

Promotion & Tenure Workshop: Clinician Track



Craig Peters, M.D.



Steven Bloom, M.D.



Sharon Reimold, M.D.

March 23, 2023

Agenda

The Promotion Packet:

Steven Bloom, M.D.

Associate Dean, Clinical Sciences

Professor of Obstetrics and Gynecology

The Promotion Process:

Craig Peters, M.D.

Professor, Department of Urology;

Chief of Pediatric Urology at Children's Medical Center

Promotion Criteria:

Sharon Reimold, M.D.

Professor of Internal Medicine

Vice Chair for Clinical Operations and Faculty Development

Questions and Answers with All Three Panelists

We welcome questions. Please wait until the end of the presentation.

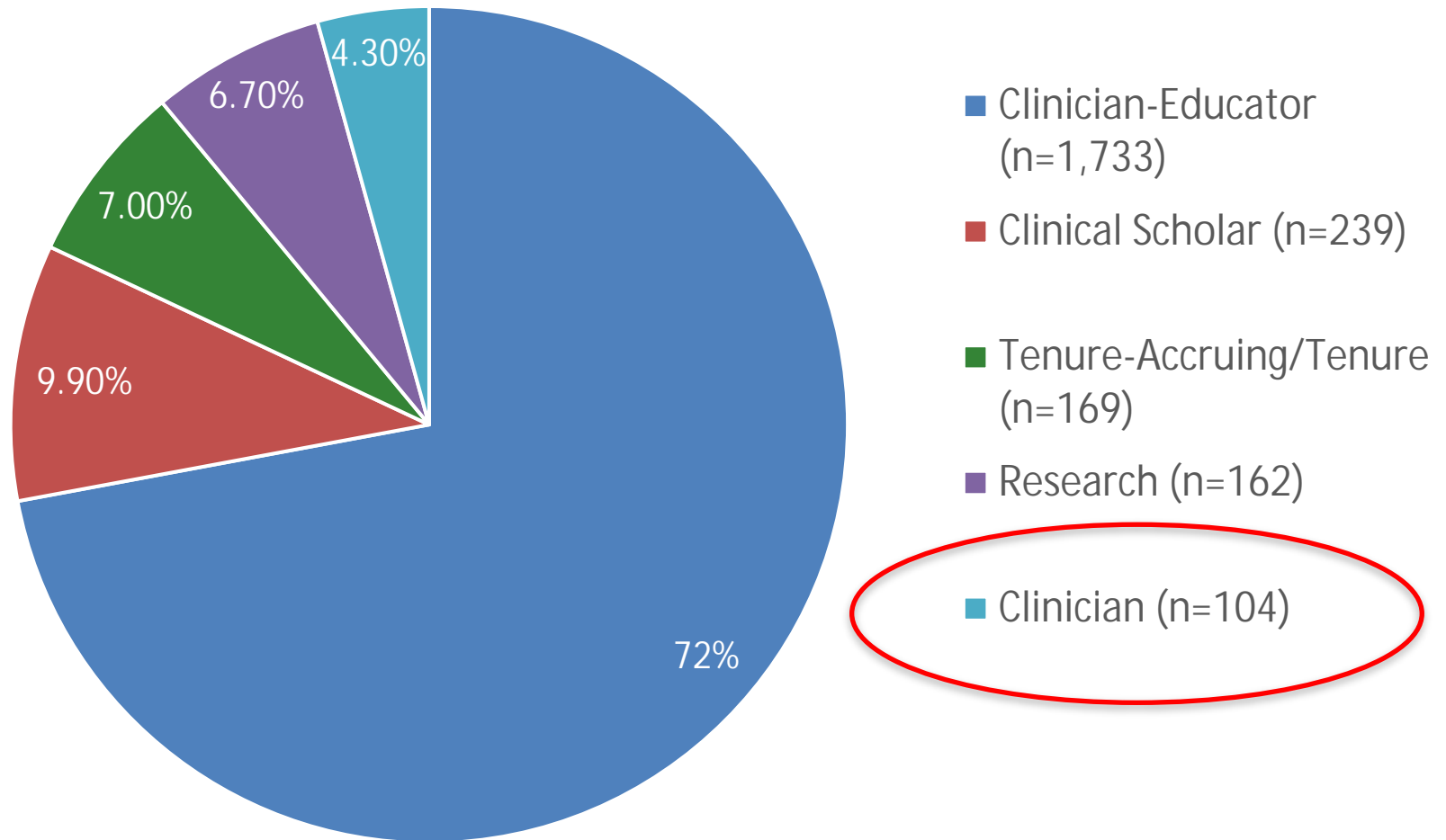
Academic Tracks

The Track you are on should align with your professional goals and should reflect how you spend your time:

- Tenure Track
- Clinical Scholar Track
- Research Track
- Clinician-Educator Track
- Clinician Track
 - ★ The nominee must spend the majority (typically 95% or greater) of their time in clinical activities, such as patient care, clinical program administration, and supervision or instruction of clinical trainees, including all students. (UTSW Policy FAC-351)

Academic Track Composition

UT Southwestern Full Time Clinical Faculty as of Sept. 7, 2022 (N = 2,407)



Check Out the New P&T Portal on the Intranet:
<https://www.utsouthwestern.net/intranet/education/faculty/electronic-promotion-tenure/>

The screenshot shows the UT Southwestern Medical Center intranet page for Electronic Promotion & Tenure. The page features a navigation menu with categories like About Us, Administration, Departments & Centers, Education (highlighted), Hospital & Clinics, Human Resources, Research, Services, and Tools. A search bar is located at the top right. The main content area is titled "Faculty Corner" and includes a sidebar with a menu of topics such as Effective Teacher Series, Electronic Promotion & Tenure (selected), Post Tenure, Faculty Diversity & Development, Faculty Salary Equity Review, Faculty Senate, Orientation, Professionalism, Standing Committees, SWAT, Web Resources, and Women's Careers. The main content area has a "Print this page" button and a heading "Electronic Promotion & Tenure". Below the heading, there is a paragraph explaining the role of the SMS Dean's Office and the use of electronic systems for processing promotions and tenure packets. A "We Recommend" section lists links for Outlook (Email login), Promotion & Tenure Login, and Telephone Directory. An "Important Information" section lists links for P&T Packet Requirements (Checklist), P&T Portal Instructions, FAC-351 UTSMS Criteria for Promotion & Tenure, Standardized Full CV Template, and P&T FAQs. A footer section provides contact information for the P & T Coordinator.

This sidebar box, titled "Important Information", contains a list of links: P&T Packet Requirements (Checklist), P&T Portal Instructions, FAC-351 UTSMS Criteria for Promotion & Tenure, Standardized Full CV Template, and P&T FAQs.

Click here for Frequently Asked Questions and Answers:
<https://www.utsouthwestern.net/intranet/education/faculty/electronic-promotion-tenure/pt-faqs.pdf>

Nomination Process

1. The Department Chair nominates candidates (sometimes with the guidance of departmental P&T Committee)
2. Promotion Packet:
 - Letter of nomination from Chair/Center Director, (and letters of support from secondary appointment chair and/or graduate program chair, if applicable)
 - Offer from another institution (if applicable)
 - CV (must use standardized format)

Use Standardized CV

CV template is available at www.utsouthwestern.edu/promten

The screenshot shows the UT Southwestern Medical Center website. The header includes the logo, "My UTSW", and a search bar. The navigation menu includes links for About Us, Administration, Departments & Centers, Education (highlighted), Hospital & Clinics, Human Resources, Research, Services, Tools, and a dropdown menu. The breadcrumb trail reads: Home / Education / Faculty Corner / Electronic Promotion & Tenure.

Faculty Corner

Effective Teacher Series

Electronic Promotion & Tenure

Post Tenure

Faculty Diversity & Development

Faculty Salary Equity Review

Faculty Senate

Orientation

Professionalism

Standing Committees

SWAT

Web Resources

Women's Careers

Print this page

Electronic Promotion & Tenure

The SMS Dean's Office is responsible for coordinating both the Promotions and Tenure Process and Post Tenure Reviews for the UT Southwestern Medical School and UT Southwestern Graduate School of Biomedical Sciences. Department Chairs/Center Directors and their designees can use electronic systems to process promotions and tenure packets and post tenure reviews for faculty members in their departments or centers.

The electronic system is not available to the School of Health Professions faculty.

The electronic systems allow:

- A paperless process
- Automated email notifications
- Real-time faculty reports
- Guided packet submission

If you have any questions about the Promotions and Tenure Process or Post Tenure Reviews, please contact the P & T Coordinator in the Dean's office at ext. 86704.

We Recommend

- Outlook (Email login)
- Promotion & Tenure Login
- Telephone Directory

Important Information

- P & T Packet Requirements (Checklist)
- P & T Website Instructions
- FAC-351 Criteria for Promotion & Tenure
- Standardized Full CV Template

Creating an Effective CV

Please visit our [website](#) for SUCCESS which contains a variety helpful videos on pertinent topics.

Roadmap to SUCCESS



Being a UT Southwestern Faculty Member

+

Creating an Effective CV

+

Promotion Criteria

+

Evaluating Progress Toward Promotion

+



Creating an Effective CV

The video is approximately 12 minutes in length but contains valuable information.

Being a UT Southwestern Faculty Member +

Creating an Effective CV -

Dr. Helen Yin, Professor of Physiology and Associate Dean of the Office of Women's Careers, covers a review of CV components and suggestions for maintenance.

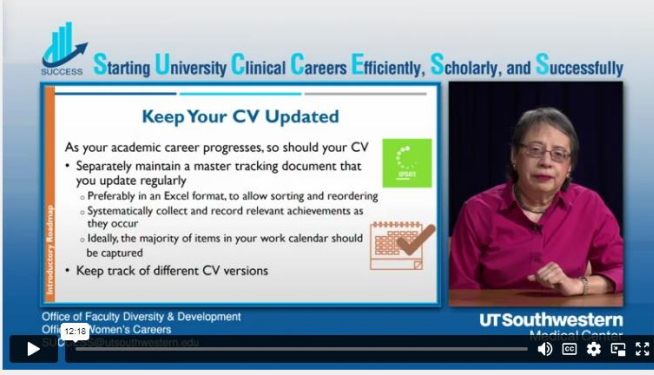
Key points include:

- Your CV is a "self-marketing tool" that should accurately showcase your professional accomplishments.
- Your CV should be polished, error-free, and accurate. Small details matter.
- Your CV is an evolving document that requires frequent maintenance. CV maintenance is your responsibility.
- Customize your CV for different purposes. Use the P&T template for internal purposes.

Training Module Duration: 12:18

Additional resources

Email me!



The video player interface shows a slide titled "Keep Your CV Updated" with the following text: "As your academic career progresses, so should your CV". The slide lists three main points: 1. "Separately maintain a master tracking document that you update regularly", which includes sub-points: "Preferably in an Excel format, to allow sorting and reordering" and "Systematically collect and record relevant achievements as they occur". 2. "Ideally, the majority of items in your work calendar should be captured". 3. "Keep track of different CV versions". The slide also features a small graphic of a calendar and a checklist. To the right of the slide is a video thumbnail of Dr. Helen Yin, a woman with glasses wearing a pink shirt. The video player controls at the bottom show a play button, a progress bar, and a duration of 12:18. The UT Southwestern Medical Center logo is visible in the bottom right corner of the video player.

Office of Faculty Diversity & Development
Office of Women's Careers

UT Southwestern
Medical Center

Promotion Criteria +

Evaluating Progress Toward Promotion +



Standardized CV Format

- Education
- Current licensure and board certifications
- Honors and awards
- Faculty and hospital appointments
- Administrative positions
- University and hospital service
- Leadership in professional societies
- Editorial and grant review activities
- Clinical trials activities
- Teaching activities
- Invited lectures
- Scientific innovations and community service
- Publications (abstracts are not included)

Nomination Packet (cont.)

- Teaching evaluations (provided by Faculty Affairs and your department)
- Clinical Service Responsibilities – the hours or days the nominee spends in clinic and/or on service each week
- Patient Satisfaction Scores – for the past 3-5 years (if applicable). For candidates with leadership roles, include Program or Unit satisfaction scores (as available).

Nomination Packet (cont.)

- Clinical Leadership/Administration (if applicable) – include a description of leadership roles including departmental or institutional clinical committee activity, community engagement efforts, leadership in quality and safety programs or projects, activities that promote diversity and inclusions, and other administrative activities that enhance our clinical programs
- Copy of Publications – (up to 5 or 10) with separate description(s)
- Professional References – 4 to 6

Timeline

Sept	Department submits names of proposed nominees to the Dean's Office
Oct 15 and Dec 1	Packets submitted to Dean's office
Nov – April	<ul style="list-style-type: none">● P&T member(s) conduct in-depth review(s)● Nomination presented to P&T Committee● P&T Committee makes recommendation to the Dean
Sept 1 (next academic year)	Promotion effective

The Promotion Process



Promotion & Tenure Workshop: Clinician Track



Panelist

Craig Peters, M.D.

Professor, Department of Urology;
Chief of Pediatric Urology at Children's Medical Center

Clinician Track

For individuals who spend the great majority of time in:

A) Patient care and/or clinical program administration (typically 95% or greater)



B) Participation in other areas is essential:

- broader educational and academic missions of UT Southwestern in conjunction with clinical care and/or community outreach is essential
- Citizenship as a member of the UT Southwestern community, by:
 - actively participating on committees, working groups, and task forces and
 - a recognized attitude that prioritizes community service over personal interests
- Medical school faculty only

What Determines Success on the Clinician Track?

Excellence in Clinical Service:

- **excellent reputation** among peers and trainees, evidenced by testimonials, requests for consultation, or wide recognition of special expertise by colleagues
- **high ratings** in patient and family satisfaction surveys
- **outstanding outcomes**, clinical productivity, and clinical performance metrics
- **leadership in quality initiatives and performance improvements**
- **clinical program development and governance**

Strategies to Assess Clinical Productivity

Evaluation of Clinical Productivity

- Patient and family satisfaction scales
- wRVU
or other value-based units of productivity
- Comments from peers and staff
- Clinical Outcomes

Strategies to Assess Clinical Productivity

Evaluation of Clinical Productivity

- Patient and family satisfaction scales:
 - Press Ganey survey
 - Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey
- wRVU
or other value-based units of productivity
- Comments from peers and staff
- Clinical Outcomes

Learning from our Patients



P R E S S G A N E Y™

Outcomes driven. Performance strong.

Patient Satisfaction Surveys Since 2004

Practice Behaviors and Interactions Assessment

Ask patients to report on their experiences with a range of health care services at multiple levels of the delivery system.

- Overall Doctor Rating 0-10?
- Recommend this Provider Office?
- Listened carefully?
- Explained understandably?
- Given easily understood instructions?
- Know important medical history?
- Show respect for what you say?
- Spend enough time with you?
- Clerks/Receptionists Helpful? Courteous?
- Access to care within 3 months?
- Appointment for care right away?
- Phone access?
- See Provider within 15 minutes this visit?
- Office follow-up with test results?
- Provider had medical records?
- Team Asked about medications?

Strategies to Assess Clinical Productivity

Evaluation of Clinical Productivity

- Patient and family satisfaction scales
- wRVU
or other value-based units of productivity
- Comments from peers and staff
- Clinical Outcomes

wRVU

- The most common way to measure Clinical Productivity is the wRVU or the work relative value unit
- Years ago wRVUs were determined for most clinical patient interactions and procedures
- Everything was normalized at that time to reading a chest XRay which was given a value of one wRVU
- Over time the value for these units has shifted
- There are national benchmarking data that tell us how many wRVUs a physician earns by location, specialty, and academic rank

Work RVUs do not work for all

1. No RVUs for new procedures
2. Anesthesia
3. Time based services
4. Pathology
5. Physicians that are responsible for panel management

	Alternate Ways to Assess Clinical Productivity
Value of New Procedure	Determine value with department and health system
Anesthesia	Use anesthesia units
Surgery	How many surgeries result from patient visit
Time Based Services	Sessions, Minutes
Primary Care	Panel Management, Outcomes of Care

P & T is not naïve

- Patient satisfaction scores are Subjective – we realize this
 - The patient's experience with the scheduling staff, clinic staff, the parking attendant can all influence their perception of the Clinical Experience – and you have limited control over some of these
 - Certain areas of medicine may be perceived differently – for example, a Pain Management clinic's scores may be lower, yet reflect excellent physician performance
 - Special circumstances can be explained in the chair's letter and provide more appropriate comparisons
- RVU's only tell part of your story
 - RVU assignments are affected by political forces – Zero-Sum Game
 - Some specialties can generate larger numbers of RVU's with similar levels of "effort" – we recognize this
 - Chairs can provide perspective and local comparisons
 - Trends in RVU generation are relevant

Promotion Criteria for Clinicians



Promotion & Tenure Workshop: Clinician Track



Panelist

Sharon Reimold, M.D.

Professor, Internal Medicine

Internal Medicine Vice Chair for Clinical Operations and
Faculty Development

What Determines Success on the Clinician Track?

Part B- Other Areas of Required Excellence

2. Academic Participation

- The nominee *must* demonstrate significant achievement in at least one of the following:
 - ✦ excellence as a teacher, including formal mentoring or precepting junior faculty, trainees, students, or other members of the community
 - ✦ active participation in scholarly activities such as clinical trials, observational research, or any other published means of generating or disseminating knowledge, including book chapters, clinical case and series reports, web publications, or national clinical guidelines
 - ✦ regional or national leadership in quality improvement or innovation and high-value healthcare
 - ✦ active committee participation or leadership in regional or national organizations and invitations to participate in extra-institutional CME activities
 - ✦ leadership in promoting diversity and a culture of inclusion or participation in community engagement.

How Can Clinicians Contribute to Academic Participation?

Common Types of Clinical Research: Studying Processes & Outcomes of Care

- Assessing the quality, access, cost, safety, disparities, timeliness, coordination, outcomes (clinical and patient-centered)
- Examples:
 - Are patients getting guideline recommended care for a certain condition or disease? Which patients?
 - What are the patient, provider, system factors associated with better quality, access, outcomes?
 - What processes of care (drugs, devices, procedures, strategies) are associated with better outcomes?

Studying Patients and Providers

- Patients:
 - Attitudes, knowledge, beliefs about their disease, treatment, providers
 - Examples: knowledge/beliefs about COVID, vaccines, medical mistrust
- Providers: MDs, APPs, RNs, clinics, hospitals, health systems
 - Knowledge, attitudes, beliefs
 - Behaviors: practice style, prescribing patterns, communication style, procedural skill, teamwork
 - Experience: training, specialty, years in practice
 - Personal characteristics: impact of age, gender, race/ethnicity

Types of Scholarship You Can Realistically Do ... With Some Assistance

- Chart review studies: Abstract medical record/EHR data on:
 - Quality, safety, disease severity, clinical/family history, social determinants of health, free text findings from imaging tests, procedure notes, pathology reports
 - What % of patients get guideline concordant care; reasons for lack of follow-up colonoscopy in patients with a positive FIT test; how many readmission or medical errors were potential preventable?
- Qualitative research: interpret/code transcripts of conversations from interviews, focus groups (patients, providers, caregivers)
 - Reasons for hospital readmission; barriers to end of life care among minorities with advanced cancer

Types of Scholarship You Can Realistically Do ... With Some Assistance

- Survey research: patients, providers, community members
 - Help select important domains, refine questions/responses, interpret findings
 - Patient's positive/negative beliefs about statins, inhaled steroids; weighing pros/cons of carotid surgery vs. stenting vs. medical therapy for asymptomatic carotid artery disease
 - Physician attitudes about impact of EMR on quality, safety, pajama time, burnout
- Medical education research:
 - Assess trainees knowledge, attitudes, clinical reasoning, skills (exam, history taking, communication), intervention effects, progression, specialty choice
 - Often use survey research and direct observations techniques (OSCE)

Some Additional Considerations in the Evaluation of the *EDUCATION* Contributions of the Clinician Track Faculty

- Clinician track faculty who supervise students and trainees in direct care of patients may have this effort counted towards their clinical productivity.
- Educational activities *are not* required for this track. However, if a Clinician Track faculty has trained residents or students, that certainly can be considered towards the 95% of effort in clinical care and administration.
- On the other hand, this track is not envisioned as the appropriate track for residency program directors who have 50% of their time protected for administration of educational programs.

What Determines Success on the Clinician Track?

3. Citizenship as a Member of the UT Southwestern Community

- demonstrated by willingness to take part in committees, working groups, and task forces, and a recognized attitude that prioritizes community service over personal interests.

Clinician Track versus Clinician-Educator Track vs Faculty Associate

1. Academic and Educational Participation
 - A. Clinician Track must participate in the broader educational and academic missions to warrant academic promotion, separating this track from **Faculty Associates**
 - B. Scholarship may satisfy this academic requirement but is not essential on this track, separating this track from the **Clinician-Educator Track**
2. Leadership in promoting diversity and a culture of inclusion or participation in community engagement – may be considered in evaluation of “greater academic participation”
3. Clinical program administration- may now considered as a component of clinical care. Clinician track faculty will typically spend 95% of professional time in direct patient care and/or clinical program administration.

Process for Switching to Clinician Track

- If currently on another track, a formal letter of request from the Chair/ Center Director should follow the format and process:

The letter should include:

- Current rank/track and proposed rank/track
- Proposed effective date
- Justification for track switch
- Acknowledgement that the faculty member is aware that due to the track change, he/she will not be eligible to be considered for promotion for 3 years from the date of the change. If an exception to the 3-year time period is being requested, this must be specifically mentioned in the letter.
- Draft modified letter of intent
- Current CV

Clinician Track Academic Titles

- Strong clinical focus will be recognized:
 - Clinical Assistant Professor of Department x
 - Clinical Associate Professor of Department x
 - Clinical Professor of Department x
- Volunteer faculty will receive a different academic title
 - Adjunct Assistant Professor of Department x
 - Adjunct Associate Professor of Department x
 - Adjunct Professor of Department x

Time to Promotion

- Appropriate timing of promotion will vary depending on clinical experience of the clinician faculty member.
- The first group of Clinician Track faculty who will be eligible for promotion will be considered by P&T committee between December 2022-April 2023.
- If successfully promoted, the Clinician promotion will become effective September 1, 2023
- Potential track switches and timing of potential promotion should be discussed with Department Chair and/or Division Chief.

Time to Promotion

- Track switches typically require a 3-year period of evaluation in track before faculty member is eligible for promotion
- A CLINICIAN Track faculty who switches from another track could be eligible for promotion in time frames less than 3 years if:
 - Chair/Center Director requests a waiver of the 3 year wait period for consideration of promotion after a track switch and it is approved by Dean.
 - If the waiver is approved by the Dean, the department could then submit the faculty member's P&T packet for consideration/review during fall of 2022

Evaluation

Please complete a short evaluation of this workshop in the chat box. This will help us improve our program. Thank you!

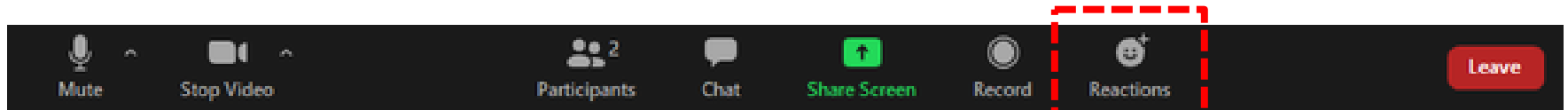
Promotion & Tenure Workshop: Clinician Track

Panelists:

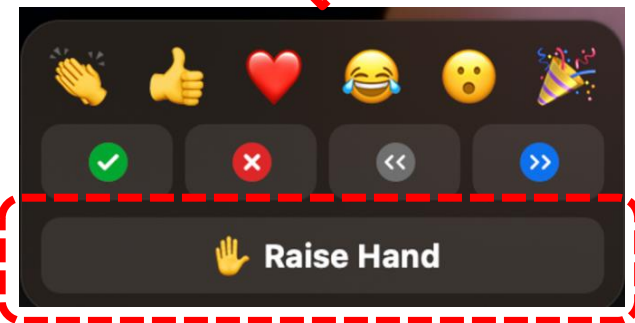
Craig Peters, M.D., Steve Bloom, M.D.,
and Sharon Reimold, M.D.



Questions?



If you would like to ask a question, please **“raise your hand”** by selecting *Reactions* located at the bottom of your menu screen. A popup window will appear with the option for you to “raise your hand.”



Once you have been called upon, you may unmute yourself to speak.



Thank You!

