
14. Editing of books.
15. Book reviews.
16. Receipt of non-competitive research grants and contracts.

17. Nomination for and receipt of honors or awards that recognize the quality of scholarship.
2. Annual Review. Each clinical faculty member is required to submit an annual report summarizing his/her accomplishments in instruction, scholarship, and service as identified in the letter of appointment along with any other activities completed during the previous calendar year. Typically this report is submitted to the department chair and, if applicable, center director and/or program director by February 1. The department submits a copy of the report to the Office of Faculty Affairs and Curriculum. This report should adhere to the format provided. The faculty member's current curriculum vitae should be attached to the report.

The annual report is reviewed by the administrative head(s) of the department, program and/or center in which the faculty member's appointment is based. Primary responsibility for administrative evaluation of a clinical faculty member's annual report lies with the administrator (department chair, center director or program director) who heads the unit providing the majority of the funding that supports the faculty member's salary. If the faculty member's salary support is shared by more than one unit, all responsible administrators review the report and provide comments to the administrator with primary responsibility for supervision of the faculty member. Further, while final authority for evaluation of the annual review resides with a single administrator, it is expected that the evaluation will reflect the consensus of those who have provided comment. Evaluation of a faculty member's report will be based on the criteria and standards associated with his/her current rank (see section C.1) in context of the distribution of effort defined in the appointment letter and his/her individual goals and objectives.

The primary supervisor of a clinical faculty member will meet with the faculty member to communicate the administrative evaluation. During this meeting strong and weak points in a faculty member's performance will be noted. In addition goals and objectives for the next year will be developed; the subsequent annual review will focus on performance relative to these goals and objectives. This evaluation will be provided to the faculty member in the form of a written summary. This evaluation should be completed by April 15.

3. Promotion. A promotion from instructor to senior instructor or from any instructor rank to Clinical assistant professor can be recommended based on department review and concurrence from the dean.

Procedures for consideration of promotion within the professorial ranks are similar to those described for the annual review. To apply for promotion, the candidate must submit the relevant sections of the primary and secondary files as described for the Tenure and Promotion process (<http://www.sc.edu/tenure/forms.shtml>) For the primary file, the candidate should complete sections II.A (personal information), II.C

(teaching history), II.E (service and outreach activities), II.D (scholarly and professional publications) if applicable and III (personal statement). The secondary file should include documentation of activities listed in the primary file (e.g., full CV, quantitative student course evaluations, publications). In general, letters from external reviewers are not required, but may be requested on an individual basis. The application is reviewed by an ad hoc committee appointed by the appropriate department chair, center or program director and the associate dean for faculty affairs and curriculum. This ad hoc committee has a minimum of four members: the department chair and/or center/program director, two faculty members from the candidate's home department, and one faculty member from a different academic department; at least one member of the ad hoc committee should be a clinical faculty member at or above the rank to which the candidate is applying. The associate dean for faculty affairs and curriculum serves as an ex officio member of the committee. Each member of the committee must submit a written ballot. Recommendations are forwarded to the Dean for review and recommendation to the Provost concerning the requested promotion.

The possible promotions are:

- Instructor to Senior Instructor
- Clinical Instructor to Senior Instructor (internal title of senior clinical instructor can be used)
- Instructor/Clinical Instructor/Senior Instructor to Clinical Assistant Professor
- Clinical Assistant Professor to Clinical Associate Professor
- Clinical Associate Professor to Clinical Professor

4. Appointment, Reappointment, and Termination of Clinical Faculty. Appointments/reappointments of clinical faculty shall be in writing and shall specify the beginning and ending dates of the appointment. Appointments shall terminate on the date specified and no further notice of non-reappointment is required. A decision to reappoint a clinical faculty member is made by the dean based on satisfactory performance, the availability of funds, and a review of the recommendation(s) of the relevant department chair, program and/or center director.

A decision not to reappoint is based on either non-availability of funds or an unsatisfactory annual report and evaluation by the department chair and/or center director, and the associate dean for faculty affairs and curriculum. Such a conclusion would be made after thorough review of the evaluations and in the context of any active business plan for the position, if applicable.

5. Change of Status. Changing the appointment status of a full-time clinical faculty member to tenure track is an administrative action, not governed by procedures for promotion within the tenure track, and does not require a new search, provided a proper search was conducted initially. However, this change does require the approval of the tenured and tenure-track faculty of the affected unit unless a competitive search is conducted and the clinical-track faculty member is the candidate of choice for a tenure track

position. See also ACAF 1.18 and USC Columbia *Faculty Manual*, Section 2. After having served as a full-time faculty member for not less than two academic years, a faculty member may be considered for reappointment at the appropriate tenure-track rank if the unit criteria for appointment at that rank have been met, and if the faculty member was hired as a result of a proper search. Administrative change from a clinical-track position to a tenure-track position must also be recommended by the dean and approved by the provost.

D. Roles, Rights, and Responsibilities

Each clinical faculty has **similar** rights and privileges as tenure track faculty with the several exceptions; these include tenure or accruing time in service for tenure. In accepting an appointment to the Clinical faculty of the Arnold School of Public Health, an individual commits to continuing professional development and assumes a responsibility for active involvement in the governance, management, and development of the School, the department and, if applicable, the center in which the appointment is based. Clinical faculty members also accept responsibility for respecting the rights of students, other faculty, and staff. Every clinical faculty is expected to maintain honesty and integrity in all professional activities and to adhere to all stated policies and procedures of the School.

In addition, the following policies apply to clinical faculty:

- Clinical faculty members are expected to participate actively in the governance, management, and development of the School, their department and, if applicable, program or center.
- Clinical faculty may vote at the departmental level as specified by the policies of the home department.
- At the school level, clinical faculty members are not eligible to serve on the Committee on Tenure and Promotion.
- Clinical faculty members with unrestricted term graduate faculty status are eligible to serve on the school's Academic Programs Committee and may vote on such issues at the school level.
- Clinical faculty members are eligible to act as principal investigators on extramural grant applications.
- Clinical faculty members are eligible for service on departmental and School committees, with the exceptions noted above, and may serve as committee chairs.
- Clinical faculty members may be appointed to administrative positions and are eligible for awards at departmental and School levels.
- Clinical faculty members are not eligible for sabbatical leave, but they may be considered for a professional leave with or without pay.
- Clinical faculty members are eligible for administrative and research salary supplements in accordance with University guidelines for justification and

approval.

- Clinical faculty members with unrestricted term graduate faculty status are eligible to serve as academic advisors to graduate students.
- Clinical faculty members with unrestricted term graduate faculty status are eligible to serve on student thesis and doctoral committees with the recommendation of their academic department. Clinical faculty of any rank can chair a thesis committee, and clinical professors can chair doctoral committees. However, appointment of clinical faculty members to doctoral committees must be consistent with all current Graduate School policy. Currently clinical faculty can co-chair a doctoral committee with a tenure-track faculty but are not allowed to chair a committee.

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APPENDIX

Policies and Procedures for Promotion of Clinical Faculty Arnold School of Public Health University of South Carolina

1. The review process for promotion of clinical faculty is coordinated by the Office of Faculty Affairs and Curriculum. An ad hoc committee appointed by the appropriate department chair, center or program director and the associate dean for faculty affairs and curriculum has primary responsibility for reviewing the promotion file. This ad hoc committee has a minimum of four members: the department chair and/or center/program director, two faculty members from the candidate's home department, and one faculty member from a different academic department; at least one member of the ad hoc committee should be a clinical faculty member at or above the rank to which the candidate is applying.
2. Evidence supporting the qualifications of a faculty member for promotion may be solicited and submitted from many sources. All such evidence shall be submitted in written form and signed by the author. Hearsay or personal opinion outside the context of the following policies, whatever the source, may not be any part of the decision making process.
3. Consideration for promotion shall not be influenced by the age, sex, race/ethnicity, creed, religion or the educational institution from which the candidate graduated.
4. Evidence submitted will be judged according to the overall pattern of performance. Decisions regarding promotion will depend primarily on evidence of a consistent pattern of achievement since the date of appointment to the present rank (or January 2001, whichever is later) in the Arnold School at the University of South Carolina.
5. A decision to seek promotion should occur after consultation with the candidate's department chair and/or center director, senior faculty, and the dean's office.
6. Individual files relevant to promotion matters shall be maintained in the dean's office. Confidentiality is required in all aspects of the deliberative process when considering the candidates file.
7. Letters from at least three external reviewers are not required. However, the candidate, the department chair and/or center director, and the associate dean for faculty affairs and curriculum can submit names of potential reviewers if desired. In order to eliminate any conflict of interest, it is important that none of those chosen should have close association with the candidate, e.g., dissertation advisor, co-author or co-principal investigator. It is generally expected that the external reviewers will be nationally recognized in the candidate's area of expertise or a closely related area, and must be at or above the desired rank or equivalent status of the candidate. The Office of Faculty Affairs and Curriculum will contact each external reviewer and forward the candidate's

current curriculum vitae, relevant documentation of teaching effectiveness, copies of no more than five publications selected by the candidate. The external reviewers will receive the Clinical Faculty Policies and Procedures document as a guide.

8. Because promotion of clinical faculty is an internal decision, the timeline can be set individually for each candidate. However, to allow sufficient time for external reviewers and internal evaluation of the file, the following guidelines are recommended; the time frame can be shortened if no external reviewers are solicited.

Month 1

- The candidate provides names of potential external reviewers.
- Office of Faculty Affairs and Curriculum solicits additional names of potential reviewers from the candidate's department chair and/or center director and the associate dean for research and contacts the potential reviewers for agreement to review the file.
- The candidate provides five copies of a current curriculum vitae and selected manuscripts for distribution to the external reviewers.
- The Office of Faculty Affairs and Curriculum distributes the provided material along with the Clinical Faculty Policies and Procedures to external reviewers.

Month 3

- Letters from external reviewers are due to Office of Faculty Affairs and Curriculum.
- The candidate submits the complete primary and secondary files to the Office of Faculty Affairs and Curriculum.

The primary file includes all relevant sections of the University Tenure and Promotion file:

- II.A. Personal information
- II.C. Teaching history (if applicable)
- II.D. Scholarly and professional activities
- II.E. Service and outreach activities (if applicable)

Personal statement

The secondary file should include documentation of activities listed in the primary file (e.g., full CV, reprints of publications, main body of recent grant submission)

- By the end of month 3, the files to which letters from external reviewers have been added should be available for the ad hoc committee.

Month 4

- The ad hoc committee meets to discuss the promotion application. This discussion and the recommendation of the committee is summarized by the associate dean for faculty affairs and curriculum. The recommendation and justification is forwarded to the dean for review and recommendation to the Provost concerning the requested promotion.
- The candidate is notified in writing of the decision by the end of month 4.

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